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Form **990-PF** 

Department of the Treasury

### **Return of Private Foundation** or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545-0052 2009

		ar year 2009, or tax year beginning	and ending	10 8	salisiy Sta	ne reporting	requirements	
			turn of a former public	- cha-	rity.		Final return	<del></del>
G	песк а		turn of a former public ress change		1	change	Final return	
			ress change		I Maille		loyer identification num	
	the IR	S Name of foundation					-2988287	inai
	abel. erwise	JANET STONE JONES FOUNDAT:	ION				phone number (see page 1	() of the instructions)
	ei wise orint	Number and street (or P O box number if mail is not delivere		Roon	n/suite		4-977-4420	o of the mandenons,
	type.	% SILVERCREST, 614 E. HIGH	·	11001	in suite		emption application is pend	ling check here
	Specifi					1	oreign organizations, check	
Instr	uction		22902				oreign organizations meeti	_
H C	heck to	ype of organization X Section 501(c)(3) exempt private					5% test, check here and at	7 []
			e private foundation			E If priv	vate foundation status was	terminated under
		ket value of all assets at end J Accounting method:	X Cash Ac	crual		secti	on 507(b)(1)(A), check her	re ▶ ∐
of	year (f	rom Part II, col (c), Other (specify)				F If the	foundation is in a 60-mon	th termination
lın	e 16)	\$ 121,324 (Part I, column (d) must	be on cash basis)			unde	r section 507(b)(1)(B), che	ck here
Pa	art I	Analysis of Revenue and Expenses (The	(a) Revenue and	Ι				(d) Disbursements
		total of amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books	(b	Netini Inco		(c) Adjusted net income	for charitable purposes
		the amounts in column (a) (see page 11 of the instructions) )		ļ				(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	347,723	3				
	2	Check ► ☐ If the foundation is <b>not</b> required to attach Sch B		<u> </u>		•••••		
0	3	Interest on savings and temporary cash investments		┼				
2010	4	Dividends and interest from securities		<b></b>				
	5a	Gross rents						
<b>9</b> 7	b	Net rental income or (loss)	1 007	<del>,  </del>				
e,	6a	Net gain or (loss) from sale of assets not on line 10	-1,027	<del>'</del>	······································	······································		
SCANNED Represed	b	Gross sales price for all assets on line 6a 158, 331		+		57,251		
	7	Capital gain net income (from Part IV, line 2)	7	-		31,231	0	
Щ	8 9	Net short-term capital gain Income modifications		<del> </del>				
=	10a	Gross sales less returns & allowances		1-	·····			
\$	b	Less Cost of goods sold MAY DA 2010		1				
SC	c	Gross profit or (loss) (attach schedule)						······································
••	11	Other income (attach schedule) GDEN, UT Total, Add lines 1 through 11						
	12	Total. Add lines 1 through 11 OGUEN, U1	346,696	5		57,251	0	
S	13	Compensation of officers, directors, trustees, etc						
enses	14	Other employee salaries and wages						
	15	Pension plans, employee benefits		<u> </u>				
X	16a	Legal fees (attach schedule)		4				
ē	b	Accounting fees (attach schedule)		<u>.</u>				
Ę	С	Other professional fees (attach schedule) Stmt 1	3,000	4_		1,500		1,500
Operating and Administrative Exp	17	Interest	4 ==-	+		1 501		
nis	18	Taxes (attach schedule) (see page 14 of the instructions) <b>Stmt 2</b>	1,559	<u>-</u>		1,534	<del></del>	25
Ξ	19	Depreciation (attach schedule) and depletion	<del></del>	+			-	
Αq	20	Occupancy		+				
þ	21 22	Travel, conferences, and meetings		+				
ā	23	Printing and publications Other expenses (att sch.) Stmt 3		+		<del></del>	<del></del>	
ij.	24	Total operating and administrative expenses.		1			-	
rat		Add lines 13 through 23	4,559			3,034		1,525
þ	25	Contributions, gifts, grants paid	219,890			- , <del>-</del>		219,890
0	26	Total expenses and disbursements. Add lines 24 and 25	224,449			3,034	0	
	27	Subtract line 26 from line 12	······································	1				
	а	Excess of revenue over expenses and disbursements	122,247	7				
	b	Net investment income (if negative, enter -0-)				54,217		
		Adjusted net income (if negative, enter -0-)					0	<u> </u>
For I	Drivan.	Act and Panenwork Reduction Act Notice, see page 3	0 of the instructions					Form 990-PF (2009)

6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Form 990-PF (2009)

