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# **Return of Private Foundation**

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

Note The foundation may be able to use a copy of this return to satisfy state reporting requirements

2009

OMB No 1545-0052

		e able to use a copy of this		rting requirements	
For cal	endar year 2009, or tax year beginning		, and ending		<del></del>
<b>G</b> Che	ck all that apply Initial return		ormer public charity	Final return	1
	Amended return	Address chan	ge L	Name change	
Use th	e IRS Name of foundation			A Employer identification	number
lab	<b>I</b>				
Other	wise, JONES FAMILY FOUNDATION	ON		26-1603933	
pri	•		Room/suite	<b>B</b> Telephone number	
or ty	.  0, 0 =================================	30 FIFTH AVE	NUE	(212)708-9	216
See Sp Instruc				C If exemption application is p	ending, check here
IIISTUUL	NEW YORK, NY 10111		<del></del>	D 1. Foreign organizations	s, check here
H Che	ck type of organization X Section 501(c)(3) ex	empt private foundation		Foreign organizations me check here and attach co	eeting the 85% test, proputation
	Section 4947(a)(1) nonexempt charitable trust 🔲 (	Other taxable private founda	ntion	E if private foundation sta	tus was terminated
l Fair r	market value of all assets at end of year   J Accounting	ng method X Cash	Accrual	under section 507(b)(1)	
(fron		her (specify)		F if the foundation is in a	60-month termination
▶\$	2,980,748. (Part I, colui	mn (d) must be on cash t	basis.)	under section 507(b)(1	
Part	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for chantable purposes
	necessarily equal the amounts in column (a) )	expenses per books	income	income	(cash basis only)
1	Contributions, gifts, grants, etc., received	1,764,586.		N/A	
2	· · · · · · · · · · · · · · · · · · ·				
3	Interest on savings and temporary cash investments				
_ 4		4,364.	4,364.		STATEMENT 1
2010	ia Gross rents				
	) Net rental income or (loss)				
14. E	Net gain or (loss) from sale of assets not on line 10				
Revenue	b Gross sales price for all assets on line 6a	ECEIVED			
£ 7			0.		
e 8	Net short-term capital gain	thi a t. tata 2			
<u>C</u> 9	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	na v x rain . A			
<del>발</del> 10	Gross sales less returns and allowances	man comen par al	, ,		
310	b Less Cost of goods sold	BDEN LIT			
<b>S</b>	c Gross profit or (loss)				
Ø 11	Other income				
12	! Total Add lines 1 through 11	1,768,950.	4,364.		
13	Compensation of officers, directors, trustees, etc	0.	0.		0.
14	Other employee salaries and wages				
15	Pension plans, employee benefits		. <u>.</u> .		
ğ 16	ia Legal fees				
Je l	b Accounting fees STMT 2	1,725.	0.		1,725.
₩.	c Other professional fees STMT 3	54.	54.		0.
Operating and Administrative Expenses					
Ĕ 18	Taxes STMT 4	1,000.	0.		1,000.
[일 19	Depreciation and depletion		<u>  –                                  </u>	<u> </u>	
[ 20	· · ·				
₹ 21	Travel, conferences, and meetings				
E 22	Printing and publications				
වු 23	Other expenses				
E 24					
ad	expenses. Add lines 13 through 23	2,779. 60,647.	54.	······	2,725. 60,647.
0 25	Contributions, gifts, grants paid	60,647.			60,647.
26	Total expenses and disbursements				
	Add lines 24 and 25	63,426.	54.		63,372.
27	Subtract line 26 from line 12				
	Excess of revenue over expenses and disbursements	1,705,524.			
	b Net investment income (If negative, enter -0-)		4,310.		
	c Adjusted net income (if negative, enter -0-)			N/A	
923501 02-02-10	LHA For Privacy Act and Paperwork Reduction A	Act Notice, see the instruct	ions.		Form <b>990-PF</b> (2009)

# Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30			1	
	(must agree with end-of-year figure reported on prior year's return)			1	480,568.
2	Enter amount from Part I, line 27a			2	1,705,524.
3	Other increases not included in line 2 (itemize)	SEE	STATEMENT 5	3	6,500.
4	Add lines 1, 2, and 3			4	2,192,592.
5	Decreases not included in line 2 (itemize)			5	0.
6	6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30				2,192,592.

