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## Form 990-PF

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

OMB No 1545 0052

2009

Department of the Treasury Internal Revenue Service Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements For calendar year 2009, or tax year beginning 6/01 5/31 2010 , 2009, and ending G Check all that apply. Initial Return of a former public charity Initial return Final return Amended return Address change Name change Employer identification number Use the CHARLES H. JONES FAMILY FOUNDATION, INC. IRS label 58-1678452 Otherwise, P. O. BOX 7345 R Telephone number (see the instructions) print MACON, GA 31209 478-471-2520 or type See Specific С If exemption application is pending, check here Instructions 1 Foreign organizations, check here Check type of organization X Section 501(c)(3) exempt private foundation 2 Foreign organizations meeting the 85% test, check here and attach computation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated Fair market value of all assets at end of year Accounting method. X Cash Accrual under section 507(b)(1)(A), check here (from Part II, column (c), line 16) Other (specify) F If the foundation is in a 60-month termination 12,521,394 (Part I, column (d) must be on cash basis ) under section 507(b)(1)(B), check here Analysis of Revenue and Part I (d) Disbursements (a) Revenue and (c) Adjusted net (b) Net investment Expenses (The total of amounts in for charitable expenses per books income income columns (b), (c), and (d) may not neces-sarily equal the amounts in column (a) purposes (cash basis only) (see the instructions)) Contributions, gifts, grants, etc, received (att sch) 877,669 if the foundn is not req to att Sch B Interest on savings and temporary N/A 149,115 149,115 cash investments 35,875 35,875 Dividends and interest from securities 5a Gross rents 33,627 , 627 b Net rental income or (loss) -51,377 -600,942 6a Net gain/(loss) from sale of assets not on line 10 REVENU **b** Gross sales price for all assets on line 6a 14, 168, 053. 0 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10 a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit/(loss) (att sch) 11 Other income (attach schedule) 218,617. 32,000. Total. Add lines 1 through 11 344 000 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages Pension plans, employee benefits 16 a Legal fees (attach schedule) **b** Accounting fees (attach sch) c Other prof fees (attach sch) See St 1 86,306 81,806 4,500 SCANNED OCT 0 5 2010 17 Interest 5,321 See Stm 2 5,321 18 Taxes (attach schedule)(see instr.) RECEIVED Depreciation (attach 237 237. sch) and depletion Ċ. Occupancy <u>SEP 20</u> Travel, conferences, and meetings 21 Printing and publications. 23 Other expenses (attach schedule) OGDEN UT See Statement 3 84,767 84,767 Total operating and administrative 208,631 expenses. Add lines 13 through 23 204,131 4,500. 560,195 560,195 Contributions, gifts, grants paid Part XV Total expenses and disbursements. Add lines 24 and 25 768,826 204,131 564,695. Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements -273,482 14,486 b Net investment income (if negative, enter 0) C Adjusted net income (if negative, enter 0)

Form 990-PF (2009) CHARLES H. JONES FAMILY FOUNDATION, INC. 58-1678452 Page 2 Attached schedules and amounts in the description column should be for end of year amounts only (See instructions ) Beginning of year End of year Part II Balance Sheets (c) Fair Market Value (a) Book Value (b) Book Value 7,312,008 4,711,100 4,711,100. Cash - non-interest-bearing Savings and temporary cash investments Accounts receivable Less, allowance for doubtful accounts 4 Pledges receivable Less: allowance for doubtful accounts Grants receivable Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions) 7 Other notes and loans receivable (attach sch). 1,760,000. ASSET 1,760,000 1,760,000. Less, allowance for doubtful accounts 1,760,000. 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10 a Investments — U S. and state government obligations (attach schedule) 3,051,431. b Investments - corporate stock (attach schedule) 758,369 3,084,632 c Investments - corporate bonds (attach schedule) Investments - land, buildings, and 3,090,176. equipment basis Less: accumulated depreciation (attach schedule) See Stmt 4 3,090,176. 3,090,176. 2,997,176. 12 Investments - mortgage loans 13 Investments - other (attach schedule) 14 Land, buildings, and equipment basis Less: accumulated depreciation 594 1,757. 1,687. See Stmt 5 (attach schedule) 15 Other assets (describe ► Total assets (to be completed by all filers 12,921,147. 12,647,665 12,521,394. see instructions. Also, see page 1, item l) Accounts payable and accrued expenses 17 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, & other disqualified persons Mortgages and other notes payable (attach schedule) 21 Other liabilities (describe 0 0 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. **►** X N E T 12,921,147 12,647,665 24 Unrestricted U 25 Temporarily restricted N 26 Permanently restricted ASSETS Foundations that do not follow SFAS 117, check here В and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, building, and equipment fund Retained earnings, accumulated income, endowment, or other funds. 0 Ē 12,921,147 12,647,665 30 Total net assets or fund balances (see the instructions) Total liabilities and net assets/fund balances 12,921,147. 12,647,665 (see the instructions). Part III Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with 12,921,147. end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 2 -273.482.Other increases not included in line 2 (itemize) 3

Add lines 1, 2, and 3

Decreases not included in line 2 (itemize)

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

12,647,665.