121,324

5

6

Part IV Capital Gains ar	nd Losses for Tax on Investme	ent Income			
(a) List and describ 2-story brick ware	e the kınd(s) of property sold (e g , real estate, house, or common stock, 200 shs MLC Co )		(b) How acquired P—Purchase D—Donation	(c) Date acqu (mo , day, y	
1a STATE STREET A/	C #7051		D	Variou	s Various
b STATE STREET A/			D	Variou	s Various
c					
d					
9					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	, ···	t or other basis opense of sale	•	n) Gain or (loss) plus (f) minus (g)
a 58,941			36,826		22,115
b 99,390			64,254		35,136
c			,		
d					
е					
	g gain in column (h) and owned by the fo	oundation on 12/3	1/69	(I) Cou	oo (Col. (b) goin minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col (i)	col (k), b	ns (Col. (h) gain minus but not less than -0-) <b>or</b> sses (from col. (h))
				· · · ·	22,115
b					35,136
					33,130
C					<del></del>
d					
θ	If som also enter in	Port Line 7			
2 Capital gain net income or (net c	If (loss), enter -0- in	Part I, line 7		2	57,251
	ss) as defined in sections 1222(5) and (6	•			
If gain, also enter in Part I, line 8	, column (c) (see pages 13 and 17 of the	e instructions)	•		00.115
Part V Qualification Ur	nder Section 4940(e) for Reduc			3	22,115
If section 4940(d)(2) applies, leave the	e foundations subject to the section 4940 his part blank.	u(a) tax on net inv	estment income.)		
	tion 4942 tax on the distributable amour lify under section 4940(e). Do not comp		ne base period? Ye	es 🗶 No	
	each column for each year; see page 18		is before making any en	tries.	
(a)	(b)		(c)		_ (d)
Base period years Calendar year (or tax year beginning	Advisated available distants the	ns Net val	lue of nonchantable-use ass	sets (co	Distribution ratio of (b) divided by col (c))
2008		,308	32,		9.075509
2007		,940	57,	296	6.386833
2006		,292	33,		8.050913
2005		,846	36,		7.997115
2004		,112	16,		13.811238
		,			
2 Total of line 1, column (d)	E year have poried duride the total on	hao 2 hu Ei as hu t	sho	2	45.321608
	5-year base period—divide the total on last been in existence if less than 5 year		nie	3	9.064322
4 Enter the net value of nonchanta	ble-use assets for 2009 from Part X, line	e 5 .		4	19,799
5 Multiply line 4 by line 3				5	179,465
6 Enter 1% of net investment incor	me (1% of Part I, line 27b)			6	542
7 Add lines 5 and 6	•	•		7	180,007
8 Enter qualifying distributions from	n Part XII. line 4			8	221,415
If line 8 is equal to or greater tha	n line 7, check the box in Part VI, line 1t	o, and complete th	nat part using a 1% tax i		
Part VI instructions on page 18		<del></del>			000 DE

form 990-PF (2009) JANET STONE JONES FOUNDATION 13-2988287								
Pa	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instruction	<u>;)</u>						
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.							
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)							
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			542				
	here ▶ X and enter 1% of Part I, line 27b							
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of							
	Part I, line 12, col. (b)							
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0				
3	Add lines 1 and 2			<u>542</u>				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0				
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		.,	542				
6	Credits/Payments.							
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 767							
b	Exempt foreign organizations—tax withheld at source 6b							
C	Tax paid with application for extension of time to file (Form 8868)							
d	Backup withholding erroneously withheld 6d 6d							
7	Total credits and payments Add lines 6a through 6d			<u> 767</u>				
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8							
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed							
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			<u> 225</u>				
11	Enter the amount of line 10 to be: Credited to 2010 estimated tax ▶ 225 Refunded ▶ 11							
Pa	art VII-A Statements Regarding Activities							
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	<u> </u>	Yes	No				
	participate or intervene in any political campaign?	1a		X				
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19	-						
	of the instructions for definition)?	1b		X				
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials							
	published or distributed by the foundation in connection with the activities							
C	Did the foundation file Form 1120-POL for this year?	1c		X				
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.							
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$							
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed							
	on foundation managers 🕨 \$							
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	<u> </u>	X				
	If "Yes," attach a detailed description of the activities.							
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of							
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X				
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	<u> </u>	X				
b	If "Yes," has it filed a tax return on Form 990-T for this year?  N/A	4b	<u> </u>					
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	Ļ	X				
	If "Yes," attach the statement required by General Instruction T							
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either							
	By language in the governing instrument, or							
	By state legislation that effectively amends the governing instrument so that no mandatory directions that							
	conflict with the state law remain in the governing instrument?	6	X					
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	ļ				
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the							
	instructions) <b>NY</b>	*						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General							
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X	ļ				
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or							
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page							
	27)? If "Yes," complete Part XIV	9	<u> </u>	X				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their							
	names and addresses	10		X				

Form	990-PF (2009) JANET STONE JONES FOUNDATION 13-2988287				P:	age <b>5</b>
Pa	art VII-A Statements Regarding Activities (continued)					
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the					
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)			11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before					
	August 17, 2008?			12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application	?		13	X	L
	Website address ► N/A					
14		e no 🕨	434-9	77-	442	0
	614 E. HIGH ST.					
	· · · · · · · · · · · · · · · · · · ·	IP+4 ▶	22902			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here	. 1	1			▶
	and enter the amount of tax-exempt interest received or accrued during the year	<u> </u>	15			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required					<del></del> -
4-	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.				Yes	No_
1a	During the year did the foundation (either directly or indirectly):  (1) Engage in the sale or explanation of property with a discussified person?	Yes	X No			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	res	X No			
	disqualified person?	Yes	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for					
	the benefit or use of a disqualified person)?	Yes	X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		_			
	foundation agreed to make a grant to or to employ the official for a period after		_			
	termination of government service, if terminating within 90 days)	Yes	X No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		_			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?		N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here		▶ □			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		/-			
_	were not corrected before the first day of the tax year beginning in 2009?		N/A	1c		<u> </u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private					
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)).					
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?	Yes	X No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20	res	A NO			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)					
_	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to					
	all years listed, answer "No" and attach statement—see page 20 of the instructions.)		N/A	2b	İ	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		Ť			
	<b>▶</b> 20 , 20 , 20 , 20					
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		_			
	at any time during the year?	Yes	X No			
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or					
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the					
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of					
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the					
	foundation had excess business holdings in 2009.)		N/A	3b		<u> </u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its					7.5
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	'		4b	1	$\mathbf{x}$