(a) List and desc	and Losses for Tax on Ir cribe the kind(s) of property sold (e g arehouse, or common stock, 200 sha	, real estate,		(b) How acquired P - Purchase	(c) Date acquire (mo , day, yr )	d (d) Date sold (mo , day, yr )
	arenouse, or common stock, 200 Sits	S IVILO CO )		D - Donation	(1110 ; Guy; y: 7	(1110 , day, yr )
b NC	ONE .					
C						
d						
<u>e</u>	(0.5)	(=) 0 == 4 ==		<u> </u>	(b) Core or (i	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or plus expen			(h) Gain or (l (e) plus (f) min	
<u>a</u>	<u> </u>					
<u>b</u>				<del></del>		
d		_				
е						
Complete only for assets show	ng gain in column (h) and owned by	1			(I) Gains (Col (h) of (k), but not less	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess over col			Losses (from c	ol (h))
<u>a</u>						
b C					· · · · · · · · · · · · · · · · · · ·	
d					•	· · · -·
е						
2 Capital gain net income or (net c	apital loss) { If gain, also enter apital loss), enter -0	r in Part I, line 7 - in Part I, line 7		} 2		
3 Net short-term capital gain or (lo	ss) as defined in sections 1222(5) an					
if gain, also enter in Part I, line 8	, column (c)	. ,		<b>}</b>		
Part V Qualification L	Jnder Section 4940(e) for	Reduced Ta	y on Net	Investment in	come	
f "Yes," the foundation does not qua	ction 4942 tax on the distributable arr hilfy under section 4940(e). Do not co each column for each year, see instri	mplete this part		······································		Yes X No
(a) Base period years Calendar year (or tax year beginn	ing in) Adjusted qualifying dis		t value of no	(c) ncharitable-use asse	(S   (COI (b)	(d) stribution ratio divided by col (c))
2008	5	1,082.		527,56		.096826
2007		0.		527,02	4.	.000000
2006 2005						
2004						
2 Total of line 1, column (d)					2	.096826
	5-year base period - divide the total of	on line 2 by 5, or by	the number	of years		
the foundation has been in existe	ence if less than 5 years				3	.048413
4 Enter the net value of noncharital	ble-use assets for 2009 from Part X,	ine 5			4	899,888
Multiply line 4 by line 3					5	43,566
6 Enter 1% of net investment incor	ne (1% of Part I, line 27b)				6	43.
7 Add lines 5 and 6					7	43,609.
	n Part XII, line 4 n line 7, check the box in Part VI, line	1b, and complete t	hat part using	g a 1% tax rate	8	63,372.
See the Part VI instructions		<del></del>				Form 990-PF (2009