<u>4</u>

6

Part IV Ca		osses for Tax on Investmen					
	(a) List and describe 2-story brick warehous	the kind(s) of property sold (e.g., ree; or common stock, 200 shares ML(	al estate, C Company)	(b) How acq P — Purch D — Donat	ase	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
	Keegan #3085			P		Various	Various
	. Keegan #3085	3170		P		Various	Various
c TIMBE	R SALES			P		Various	Various
d			<del></del>				
е	·						
( <b>e)</b> Gro	ss sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sal	е		(h) Gain or (e) plus (f) m	inus (g)
<u>a</u>	550,337.		74:	2,120.			-191,783.
<u> </u>	13,590,716.		14,02	6,875.			-436,159.
<u> </u>	27,000.		<del></del>	-			27,000.
d							
e Complete	only for accets showing	g gain in column (h) and owned by t	he foundation on 12/21/60	+			
(i) Fair	Market Value of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if all			(1) Gains (Coli gain minus column (F an -0-) <b>or</b> Losses (fr	r), but not less
		· · · · · · · · · · · · · · · · · · ·		-			-191,783.
b							-436,159.
							27,000.
d							
е						<del></del>	
2 Capital ga	nn net income or (net	capital loss).  If gain, also If (loss), ent	enter in Part I, line 7 er -0- in Part I, line 7	-	2		-600,942.
3 Net short-	term capital gain or (lo	ess) as defined in sections 1222(5) ai	nd (6)				
If dain, al	so enter in Part I line :	8, column (c) (see the instructions)	If (loss) enter :0.	_			
in Part I,		o, column (c) (see the mandetions)	11 (1033), critici -0-		3		-436,159.
Part V Q	ualification Under	Section 4940(e) for Reduce	d Tax on Net Investme	ent Incor	ne		
Was the founda		s part blank on 4942 tax on the distributable amo y under section 4940(e). Do not com	• •	period?		Yes	X No
1 Enter the	appropriate amount in	each column for each year; see the	instructions before making a	ny entries			
Calendar	(a) period years year (or tax year jinning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitable-use ass	sets	(col	<b>(d)</b> Distribution umn (b) divided	
	2008	34,250.	12,95	4,203.			0.002644
	2007	667,533.	14,15				0.047152
-	2006	764,583.	13,99	7,828.			0.054622
	2005	595,333.		1,212.			0.048475
	2004	366,550.	10,30	8,847.			0.035557
2 Total of I	ne 1, column (d)				2		0.188450
		5-year base period — divide the tota has been in existence if less than 5 y		}	3		0.037690
4 Enter the	net value of noncharit	able-use assets for 2009 from Part X	, line 5		4	1:	2,107,193.
5 Multiply li	ne 4 by line 3			-	_5_		456,320.
6 Enter 1%	of net investment inco	me (1% of Part I, line 27b)		ļ	6		145.
7 Add lines	5 and 6				7		456,465.
8 Enter qua	lifying distributions fro	m Part XII, line 4			8		564,695.
	s equal to or greater the structions.	an line 7, check the box in Part VI, li	ne 1b, and complete that pa	art using a	1% ta	ex rate. See the	

	990-PF (2009) CHARLES H. JONES FAMILY FOUNDATION, INC. 58-167845		Р	age <b>4</b>
Par	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see the instruc	ctions)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here			
	Date of ruling or determination letter (attach copy of letter if necessary - see instr.)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V,		1	45.
	check 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, column (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		1	45.
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-		1	45.
6	Credits/Payments.			
а	2009 estimated tax pmts and 2008 overpayment credited to 2009			
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			
7	Total credits and payments. Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here. If Form 2220 is attached.			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		1	45.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2010 estimated tax			
Par	VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	Yes	No X
t	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	1b		Х
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published	10		<u></u>
_	or distributed by the foundation in connection with the activities			v
	Did the foundation file Form 1120-POL for this year?  Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	1c		<u>X</u>
_	(1) On the foundation $\Rightarrow$ 0. (2) On foundation managers $\Rightarrow$ 0			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation 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.	-		
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		Х
<b>4</b> a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	olf 'Yes,' has it filed a tax return on Form 990-T for this year?	4b	N	/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		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	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	7	_X_	
8 a	Enter the states to which the foundation reports or with which it is registered (see the instructions)  GA			
t	of 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	8ь	Х	
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)? If 'Yes,' complete Part XIV	9		Х
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	10		_X
BAA		Form 99	0-PF	(2009)