4b X Form 990-PF (2009)

Form	990-PF (2009) JANET STONE J	ONES FOUNDATION	13-2	2988287			Page 6
Pa	art VII-B Statements Regarding	<b>Activities for Which Forn</b>	n 4720 May Be R	Required (cont	tinued)		
5a	During the year did the foundation pay or inc	cur any amount to:		_	_		
	(1) Carry on propaganda, or otherwise atter	mpt to influence legislation (section	n 4945(e))?	∐ \	res 🗓 No		
	(2) Influence the outcome of any specific pe	ublic election (see section 4955); o	or to carry on,		_		
	directly or indirectly, any voter registration	on drive?		□ ,	res 🔀 No		
	(3) Provide a grant to an individual for trave	el, study, or other similar purposes	?		res 🗓 No		
	(4) Provide a grant to an organization other	than a charitable, etc., organization	on described in	_			
	section 509(a)(1), (2), or (3), or section	4940(d)(2)? (see page 22 of the in	structions)	ן ∐	res 🗶 No		
	(5) Provide for any purpose other than relig	ious, charitable, scientific, literary,	or educational	_	_		
	purposes, or for the prevention of cruelt	y to children or animals?			res X No		
b	If any answer is "Yes" to 5a(1)-(5), did any	of the transactions fail to qualify un	der the exceptions d	escribed in			
	Regulations section 53 4945 or in a current	notice regarding disaster assistan	ce (see page 22 of th	ne instructions)?	_N/A	5b	
	Organizations relying on a current notice re-	garding disaster assistance check	here		▶ 🗌		
C	If the answer is "Yes" to question 5a(4), does	es the foundation claim exemption	from the tax				
	because it maintained expenditure responsi	bility for the grant?		N/A 🗌 🔻	res 🗌 No		
	If "Yes," attach the statement required by R	egulations section 53 4945-5(d)					
6a	Did the foundation, during the year, receive	any funds, directly or indirectly, to	pay premiums				
	on a personal benefit contract?				res 🏻 No		
b	Did the foundation, during the year, pay pre	miums, directly or indirectly, on a p	oersonal benefit cont	ract?		6b	X
	If "Yes" to 6b, file Form 8870.						
7a	At any time during the tax year, was the fou	ndation a party to a prohibited tax	shelter transaction?	. 📙 '	res 🛚 X No		
b	If yes, did the foundation receive any procei				N/A	7b	
P	art VIII Information About Offic	ers, Directors, Trustees, F	Foundation Man	agers, Highly	Paid Employe	ees,	
	and Contractors						
1 1	ist all officers, directors, trustees, foundat	ion managers and their compen	sation (see page 22	of the instruction	ıs).		
			(b) Title, and average	(c) Compensation	(d) Contributions to	(a) E <sub>11</sub>	nonce coccupt
	(a) Name and add	ress	hours per week	(if not paid, enter	employee benefit plans and deferred		ense account, r allowances
			devoted to position	-0-7	compensation	Ь—	
BE	NJAMIN BREWSTER	CHARLOTTESVILLE	DIRECTOR				
-8	SILVERCREST, 614 E. HIGH ST.	VA 22902	1.00	0	0	Ļ—	0
J	NET B. YORK	CHARLOTTESVILLE	DIRECTOR				
<u> </u>	SILVERCREST, 614 E. HIGH ST.	VA 22902	1.00	0	0	ļ	0
	JSSELL J. BELL	CHARLOTTESVILLE	SECRETARY				
	SILVERCREST, 614 E. HIGH ST.	VA 22902	1.00	0	0	├──	0
WI	IITNEY B. ARMSTRONG	CHARLOTTESVILLE	DIRECTOR				
	SILVERCREST, 614 E. HIGH ST.	VA 22902	1.00	0		L	0
2	Compensation of five highest-paid emplo	yees (other than those included	on line 1—see page	23 of the instruc	tions).		
	If none, enter "NONE."	<del> </del>	<u> </u>	1			
			(b) Title, and average		(d) Contributions to employee benefit	(e) Exr	pense account,
	(a) Name and address of each employed	e paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred		allowances
		<del></del>	<u> </u>		compensation	├	
NC	ONE						
		<del></del>		<del> </del>		<del> </del> -	
	•			1			
	**		<del> </del>	<del> </del>	<del> </del>	$\vdash$	
			<del></del>	<del> </del>	<del> </del>	<del> </del>	
				1			
	<del></del>	<del></del>		<del> </del>		<del> </del>	
	•						
Tota	I number of other employees paid over \$50,0			1			$\overline{}$
ı ota	i number of other employees paid over \$50,0			<del>-</del>		- 001	)-PF (2009)
					Foi	m ฮฮเ	<i>י-</i> ורור (2009)