Forn	n 990-PF (2009) JONES FAMILY FOUNDATION	26-	1603	933		Page 4
Pa	ert VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see ir	nstru		
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 here X and enter 1%	1			· · · · · · · · · · · · · · · · · · ·	43.
	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-)	2	<u> </u>			0.
3	Add lines 1 and 2	3	<u> </u>			43.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	<del></del>			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	ļ			43.
6	Credits/Payments T. A. C.					
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 543	<u>-</u>				
b	Exempt foreign organizations - tax withheld at source . 6b	4				
C	Tax paid with application for extension of time to file (Form 8868)	-[				
	Backup withholding erroneously withheld 6d	4			_	
	Total credits and payments Add lines 6a through 6d	7	ļ			<u>43.</u>
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8		_		
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				
		10	<u> </u>		5	00.
	Enter the amount of line 10 to be Credited to 2010 estimated tax > 500 . Refunded >	11	L			0.
	rt VII-A Statements Regarding Activities				V	I NI -
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interven	e in			res	No
	any political campaign?			<u> 1a</u>		X
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?			<u>1b</u>		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish	ed or				
_	distributed by the foundation in connection with the activities.			4.		х
	Did the foundation file Form 1120-POL for this year?			<u> 1c</u>		<u> </u>
u	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year  (1) On the foundation   \$\bigsec\$ \$\bigsec\$ 0 \cdot					
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	-				
6	managers > \$ 0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		х
_	If "Yes," attach a detailed description of the activities.		1	<del>*</del>		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	٥r				
Ŭ	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	01		3		х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		ŀ	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		Х
	If "Yes," attach the statement required by General Instruction T.		Ī	111 111		
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 sta	e 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?			7	X	
	If "Yes," complete Part II, col. (c), and Part XV					
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	FL					
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		ļ	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section $4942(j)(3)$ or $4942(j)(5)$ for call	endar				
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV		ļ	9		<u>X</u>
10	Did any persons become substantial contributors during the tax year? If "yes," attach a schedule listing their names and addresses			10		Х

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form 4720, to determine if the foundation had excess business holdings in 2009)

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

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Х

X

3b

4a

\_\_ Yes X No

N/A

during the year?

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Part-VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to			["	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955), o	r to carry on, directly or indire	ectly,		
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y6	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		Y6	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	for		
the prevention of cruelty to children or animals?			s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	ler the exceptions described i	in Regulations		
section 53 4945 or in a current notice regarding disaster assistance (see instru		·	N/A	ib
Organizations relying on a current notice regarding disaster assistance check h				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		ined		
expenditure responsibility for the grant?			s No	
If "Yes," attach the statement required by Regulations section 53.4945	5-5(d).			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				
a personal benefit contract?	pay promising on	☐ Ya	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	arconal benefit contract?			sb X
If "Yes" to 6b. file Form 8870.	ersonal penent contract.			
	holtor transportion?		s X No	
7a At any time during the tax year, was the foundation a party to a prohibited tax s		۰۰ رـــا	· <del></del> ,-	7b
b If yes, did the foundation receive any proceeds or have any net income attribute  Book Van I Information About Officers, Directors, Trust		nagara Highly		<u> </u>
Part VIII Paid Employees, and Contractors	ees, roundation wa	inagers, nigini	,	
List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred	account, other allowances
RICHARD H. JONES	TRUSTEE	enter -0-1	compensation	011041011003
C/O BESSEMER TRUST, 630 FIFTH AVENUE	INOUTHE			
NEW YORK, NY 10111	1.00	0.	0.	0.
	TRUSTEE			
C/O BESSEMER TRUST, 630 FIFTH AVENUE	IKOSIEE			
	1.00	0.	0.	0.
NEW YORK, NY 10111	1.00		- 0.	
· · · · · · · · · · · · · · · · · · ·				
	luded on line 4) If none	anter INONE II		<del></del>
2 Compensation of five highest-paid employees (other than those inc		enter NONE.	(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit plans and deferred	account, other
	devoted to position		compensation	allowances
NONE				
	<del></del>	ļ. <u> </u>		
<u> </u>				
		ļ		
Total number of other employees paid over \$50,000			<b>&gt;</b>	0
			Form <b>9</b>	990-PF (2009)

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Part VIII Information About Officers, Directors, Trustees, Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If n	one, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensat
NONE		
Total number of others receiving over \$50,000 for professional services		<u> </u>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rel	evant statistical information such as the	Expenses
number of organizations and other beneficiaries served, conferences convened, research	papers produced, etc	
1N/A		
2		
3		
<u> </u>		
		·
4		
Dot IV Dio		
Part IX-B Summary of Program-Related Investments	A	A
Describe the two largest program-related investments made by the foundation during the	tax year on lines 1 and 2	Amount
1 N/A		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3		(