	n 990-PF (2009) CHARLES H. JONES FAMILY FOUNDATION, INC. 58-167849 t VII-A Statements Regarding Activities Continued	52	Page 5
	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 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?  Website address  N/A  The backs are as a Complete Complet	13	X
14	The books are in care of P DWIGHI C. JUNES Telephone no P 4/0-4	71-2	520
15	Located at ► P. O. BOX 7345, MACON, GA ZIP + 4 ► 31209  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	N/A	
	and enter the amount of tax-exempt interest received or accrued during the year		N/A
Par	† VII-B   Statements Regarding Activities for Which Form 4720 May Be Required		
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Yes No
1 a	a During the year did the foundation (either directly or indirectly).		
	(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 disqualified person? Yes X No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes 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		
ı	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 the instructions)?	1ь	N/A
	Organizations relying on a current notice regarding disaster assistance check here.		
•	c 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?	1c	x
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))		
;	a 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		
1	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 the instructions.)	26	N/A
(	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.  20, 20, 20, 20		
3	a 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		
l	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.)	3ь	N/A
4.	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	х
	<b>b</b> Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b	x
BAA		Form <b>9</b> 9	1 <b>0-PF</b> (2009)

Form 990-PF (2009) CHARLES H. JONES I			58-167	8452	Page 6
Part VII-B Statements Regarding Activit		<u>n 4720 May Be Req</u>	uired (continued)	<del></del>	
5a During the year did the foundation pay or incur	•				
(1) Carry on propaganda, or otherwise attemp	-		∐ Yes X	No	
<ul><li>(2) Influence the outcome of any specific publion, directly or indirectly, any voter registra</li></ul>		4955), or to carry		No	
(3) Provide a grant to an individual for travel,	study, or other similar p	ourposes?	Yes X	No	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section			Yes X	No	
(5) Provide for any purpose other than religious educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children o	, literary, or or animals?	Yes X	No	
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53.4945 or in (see instructions)?	ne transactions fail to q a current notice regard	ualify under the exception ing disaster assistance	ns	5ь	N/A
Organizations relying on a current notice regar	ding disaster assistance	e check here	▶ 🗍		
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure response	he foundation claim exe libility for the grant?	emption from the	N/A Yes	No	
If 'Yes,' attach the statement required by Regu	ilations section 53 4945	-5(d)			
6a Did the foundation, during the year, receive an on a personal benefit contract?	y funds, directly or indi	rectly, to pay premiums	Yes X	No	
<b>b</b> Did the foundation, during the year, pay premi	ums, directly or indirect	lly, on a personal benefit	contract?	6ь	X
If 'Yes' to 6b, file Form 8870.					
7a At any time during the tax year, was the found b If yes, did the foundation receive any proceeds				No 7b	N/A
Part VIII Information About Officers, D					
and Contractors		, i carradicon mana	9010, mgm, raid		
1 List all officers, directors, trustees, foundation	managers and their co	ompensation (see instru	ctions).		
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expensother allo	e account, owances
DWIGHT C. JONES	Director	8,000.	0.		0
P. O. BOX 7006 MACON, GA 31298	2.50				
CHARLES J. JONES	Director	8,000.	0.		0
P.O. BOX 7006	1.00	8,000.	0.		U
MACON, GA 31298	51				
JOHN HORTON	Director	8,000.	0.		0
P. O. BOX 7006	1.00				
MACON, GA 31298					
_VES_JONES	Director	8,000.	0.		0
972 WESLEYAN DRIVE	2.50				
MACON, GA 31210	L	<u></u>	<u>.</u>		
2 Compensation of five highest-paid employees	1			r'NONE.'	
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation		se account, owances
None					
		_			
Total number of other employees paid over \$50,000	TEE 002061	07/05/00	<b>&gt;</b>	Form 96	0.PF (2009

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Pa and Contractors (continued)	id Employees,	,
3 Five highest-paid independent contractors for professional services — (see instructions). If none,		
enter 'NONE.'	<del>,</del>	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compens	sation
None		
	<del></del>	
Total number of others receiving over \$50,000 for professional services	<u> </u>	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of	Expense	<u> </u>
organizations and other beneficiaries served, conferences convened, research papers produced, etc	Experis	
1 <u>N/A</u>		
2		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see instructions)	·	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amour	nt
1 <u>N/A</u>		
2		
All other program related investments. See instructions		
All other program-related investments. See instructions.  3		
Total. Add lines 1 through 3	Form <b>990</b> -l	0. PE (2009)
BAA	FOITH <b>390</b> -	rr (2003)