orm 990-PF (2	And Contractors (continued)  Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enter "NONE."  (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation ONE  In number of others receiving over \$50,000 for professional services  art IX-A Summary of Direct Charitable Activities  It the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of spanzations and other beneficianes served, conferences convened, research papers produced, etc.  Expenses  N/A		
Part VIII		dation Managers, Highly Paid En	nployees,
			<del></del>
3 Five high		T	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
	• •		
Total number o	f others receiving over \$50,000 for professional services		<b>&gt;</b>
Part IX-A	Summary of Direct Charitable Activities		
		al information such as the number of	Expenses
1 N/A			
		·	
2			
3			
4			
		·	
•••••			
Part IX-B	······································		
	o largest program-related investments made by the foundation during the tax year on li	nes 1 and 2	Amount
1 N/A			
		•	
2		··· <u>-</u>	<u>-</u>
_			
All other progra	m-related investments See page 24 of the instructions		
3			
<del></del> -			
Total. Add lines	s 1 through 3	▶ 1	

Form **990-PF** (2009)

221,415

3b

4

5

b

4

Cash distribution test (attach the required schedule)

Enter 1% of Part I, line 27b (see page 26 of the instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Pa	rt XIII Undistributed Income	(see page 26 of	the instructions)			
			(a)	(b) <sub>.</sub>	(c)	(d)
1	Distributable amount for 2009 from Part	XI,	Corpus	Years prior to 2008	2008	2009
	line 7					448
2	Undistributed income, if any, as of the er	nd of 2009 <sup>.</sup>				
а	Enter amount for 2008 only					
þ	Total for prior years: 20 , 20	, 20				
3	Excess distributions carryover, if any, to	2009:				
а	From 2004	226,296	•			
b	From 2005	292,031				
С	From 2006 .	264,654				
d	From 2007	363,138				
θ	From 2008	295,215				
f	Total of lines 3a through e		1,441,334			
4	Qualifying distributions for 2009 from Pa	rt XII,		,		,
	line 4 ▶ \$ 221,415					
а	Applied to 2008, but not more than line 2	?a				
b	Applied to undistributed income of prior y	years				
	(Election required—see page 26 of the in	nstructions)				
С	Treated as distributions out of corpus (E	lection				
	required—see page 26 of the instruction:	s)				
d	Applied to 2009 distributable amount					448
е	Remaining amount distributed out of cor	pus	220,967			
5	Excess distributions carryover applied to	2009				
	(If an amount appears in column (d), the	same				
	amount must be shown in column (a).)					
6	Enter the net total of each column as					
	indicated below:					
	Corpus. Add lines 3f, 4c, and 4e Subtra-		1,662,301			
b	Prior years' undistributed income. Subtra	act				
	line 4b from line 2b				····	
C	Enter the amount of pnor years' undistrib					
	income for which a notice of deficiency h					
	been issued, or on which the section 494	<sup>42(a)</sup>			,	
	tax has been previously assessed		`			
d	Subtract line 6c from line 6b Taxable					
	amount—see page 27 of the instructions		······································			
е	Undistributed income for 2008 Subtract					
	4a from line 2a. Taxable amount—see p	age				
	27 of the instructions Undistributed income for 2009. Subtract	lines				
ı	4d and 5 from line 1. This amount must					
	distributed in 2010	be				0
7	Amounts treated as distributions out of c	comue				
′	to satisfy requirements imposed by secti					
	170(b)(1)(F) or 4942(g)(3) (see page 27					,
	instructions)	or the				
8	Excess distributions carryover from 2004	1 not				
•	applied on line 5 or line 7 (see page 27 of					
	instructions)	or unc	226,296			
9	Excess distributions carryover to 2010	).	,			
_	Subtract lines 7 and 8 from line 6a		1,436,005			
10	Analysis of line 9:		=, ::: 0, 000			
a	Excess from 2005	292,031				
b	Excess from 2006	264,654				
c	Excess from 2007	363,138				
d	Excess from 2008	295,215				
e	Excess from 2009	220,967				