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, se	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
· a	Average monthly fair market value of securities	1a	896,214. 17,378.
	Average of monthly cash balances	1b	17,378.
	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	913,592.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
_	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	913,592.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	13,704.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	899,888.
6	Minimum Investment return. Enter 5% of line 5	6	44,994.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	44,994.
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009 (This does not include the tax from Part VI )		
C	Add lines 2a and 2b	2c	43.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	44,951.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	44,951.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	44,951.
_	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		62 272
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	63,372.
	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
	Suitability test (prior IRS approval required)	3a	- · · · · · · · · · · · · · · · · · · ·
	Cash distribution test (attach the required schedule)	3b	62 272
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	63,372.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_	4.2
_	Income Enter 1% of Part I, line 27b	5	43. 63,329.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	<del></del>
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years	qualifies for th	ne section

Part XIII Undistributed Income (see instructions)

	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2008	2008	2009
1 Distributable amount for 2009 from Part XI,				
line 7	.,, .,.,.,.,			44,951.
2 Undistributed income, if any, as of the end of 2009			2	
a Enter amount for 2008 only			0.	·····
b Total for prior years				
		0.		
3 Excess distributions carryover, if any, to 2009				
a From 2004				
b From 2005				
c From 2006				
d From 2007				
e From 2008 25,329.	25 220			
f Total of lines 3a through e	25,329.			
4 Qualifying distributions for 2009 from Part XII, line 4 ▶\$ 63,372.				
-			0.	
a Applied to 2008, but not more than line 2a	<del></del>		•	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus			<del> </del>	<del>, , , , , , , , , , , , , , , , , , , </del>
(Election required - see instructions)	43,750.			
d Applied to 2009 distributable amount	107,700			19,622.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2009	25,329.	***************************************	#+++ #+ <sub>2</sub> +, , + <sub>2</sub> , + , ++ , ++ , ++ , ++ , ++ , ++ , ++	25,329.
(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	43,750.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract	13/1300			
line 4b from line 2b		0.		
c Enter the amount of prior years'		-		
undistributed income for which a notice of				
deficiency has been issued, or on which				
the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2009 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			······
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010.	40 750			
Subtract lines 7 and 8 from line 6a	43,750.			······································
10 Analysis of line 9	1			
a Excess from 2005		Į		
b Excess from 2006	1			
c Excess from 2007				
d Excess from 2008 e Excess from 2009 43, 750.	1			
e Excess from 2009 43, 750.	i.			Corm 000 DE (2000)

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Part XIV Private Operating Form	AMILY FOUND		/II-A question (I)	N/A	103933 Fage II
				N/A	
1 a If the foundation has received a ruling of			. 1		
foundation, and the ruling is effective for			▶ L	4942(j)(3) or 4	942(1)(5)
b Check box to indicate whether the found		The transfer of the contract o	Prior 3 years	4342(J)(3) UI L 4	T
2 a Enter the lesser of the adjusted net	Tax year (a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
income from Part I or the minimum	(4) 2000	(8) 2000	(6) 2007	(", -555	(0)
investment return from Part X for					
each year listed		<del> </del>			
b 85% of line 2a c Qualifying distributions from Part XII,			<del> </del>		
line 4 for each year listed					
d Amounts included in line 2c not				-	
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities			İ		
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the			<del></del>		<del> </del>
alternative test relied upon					
a "Assets" alternative test - enter (1) Value of all assets					
` '	· · · · · · · · · · · · · · · · · · ·				
(2) Value of assets qualifying under section 4942(i)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "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(i)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					<u> </u>
Part XV Supplementary Info			if the foundatio	n had \$5,000 or m	ore in assets
at any time during t	<del></del>	instructions.)	<del>_</del> .		<del></del>
1 Information Regarding Foundation	=				
a List any managers of the foundation who year (but only if they have contributed m			itributions received by th	e foundation before the clo	ose of any tax
	1016 (11a11 \$5,000) (366 S	Section 307 (a)(2) )			
SEE STATEMENT 7	400/		· /o- on on with large part	han of the comparable of a	and a series of
b List any managers of the foundation who other entity) of which the foundation has			i (or an equally large por	tion of the ownership of a p	arthership or
NONE		•			
2 Information Regarding Contribution	on Grant Gift Loan	Scholarshin etc. F	Programs:		
Check here X if the foundation of				not accept unsolicited ren	uests for funds. If
the foundation makes gifts, grants, etc. (					
a The name, address, and telephone numb	<del></del>			·	
2 110 12110, 2221000, 212 1010, 1010	or or the person to the		• • • • • • • • • • • • • • • • • • • •		
b The form in which applications should be	e submitted and informa	tion and materials they	should include	·	
c Any submission deadlines					
d Any restrictions or limitations on awards	, such as by geographic	al areas, charitable fields	s, kinds of institutions, or	other factors	
923601 02-02-10	<del></del>			·	Form <b>990-PF</b> (2009)