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations,

	see instructions.)		
1 Fair m	arket value of assets not used (or held for use) directly in carrying out charitable, etc, purposes.		
a Avera	ge monthly fair market value of securities	1 a	6,691,454.
<b>b</b> Averag	ge of monthly cash balances	16	841,796.
c Fair m	arket value of all other assets (see instructions)	1c	4,758,316.
d Total (	add lines 1a, b, and c)	1d	12,291,566.
e Reduc	tion claimed for blockage or other factors reported on lines 1a and 1c		
(attact	n detailed explanation) 1e 0.		
2 Acquis	sition indebtedness applicable to line 1 assets	2	0.
3 Subtra	act line 2 from line 1d	3	12,291,566.
	deemed held for charitable activities. Enter 1-1/2% of line 3 eater amount, see instructions)	4	184,373.
5 Net va	lue of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	12,107,193.
6 Minim	um investment return. Enter 5% of line 5.	6	605,360.
Part XI	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private oper	rating	foundations
	and certain foreign organizations check here <a></a>		
1 Minim	um investment return from Part X, line 6	1	605,360.
2a Tax or	n investment income for 2009 from Part VI, line 5		
<b>b</b> Incom	e tax for 2009 (This does not include the tax from Part VI.)		
c Add III	nes 2a and 2b	2c	145.
3 Distrib	utable amount before adjustments. Subtract line 2c from line 1	3	605,215.
4 Recov	eries of amounts treated as qualifying distributions	4	
5 Add III	nes 3 and 4	5	605,215.
6 Deduc	tion from distributable amount (see instructions)	6	
7 Distril	butable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	605,215.
Part XII	Qualifying Distributions (see instructions)	<b></b>	
1 Amou a Exper	nts paid (including administrative expenses) to accomplish charitable, etc, purposes. ises, contributions, gifts, etc — total from Part I, column (d), line 26	1a	564,695.
<b>b</b> Progra	am-related investments — total from Part IX-B	1b	
2 Amou	nts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3 Amou a Suitat	nts set aside for specific charitable projects that satisfy the.  oility test (prior IRS approval required)	3a	
<b>b</b> Cash	distribution test (attach the required schedule)	3ь	
	ying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	564,695.
5 Found Enter	lations that qualify under section 4940(e) for the reduced rate of tax on net investment income 1% of Part I, line 27b (see instructions)	5	145.
	ted qualifying distributions. Subtract line 5 from line 4	6	564,550.
•	e. The amount on line 6 will be used in Part V. column (b) in subsequent years when calculating wheth	er the	
MOU	e. The announcement to will be used in Fall V. Committeeth III Substituting VEALS WHEN CANCINATION WHEN	101 (IIC	ioui luation

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

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### Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	<b>(d)</b> 2009
Distributable amount for 2009 from Part XI, line 7				605 215
2 Undistributed income, if any, as of the end of 2009				605,215.
a Enter amount for 2008 only			564,645.	
<b>b</b> Total for prior years 20, 20, 20		0.	001,010.	
3 Excess distributions carryover, if any, to 2009				
a From 2004				
<b>b</b> From 2005			1	
c From 2006			1	
<b>d</b> From 2007			1	
e From 2008			1	
f Total of lines 3a through e	0.		1	
4 Qualifying distributions for 2009 from Part				
XII, line 4 ► \$ 564, 695.			1	
a Applied to 2008, but not more than line 2a			564,645.	
<b>b</b> Applied to undistributed income of prior years (Election required – see instructions)		0.		
c Treated as distributions out of corpus (Election required – see instructions)	0.	9.		······································
d Applied to 2009 distributable amount	U.			50.
e Remaining amount distributed out of corpus	0.			50.
5 Excess distributions carryover applied to 2009	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a) )	0.			<u> </u>
6 Enter the net total of each column as indicated below:			1	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
<b>b</b> Prior years' undistributed income. Subtract 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				<del></del>
line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1. This amount must be				
distributed in 2010				605,165.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
·	0.			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)	0.			······
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9.				
a Excess from 2005			1	
<b>b</b> Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009		<u> </u>		
BAA				Form 990-PF (2009)