	ert XIV Private Operating Fou			tructions and Part	VII-A guestion 9)	rage it
	If the foundation has received a ruling or					_
ıa	foundation, and the ruling is effective for			iang -		
b	Check box to indicate whether the foundation			ibed in section 1 49	942(J)(3) or 4942	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year	dang touridation door	Prior 3 years	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
	investment return from Part X for	<del></del>	<del> </del>	<del></del>		
	each year listed					
b	85% of line 2a					
c	Qualifying distributions from Part XII,					·
_	line 4 for each year listed					
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					
е	Qualifying distributions made directly					<u>-</u> : .
	for active conduct of exempt activities.					
	Subtract line 2d from line 2c		<u></u>			
3	Complete 3a, b, or c for the					
	alternative test relied upon:				İ	
а	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under				]	
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test—enter 2/3					
	of minimum investment return shown in					
	Part X, line 6 for each year listed		ļ			
С	"Support" alternative test—enter					
	(1) Total support other than gross					
	investment income (interest, dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties)		·			
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)  (3) Largest amount of support from		<del>                                     </del>			
	an exempt organization					
	(4) Gross investment income		<del>                                     </del>			
Pa	art XV Supplementary Inform	nation (Complet	e this part only if	the foundation h	ad \$5.000 or more	e in assets at
	any time during the ye	•	•		. ,	
1	Information Regarding Foundation Mai					_
а	List any managers of the foundation who	have contributed mo	re than 2% of the total	contributions received	by the foundation	
	before the close of any tax year (but only	if they have contribu	ted more than \$5,000)	(See section 507(d)(2	?))	
	N/A					
b	List any managers of the foundation who	own 10% or more of	the stock of a corpora	tion (or an equally large	e portion of the	
	ownership of a partnership or other entity	r) of which the founda	ition has a 10% or great	ater interest.		
	N/A					
2	Information Regarding Contribution, G					
	Check here ▶ X if the foundation only					
	unsolicited requests for funds. If the foun		· · · · · ·	28 of the instructions) to	individuals or	
	organizations under other conditions, cor					
а	The name, address, and telephone numb	per of the person to w	nom applications shou	uld be addressed		
	N/A					
	The form in which confinctions about 1	aubanited and infi	notion and materials !!	any obayilal made at a		
þ	The form in which applications should be <b>N/A</b>	submitted and inform	nation and materials th	iey snoula include		
_						
С	Any submission deadlines: N/A					
	Any restrictions or limitations on awards,	such as by geograph	ucal areas chantable	fields kinds of institution	ons or other factors:	
u	N/A	such as by geograps	iivai aitas, Giaillable	neius, kinus Oi Instituțio	me, or other factors	
	, <del></del>				<del></del>	

**▶** 3b

Total

	mounts unless otherwise indicated	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of
	service revenue				<del></del>	the instructions )
		_				
		_	**	-		<u> </u>
		-				·
		_				
e f						
_	and contracts from government agencies					
	hip dues and assessments			_		<u> </u>
	n savings and temporary cash investments and interest from securities			14		<u> </u>
	Income or (loss) from real estate			1-3	<del></del>	
	financed property		<u> </u>			<u> </u>
	ebt-financed property					
	Income or (loss) from personal property	-	-			
	estment income					
	oss) from sales of assets other than inventory				<del></del>	-1,027
	ne or (loss) from special events				<del></del>	<del></del>
	ofit or (loss) from sales of inventory					
	enue: a					
						†
		_				
е						
12 Subtotal.	Add columns (b), (d), and (e)			0	O	-1,027
13 Total. Ad	d line 12, columns (b), (d), and (e)				13 _	-1,027
(See workshe	et in line 13 instructions on page 28 to verify calcula	itions.)				
Part XVI-						-·
Line No. ▼	Explain below how each activity for which incor accomplishment of the foundation's exempt pul instructions)					
8	INCOME IS FROM CAPITAL	TRANSACT	TONS RELAT	TO TO	PORTFOLIO	
	INVESTMENTS THAT FUND T					IG
				<del></del>		<del></del>
<del></del>					· · · · · · · · · · · · · · · · · · ·	
<del></del>					<del></del> -	
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				-		
					•	

Pa	art XVII	Information Regardate Exempt Organiza	_	ansfers To and Transact	ions ar	nd Relationshi	ips With N	oncharit	able			
1	Did the or			e in any of the following with an	v other o	rganization describ	ned			Yes	No	
•		•		n 501(c)(3) organizations) or in	•	-						
	organization			3		, <b>yy</b>						
а	_		ation to a no	ncharitable exempt organization	n of							
_	(1) Cash								1a(1)		Х	
	(2) Other	assets							1a(2)		X	
b	Other tran											
_		of assets to a noncharit	able exempt	organization					1b(1)	Ī	x	
	• •	ases of assets from a no	•	•					1b(2)		X	
	` '	l of facilities, equipment,		. •		•			1b(3)		X	
		oursement arrangements							1b(4)		X	
		or loan guarantees							1b(5)		X	
			embership oi	fundraising solicitations					1b(6)		X	
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees											X	
	•	• • •	-	plete the following schedule Co	olumn (b)	should always she	ow the fair ma	arket				
		•		ven by the reporting foundation.					•			
		-	_	nt, show in column (d) the value								
(	(a) Line no	(b) Amount involved	(c) Name	of noncharitable exempt organization		(d) Description of tra	nsfers, transact	ions, and sha	ring arrangi	ements		
N/.	A											
						· ·						
					l							
						<del></del>						
			ļ									
2a	Is the four	ndation directly or indirec	tly affiliated	with, or related to, one or more	tax-exem	pt organizations					_	
	described	in section 501(c) of the	Code (other	than section 501(c)(3)) or in sec	ction 527	?			Y	es X	No	
b	If "Yes," c	omplete the following so	hedule			· <del></del>						
		(a) Name of organization		(b) Type of organization		(0	) Description o	f relationship				
	<u>N/A</u>					·						
	_											
	Under pena	ilties of perjury, I declare that	t I have exami	ned this return, including accompany	ıng şchedu	les and statements,	and to the best	of my knowled	dge and			
	belief, it is t	rue, correct, and complete	Declaration of t	oreparer (other than taxpayer or fiduo		sed on all information			nowieage I			
					7/10	_	SECRE	7 ANCY	'			
9	Signati	ure of officer or trustee		Date		<b>/</b> T₁	tle					
뿔ㅣ			16	MA		Date	Check If		eparer's :dent: mber (see <b>Sig</b>		on	
Sign Here	-ღ_>_	Preparer's					self-employed	▶	ge 30 of the in	struction	s)	
:Š	Paid Preparer's Use Only	signature G.DAV		S HAMAR, JD, CPA		05/12/10		P	00544	405	<u> </u>	
Į	Se P	Firm's name (or yours if		crest Financial	Ser	vices, In	c.					
	ا د ته	self-employed), address,		High Street				EIN ▶	<u> </u>	<u> </u>	4.5.5	
$\perp$		and ZIP code	Charl	ottesville, VA	2290	02		Phone no 4	no 434-977-4420			
									Form 99	n-PF	(2009)	