3 Grants and Contributions Paid During the Ye		Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year WYMAN WORLDWIDE HEALTH PARTNERS 4 NORTH BALCH STREET HANOVER, NH 03755	NONE	PUBLIC CHARITY	GENERAL	25,000
GUARDIAN CATHOLIC SCHOOLS 4920 BRENTWOOD AVENUE JACKSONVILLE, FL 32206	NONE	PUBLIC CHARITY	GENERAL	25,000
UNITED WAY OF NORTHEAST FLORIDA 1301 RIVERPLACE BLVD., #400 JACKSONVILLE, FL	NONE	PUBLIC CHARITY	GENERAL	10,647
		<u> </u>		60 647
Total	T .	<del></del>	<b>▶</b> 3a	60,647
b Approved for future payment				
NONE				0

	Unrelated b	usiness income	Excluded t	y section 512, 513, or 514	(e)
er gross amounts unless otherwise indicated	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
Program service revenue	code		code		
<u> </u>					<del></del>
·	i I				<del> </del>
	1 1				
	l l		<del></del>		
	<del></del>		<del>-   -   -</del>		
Face and continues from accomment as					
Fees and contracts from government ago	encies				
Membership dues and assessments	<del>  </del>				
Interest on savings and temporary cash					
nvestments Dividends and interest from securities	<del></del>		14	4,364.	
Net rental income or (loss) from real estate	······································	<del></del>		1/0010	***************************************
· ·		*************			
a Debt-financed property	<del>                                     </del>				
Not debt-financed property	<del></del>	· · · · · · · · · · · · · · · · · · ·			
Net rental income or (loss) from personal					
property Other investment income	<del></del>				
Gain or (loss) from sales of assets other					
than inventory  Net income or (loss) from special events	<u> </u>		1 1-		
Gross profit or (loss) from sales of inventor	,		- <del>   </del>		
Other revenue	, <u> </u>		1 1		
1	1 1				
·	1 1				
·					
<u> </u>					
ESubtotal Add columns (b), (d), and (e)		(	o .	4,364.	
Fotal. Add line 12, columns (b), (d), and (e)	<del></del>		1	13	4,30
e worksheet in line 13 instructions to verify					
	Activities to the Accom	plishment of	Exempt P	urposes	
	for which income is reported in c ses (other than by providing funds			I importantly to the accom	plishment of