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2009

Name of the organization **Employer identification number** JANET STONE JONES FOUNDATION 13-2988287 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and 11. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year **▶** \$ Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box in the heading of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ,

or 990-PF).

of  $\mathbf{1}$ Schedule B (Form 990, 990-EZ, or 990-PF) (2009) Page 1 of Part I Name of organization **Employer identification number** JANET STONE JONES FOUNDATION 13-2988287 Part I Contributors (see instructions) (a) (c) (d) No. Name, address, and ZIP + 4 **Aggregate contributions** Type of contribution 1 BENJAMIN BREWSTER X Person **% SILVERCREST ASSET MANAGEMENT GROUP** Payroll **Payroll** X 614 E. HIGH ST. 305,313 \$ Noncash CHARLOTTESVILLE VA 22902 (Complete Part II if there is a noncash contribution ) (a) (b) (c) (d) Name, address, and ZIP + 4 Aggregate contributions Type of contribution No. 2 JANET B. YORK Person **% SILVERCREST ASSET MANAGEMENT GROUP** Payroll 41,660 X 614 E. HIGH ST. Noncash VA 22902 CHARLOTTESVILLE (Complete Part II if there is a noncash contribution.) (a) (b) (c) (d) Aggregate contributions No. Name, address, and ZIP + 4 Type of contribution Person Payroll \$ Noncash (Complete Part II if there is a noncash contribution ) (d) (a) (b) (c) Name, address, and ZIP + 4 Aggregate contributions Type of contribution No. Person **Payroll** Noncash \$ (Complete Part II if there is a noncash contribution ) (d) (a) (b) (c) Aggregate contributions No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) (a) (b) (c) **Aggregate contributions** Name, address, and ZIP + 4 Type of contribution No. Person **Payroll** Noncash (Complete Part II if there is a noncash contribution )

me of org	Form 990, 990-EZ, or 990-PF) (2009) anization STONE JONES FOUNDATION			Page 1 of 1 of F Employer identification number 13-2988287
Part II	Noncash Property (see instructions)			
a) No. from Part I	(b)  Description of noncash property given		(c) MV (or estimate) ee instructions)	(d) Date received
1	510 SHS GENERAL DYNAMICS (GD)			
		\$	35,096	12/29/09
a) No. from Part I	(b)  Description of noncash property given		(c) MV (or estimate) ee instructions)	(d) Date received
1	200 SHS INTEL CORP. (INTC)			
		\$	4,071	12/29/09
a) No. from Part I	(b)  Description of noncash property given	1	(c) MV (or estimate) ee instructions)	(d) Date received
1	1,960 SHS RPM INT'L (RPM)		<u>-</u>	
	•	\$	40,650	12/29/09
(a) No. from Part I	(b)  Description of noncash property given		(c) VV (or estimate) ee instructions)	(d) Date received
1	1,370 SHS SONOCO (SON)			
		\$	41,422	12/29/09
(a) No. from Part I	(b)  Description of noncash property given		(c) VV (or estimate) ee instructions)	(d) Date received
2	690 SHS GREIF, INC. (GEF)			
		\$	38,119	12/11/09
a) No. from Part I	(b)  Description of noncash property given		(c) MV (or estimate) ee instructions)	(d) Date received
	•	\$		

Janet Stone Jones Foundation REALIZED GAINS AND LOSSES 7051 From 01-01-09 Through 12-31-09

, . .

			_							<u>}</u>	
<i>1</i> A	Long Term		7,140		330	16,675	10,065		35,136	35,136	
Gain Or Loss	Short Term Long Term	11,359 214 3,215	1,648	549 1,320			2,573	1,238	22,115	22,115	
	Proceeds	29,003 547 8,208	6,183 26,792	2,061 3,291	823	33,555	5,178 36,356	4,470		158,332	
	Cost Basis F	17,644 333 4,994	4,535	1,512 1,971	493	16,880	2,605	3,233		101,080	
	Unit C	33.29 33.29 33.29	50.39 50.39	50.39 12.32	12.32	10.42	10.42 21.55	21.55			
	Security	530 GREIF INC CL A 10 GREIF INC CL A 150 GREIF INC CL A	90 GENERAL DYNAMICS CORP COM 90 GENERAL DYNAMICS CORP COM	30 GENERAL DYNAMICS CORP COM 60 INTEL CORP COM	40 INTEL CORP COM 90 RPM INTE INC COM	20 RPM INTL INC COM	50 RPM INTL INC COM 20 SONOCO PRODS CO COM				S 57,252
	Quantity	53. 1	90	30	4.0	1,620	250 1,220	150			TOTAL REALIZED GAIN/LOSS
	Close Date	12/14/09 12/14/09 12/14/09	12/31/09 12/31/09				12/31/09 12/31/09	12/31/09	GAINS		REALIZED (
	Open Date	01/05/09 03/06/09 03/12/09	08/20/09 11/21/08	03/06/09 12/29/09	12/29/09	11/21/08	03/06/09 11/21/08	60/90/80	TOTAL GAINS TOTAL LOSSES		TOTAL !