923621 02-02-10

Part XVII			nd Transactions a	nd Relationships With None	haritable	
	Exempt Organi				T	
		ectly engage in any of the following			Ye	s No
	•	(3) organizations) or in section 52		zations?		
		tion to a noncharitable exempt org	janization of		10/1	х
(1) Cas					1a(1)	$\frac{\mathbf{x}}{\mathbf{x}}$
(2) Oth					1a(2)	+^-
b Other tra		ale everent excenization			1b(1)	х
, ,	es of assets to a noncharitab	, •			15(2)	X
	tal of facilities, equipment, o	icharitable exempt organization			1b(3)	X
	nar or racinities, equipment, o mbursement arrangements	n offici assers			1b(4)	X
• •	ns or loan guarantees				1b(5)	X
• •	<del>-</del>	mbership or fundraising solicitation	ns		1b(6)	X
		ling lists, other assets, or paid emi			16	X
				ays show the fair market value of the god		
				e in any transaction or sharing arrangeme		
	•	other assets, or services received		,	·	
) Line no	(b) Amount involved	(c) Name of noncharitable	exempt organization	(d) Description of transfers, transactions,	and sharing arrange	ments
		N/A				
				ļ		<del></del>
		·				
		ly affiliated with, or related to, one		ations described		X No
	, ,	than section 501(c)(3)) or in section	1011 5277		Yes	<u> </u>
u ii tes, i	complete the following sche (a) Name of orga		(b) Type of organization	(c) Description of relat	ionship	
	N/A		(-) <u>-)</u>	(4)		
	247.22			· · · · · · · · · · · · · · · · · · ·	· - · · · · · · · · · · · · · · · · · ·	
<del></del>		· · · · ·				
	· · · · · · · · · · · · · · · · · · ·					
	-					
				ents, and to the best of my knowledge and belief	, it is true, correct,	
and comple	ete Declaration of preparer (other	r than taxpayer or fiduciary) is based on a	<i>a</i> / )	has any knowledge		
	Kichand H	Jon	6/10/10	TRUSTEE		
Signa	ature of officer or trustee		Date	Title		
υ P	reparer's		Da	ate Check if Self-	eparer's identifying r	umber
Paid Preparer's Use Only	gnature / Jun	na /you	6	0 4 1 0 employed ►		
Paid Spare	m's name (or yours BESSI		ANY, N.A.	EIN ►		
\mathbb{E}\)_48		FIFTH AVENUE	10111 0000			0.0
ad	dress, and ZIP code NEW	YORK, NEW YORK	10111-0333	Phone no 21:	2-708-91	
					Form <b>990-PI</b>	(2009)

#### Schedule B (Form 990, 990-EZ, or 990-PE)

Department of the Treasury Internal Revenue Service

#### **Schedule of Contributors**

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

OMB No 1545-0047

2009

**Employer identification number** Name of the organization JONES FAMILY FOUNDATION 26-1603933 Organization type (check one): Filers of: Section: 501(c)( ) (enter number) organization Form 990 or 990-F7 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 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** X 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 II. 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 on line H 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). Schedule B (Form 990, 990-EZ, or 990-PF) (2009) LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions

for Form 990, 990-EZ, or 990-PF.

Name of or	ganization	, E	mployer Identification number
JONES	FAMILY FOUNDATION		26-1603933
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(d) Type of contribution
1	RICHARD H. & PATRICIA JONES  12916 BAY PLANTATION DRIVE  JACKSONVILLE, FL 32223	\$1,764,58	Person Payroli Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(d)
			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(d)
			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(d) ns Type of contribution
		<b> \$</b>	Person Payroll Noncash (Complete Part II if there Is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributio	(d) ns Type of contribution
			Person Payroll Noncash (Complete Part II if there Is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributio	(d) ns Type of contribution
			Person

923452 02-01-10

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Payroll Noncash

(Complete Part II if there is a noncash contribution.)

Employer identification number

### JONES FAMILY FOUNDATION

26-1603933

		1	
(a) No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate)	Date received
Part I	acachphon of nonocon property given	(see instructions)	
	52,145 SHARES OF PEGASYSTEM, INC.		
1			
		\$ 1,764,586.	12/22/09
(a)		(-)	
No.	(b)	(c) FMV (or estimate)	(d)
from	Description of noncash property given	(see instructions)	Date received
Part I		(See mandenes)	<del></del>
ŀ			
		— I •	
		\$	
(a)			<del> </del>
No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate)	Date received
Part I		(see instructions)	
			·
		\$	
(a)		(c)	
No. from	(b)	FMV (or estimate)	(d)
Part I	Description of noncash property given	(see instructions)	Date received
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		<b>\$</b>	
			<del></del>
(a)		(-)	
No.	(b)	(c) FMV (or estimate)	(d)
from	Description of noncash property given	(see instructions)	Date received
Part I	· · · · · · · · · · · · · · · · · · ·	(coc manactions)	
[			
		_	
		\$	<del> </del>
(a)			
No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate)	Date received
Part I	•	(see instructions)	
	<del> </del>	<del></del>	
		_	