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### Federal Statements

DF5027 JANET STONE JONES FOUNDATION 13-2988287 FYE: 12/31/2009

	Charitable Purpose \$\frac{1,500}{\$}\$		Charitable Purpose	\$ 25	\$ 25		Charitable Purpose	\$
ssional Fees	Adjusted Net	Kes	Adjusted Net		\$	xpenses	Adjusted Net	\$
l, Line 16c - Other Profe	Net Investment \$ 1,500 \$ 1,500	nt 2 - Form 990-PF, Part I, Line 18 - Taxes	Net Investment	L9L \$	\$ 1,534	Form 990-PF, Part I, Line 23 - Other Expenses	Net Investment	\$
Statement 1 - Form 990-PF, Part I, Line 16c - Other Professional Fees	<b>Total</b> \$ 3,000 \$	Statement 2 - Form 990	Total	\$ 767 25 767	\$ 1,559	Statement 3 - Form 990-PF,	Total	s s
Statemer	Description ACCOUNTING SERVICES FEE Total		Description	FEDERAL EXCISE TAXES - 2008 FINA NY CHARITIES BUREAU - FILING FEE FEDERAL EXCISE TAXES - 1009	Total	State	Description	Expenses BANK CUSTODY FEES OTHER Total

DF5027 JANET STONE JONES FOUNDATION
13-2988287 Federal Statements

FYE: 12/31/2009

5/12/2010 2:14 PM

### Statement 4 - Form 990-PF, Part III, Line 5 - Other Decreases

Description		Amount
BOOK ADJUSTMENT	\$_	2,998
Total	\$_	2,998

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## DF5027 JANET STONE JONES FOUNDATION 13-2988287 FYE: 12/31/2009

### Federal Statements

Statement 5 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year
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Name	Address		
Address	Relationship Status	Purpose	Amount
AKC Canine Health Associa P. Raleigh NC 27627-7941	P.O. Box 37941 PUBLIC	GENERAL	1,000
	House in Que	GENERAT.	003
Trust	n St NW-Suite		
DC 20036		GENERAL	100
American Museum of Natura Ce New York NY 10024-9981	Central Park West at 79th NONE	GENERAL	2,500
of Natura	Park West at		
	NONE	GENERAL	1,750
Animal Medical Center 51 New York NY 10065	510 East 62nd Street NONE	NEW FRAT.	25.000
Ashlawn Highland/Ashlawn 111	Fourth Street NE		
29	NONE	GENERAL	2,500
Best Friends Animal Socie 50	01 Angel Canyon Ros	Troduct	000
og/gr Club of Char	- Peachtree 9	GENERAL	00011
Atlanta GA 30309-3447	NONE	GENERAL	4,400
	1230 West Peachtree Stree		
Atlanta GA 30309-3447	NONE PUBLIC	GENERAL	2,200
Boys & Girls Club of Char PO	Box 707		•
ville VA 2290	NONE	GENERAL	24,000
Chapin School	End Avenue		0
		GENERAL	250
Chesapeake Bay Foundation 6	Herndon Avenue	ָרְ הַּמְתְּנִיתְּיִּתְּ	003
Amaports MD 21230-9104 Delta society	4 NONE FOBLIC 875 124th Avenue NE-Suite	CPNENTAL	
WA 98005	NONE	GENERAL	1,000
Delta Waterfowl Foundatio PO	BOX 3128		
Bismark ND 58502	NONE	GENERAL	200
Dept of Emergency Medicin P.	Box 800773		
rille VA 229	NONE	GENERAL	15,000
Ducks Unlimited Memphis TN 38101-0366	One wateriow1 way-P.O. Bo	I COURT	003
0000	7th Street	GENELOT	
Y 10036-2304	NONE	GENERAL	068

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## DF5027 JANET STONE JONES FOUNDATION 13-2988287 FYE: 12/31/2009