FORM 990-PF DIVIDENT	S AND	INTER	EST FRO	M SECU	RITIES	STATEMENT 1
SOURCE		GROSS	AMOUNI		ITAL GAINS IVIDENDS	COLUMN (A) AMOUNT
BESSEMER TRUST	•	•	4,364	•	0.	4,364.
TOTAL TO FM 990-PF, PART I, I	IN 4		4,364	• ===	0.	4,364.
FORM 990-PF	AC	COUNTI	NG FEES	<del></del>		STATEMENT 2
DESCRIPTION	EXPE	A) NSES BOOKS	(E NET IN MENT I	VEST-	(C) ADJUSTED NET INCOM	
TAX PREP FEE		1,725.		0.		1,725.
TO FORM 990-PF, PG 1, LN 16B		1,725.		0.		1,725.
FORM 990-PF C	THER	PROFES	SIONAL	FEES		STATEMENT 3
DESCRIPTION	EXPE	A) NSES BOOKS	(B NET IN MENT I	VEST-	(C) ADJUSTED NET INCOM	
INVESTMENT SERVICE FEE		54.		54.		0.
TO FORM 990-PF, PG 1, LN 16C		54.		54.		0.
FORM 990-PF	<u> </u>	TAX	ES			STATEMENT 4
DESCRIPTION	EXPE	A) NSES BOOKS	(B NET IN MENT I	VEST-	(C) ADJUSTED NET INCOM	
2008 TAX DUE		1,000.		0.	,	1,000.
TO FORM 990-PF, PG 1, LN 18	<del></del>	1,000.		0.		1,000.

FORM 990-PF	OTHER	INCREASE	S IN NET	ASSETS OR	FUND BALANCES	STATEMENT	5
DESCRIPTION						AMOUNT	
DIFF BTW FMV	AND BV	OF SHARE	S DONATE	D		6,5	00.
TOTAL TO FORM	990-PF	, PART I	II, LINE	3		6,5	00.
FORM 990-PF			OTHER	INVESTMENT	rs	STATEMENT	6
DESCRIPTION				VALUATION METHOD	N BOOK VALUE	FAIR MARKE VALUE	T
BESSEMER TRUS	T			COST	2,181,778.	2,969,9	34.
TOTAL TO FORM	990-PF	, PART I	I, LINE	13	2,181,778.	2,969,9	34.
FORM 990-PF		LIST		- LINE 1A DATION MANA	AGERS	STATEMENT	7

NAME OF MANAGER

RICHARD H. JONES PATRICIA K. JONES

#### JONES FAMILY FOUNDATION

## FORM 990-PF EIN 26-1603933 TAX PERIOD ENDED 12/31/09

#### Supplemental Schedule of Information

Part XIII, Undistributed Income, Line 4c

Election Under IRC REg. Sec. 53-4942(a)-3(d)(2)

Pursuant to IRC Section 4942(h)(2) and Regulation 53.4942(a)-3(d)(2), Jones Family Foundation hereby elects to treat as a current year's qualifying distributions in excess of the immediately preceding year's undistributed income as being made out of corpus.