### **Federal Statements**

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Name	Address			
Address	Relationship	Status	Purpose	Amount
of Acadia Harbor ME 04609	Cottage Str NONE		GENERAL	400
Friends of Green Chimneys 400 Brewster NY 10509-2995	Doanesburg NONE		GENERAL	200
Friends of Green Chimneys 400 Brewster NY 10509-2995	) Doanesburg Road BOX 7 NONE PUBLIC		GENERAL	200
nool D 21117	Garrison F NONE		GENERAL	200
linic ville VA 22973	. Box 54 NONE	PUBLIC GEN	GENERAL	200
01450-0991	NONE	PUBLIC GEN	GENERAL	250
e soci	McConnell Koad NONE	U	GENERAL	100
ns 21 83014	West Canyon Road NONE	U	GENERAL	200
Lawrenceville School Lawrenceville NJ 08648-99	NONE	PUBLIC GEN	GENERAL	250
e F	Scribner Court NONE	PUBLIC GEN	GENERAL	2,000
ы	NONE TITTO AVENUE	PUBLIC GEN	GENERAL	200
inter Foundation lottesville VA 22	BOX 510 NONE		GENERAL	2,500
s Blue R lle VA 229	Morto NONE		GENERAL	1,400
National Audobon Society P.O. Boulder CO 80321-2506	Box 52506 NONE	PUBLIC GEN	GENERAL	200
Merrifield VA 22116-98	BOX 163/ NONE	PUBLIC GEN	GENERAL	. 500
Washington DC 20005-39	New IOFK AVE., NONE		GENERAL	250
icty school n CT 06840	BOX 997 NONE	PUBLIC GEN	GENERAL	1,000
OXIOIG ACGUEINY WESTBROOK CT 06498	BOSLON FOSL KOAC NONE	PUBLIC GEN	GENERAL	1,000

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# DF5027 JANET STONE JONES FOUNDATION

13-2988287 FYE: 12/31/2009

Federal Statements

Statement 5 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Name	Address				
Address	Relationship	Status	Pur	Purpose	Amount
Paramont Theatre 215	West Main St.	St talla			بر د
Charlottesville VA ZZ5UZ Peregrine Fund Condor Res 5868	NONE West Flying H	rubric awk Lan	GENEKAL		0000
	1	PUBLIC	GENERAL		2,000
Phillips Academy/Andover 180 Andover MA 01810-4161	Main St NONE	PITRITE	GENERAT.		250
Piedmont Environmental Co 410	Water Street E	)			
229		PUBLIC	GENERAL		10,000
Piedmont Environmental Co 410 Charlottesville VA 22902	Water Street E NONE	PUBLIC	GENERAL		5,000
ille VA 229		PUBLIC	GENERAL		2,500
Quail Unlimited P.O.	Box 610	() 	÷ 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6		7
EDGEFIELD SC 29824-0610	NONE POS FRO	PUBLIC	GENERAL		100
Scottsville VA 24590-3988 NONE	NONE	PUBLIC	GENERAL		200
Sewanee Annual Fund - Uni Univ	ty of the So	South-6			
1375-3326		PUBLIC	GENERAL		7,000
40	BULL'S BRIDGE ROAD	О			
		PUBLIC	GENERAL		2,000
Southern Environmental La 201	W. Main St.				0
905	NONE	PUBLIC	GENERAL		10,000
Special Olympics of Virgi PO B	Box 71900	OT TOTA	CENTEDAT		000
ЪО	BOX 159	FOBLIC	GENERAL		000
Madison NJ 07940-0159	NONE	PUBLIC	GENERAL		1,000
St. Jude's Research Hospi 501	St. Jude's Place		!		
Memphis TN 38105	NONE	PUBLIC	GENERAL		T, 000
St. Lukes Chapel Charlottesville VA 22902	BOX 694	PITRITC	GENERAT.		4.000
1	Virginia Chapter-490	West			
Charlottesville VA 22901	1	PUBLIC	GENERAL		10,000
PO	Box 59	1	1		0
Saranac Lake NY 12983-998	NONE Eth Ctxcct	PUBLIC	GENERAL		20,000
idesday Evening Concert's 100 Charlottesville VA 22092	JUNE STEEL	PUBLIC	GENERAL		200

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## DF5027 JANET STONE JONES FOUNDATION 13-2988287 FYE: 12/31/2009

Federal Statements

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Name Address	Address Relationship St	Status	Purpose	Amount
uestrian r 07934-995	Box 355 NONE PUBLIC	C GENERAL		100
Virginia Consort CHARLOTTESVILLE VA 22901	1658 Brandywine Drive 301 NONE PUBLIC	C GENERAL		1,000
sociati e VA 229	BOX 400852 NONE PUBLIC	C GENERAL		1,000
1620	enn	C GENERAL		1,000
33 33	¥	C GENERAL		150
1e 23 3235		C GENERAL		300
	M. Street NW NONE NOTET	C GENERAL		200
91n 30	, ,	C GENERAL		200
onservation soc 2300 NY 10460-1099		C GENERAL		1,750
э. Э	BOX 1292 NONE PUBLIC	C GENERAL		300
110	Second Avenue NONE PUBLIC	C GENERAL		200
103 103	Second Avenue NONE	C GENERAL		200
indile fund 1230 shington DC 20037-1124	Twen	C GENERAL		30,000
WIJU-EM Charlottesville VA 22904- N		C GENERAL		300
014	4233 Electic Nodu 3W-3ul NONE PUBLIC	C GENERAL		300
Idle University New Haven CT 06508-1844	OX 1044 NONE PUBLIC	C GENERAL		1,000

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5/12/2010 2:14 PM• 219,890 ß Amount Statement 5 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued) Purpose Federal Statements Status Relationship Address DF5027 JANET STONE JONES FOUNDATION Address Name FYE: 12/31/2009 13-2988287 Total

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