ıgnature

Name

Title

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	حوجا	164
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Account Details					Report dated Decel Amortized tax cost Trade date basis	Report dated December 31, 2009 Amortized tax cost Trade date basis	er 31, 2009			Page 3 of 3	3 of 3
Secunty no Security name		CUSIP/ ISIN/ SEDOL	Shares/ units	Average cost per share/unit	Cost pe	Market value per share/unit	Market value	Percent of asset class	Unrealized gain/(loss) a	Estimated annual income	Current
JONES FAMILY FOUNDATION CUSTODY	ON CUSTO	DY									
CASH AND SHORT TERM											
CASH AVAILABLE											
999994 PRINCIPAL CASH			0000	\$0 00	\$0	\$0 000	\$0	%0 0	\$0	\$0	
999995 INCOME CASH			0000	\$0 00	\$0	\$0.000	\$0	%00	\$0	\$0	
999996 NET CASH			0000	\$0.00	\$0	\$0 000	\$	%0.0	\$0	\$0	
Total CASH AVAILABLE					<b>9</b>		S\$	%0:0	0\$	0\$	
CASH EQUIVALENTS											
999990 BESSEMER SWEEP PROGRAM			3,206 120	\$1 00	\$3,206	\$1.000	\$3,206	29 6%	O\$	\$4	0 12%
			7,608.580	\$1.00	\$7,608	\$1 000	\$7,608	70 4%	\$	\$11	0 14%
Total CASH EQUIVALENTS					\$10,814		\$10,814	100.0%	0,5	\$15	0.14%
Total CASH AND SHORT TERM					\$10,814		\$10,814	100.0%	0\$	\$15	0.14%
OTHER											
MISC ASSETS-NO COMMISSION											
863165 PEGASYSTEMS INC $8V$ 2,	81 2,181,778	705573103	87,351 000	\$9 12	\$796,559	\$34 000	\$2,969,934	100 0%	\$2,173,374	\$10,482	0 35%
Total MISC ASSETS-NO COMMISSION					\$796,559		\$2,969,934	100.0%	\$2,173,374	\$10,482	0.35%
Total OTHER					\$796,559		\$2,969,934	100.0%	\$2,173,374	\$10,482	0.35%
Total; BV 2)	BV 2,192,592				\$807,373		\$2,980,748		\$2,173,374	\$10,497	0.35%

Form ,8868

(Rev. April 2009)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of	of this form)		<b>▶</b> X
Oo not complete Part II unless you have already been granted an automatic 3-month extension on a previous	usly filed Fo	orm 8868.	
Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).	_		
A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and Part I only	d complete		<b>&gt;</b>
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to requi o file income tax returns.	est an exter	nsion of time	•
Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic ex noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 ele not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electrony way in a gov/efile and click on e-file for Charities & Nonprofits.	ctronically i or consolid	f (1) you war lated Form 9	nt the additional 90-T Instead,
Type or Name of Exempt Organization	Emp	oloyer identi	fication number
JONES FAMILY FOUNDATION	_	<u>86–1603</u>	1933_
Number, street, and room or suite no. If a P.O. box, see instructions.  C/O BESSEMER TRUST, 630 FIFTH AVENUE			
City, town or post office, state, and ZIP code. For a foreign address, see instructions.  NEW YORK, NY 10111			
Check type of return to be filed (file a separate application for each return):			
Form 990-BL	orm 4720 orm 5227 orm 6069 orm 8870		
C/O BESSEMER TRUST  The books are in the care of ▶ 630 FIFTH AVE ~ NEW YORK, NY 10111  Telephone No. ▶ (212) 708-9216 FAX No ▶  If the organization does not have an office or place of business in the United States, check this box  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  ox ▶ □ . If it is for part of the group, check this box ▶ □ and attach a list with the names and EINs			
I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time AUGUST 15, 2010 , to file the exempt organization return for the organization nar		The extensi	on
is for the organization's return for:  ► X calendar year 2009 or  ► tax year beginning, and ending	<u> </u>		
2 If this tax year is for less than 12 months, check reason: Initial return		Change in a	accounting period
If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3 <u>a</u>	\$	26
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated			543
tax payments made. Include any prior year overpayment allowed as a credit.  c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,	Зь	<b>\$</b>	
deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).  See instructions.	3c	1 s	0 .