Part XIV Private Operating Foundation			VII-A. guestion	<u>58-167845</u> . 9)	Z Page 10 N/A
1a If the foundation has received a ruling or d	etermination letter				
b Check box to indicate whether the foundation	•	ratina foundation de	scribed in section	4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net	Tax year	ating loundation de	Prior 3 years	[ 4542()(3) Of	1 4342()(3)
income from Part I or the minimum investment return from Part X for each year listed	(a) 2009	<b>(b)</b> 2008	(c) 2007	(d) 2006	(e) Total
<b>b</b> 85% of line 2a					
<ul> <li>Qualifying distributions from Part XII, line 4 for each year listed</li> </ul>					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c</li> </ul>					
3 Complete 3a, b, or c for the alternative test relied upon.					
a 'Assets' alternative test — enter.					
(1) Value of all assets.				ļ	
(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					
c 'Support' alternative test - enter					
<ol> <li>Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)</li> </ol>					
(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 an exempt organization					
(4) Gross investment income	<u> </u>	<u> </u>	<u> </u>	]	
Part XV Supplementary Information assets at any time during the Information Regarding Foundation Manage a List any managers of the foundation who have close of any tax year (but only if they have None	ne year — see in ers: nave contributed mo	ore than 2% of the t	total contributions re		
<b>b</b> List any managers of the foundation who ca partnership or other entity) of which the None				lly large portion of th	ne ownership of
2 Information Regarding Contribution, Gran Check here  if the foundation only n requests for funds. If the foundation make complete items 2a, b, c, and d. a The name, address, and telephone number	nakes contributions s gifts, grants, etc,	to preselected cha (see instructions) to	ritable organizations o individuals or orga	nizations under othe	
See Statement 6		·			<del></del> -
<b>b</b> The form in which applications should be s	submitted and infori	mation and materia	is they should includ	de	
See Statement for Line 2a					
c Any submission deadlines.					
See Statement for Line 2a					
d Any restrictions or limitations on awards, s	such as by geograp	hical areas, charita	ble fields, kinds of ii	nstitutions, or other t	factors.
See Statement for Line 2a					
BAA	π	EA0310L 07/06/09			Form 990-PF (2009)

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation Purpose of grant or contribution Recipient status of **Amount** recipient Name and address (home or business) a Paid during the year See Statement 7 560,195. 3a Total **b** Approved for future payment 3Ь Total

Form 990-PF (2009)

# Part XVI-A Analysis of Income-Producing Activities

Form 990-PF (2009)

BAA

	Enter gross amounts unless otherwise indicated.		Unrelated business income		section 512, 513, or 514		
1 D		(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income	
_	am service revenue:			code	· · · · · · · · · · · · · · · · · · ·	(see the instructions)	
a		<del> </del>	· · · · · · · · · · · · · · · · · · ·			<del></del>	
		+		<del>  -   -</del>			
۳		<del>                                     </del>		<del>                                     </del>			
<u> </u>		+		<del>                                     </del>			
·						<del></del>	
a Fees	and contracts from government agencies			<del> </del>	_		
_	bership dues and assessments			<del> </del>			
	t on savings and temporary cash investments			14	149,115.		
	ends and interest from securities		·	14	35,875.		
5 Net re	ental income or (loss) from real estate:					······································	
	financed property					······································	
<b>b</b> Not d	ebt-financed property			16	-51,377.		
6 Net rer	ntal income or (loss) from personal property						
7 Other	r investment income						
8 Gain or	(loss) from sales of assets other than inventory			18	-600,942.		
9 Net ir	ncome or (loss) from special events						
10 Gross	s profit or (loss) from sales of inventory						
11 Other	rrevenue.						
a							
b							
c							
d				ļ			
е		<b></b>		ļ			
	otal Add columns (b), (d), and (e)				-467,329.		
	. Add line 12, columns (b), (d), and (e)				13	-467,329.	
(See works	heet in the instructions for line 13 to verify ca	iculations)				<del> </del>	
Part XVI	B Relationship of Activities to the	e Accompli	shment of Exemp	ot Purpose	es		
Line No. ▼	Explain below how each activity for which in accomplishment of the foundation's exempt	come is report purposes (oth	ed in column (e) of Pa er than by providing fu	art XVI-A cont ands for such	ributed importantly to purposes) (See the	the instructions.)	
N/A				· · · · · · · · · · · · · · · · · · ·			
	-				<del></del>		

TEEA0502L 07/06/09

# Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash	1 a (1)		<u>X</u> _
(2) Other assets	1 a (2)		Χ
<b>b</b> Other transactions			
(1) Sales of assets to a noncharitable exempt organization	1 b (1)		X
(2) Purchases of assets from a noncharitable exempt organization.	1 b (2)		Χ
(3) Rental of facilities, equipment, or other assets	1 b (3)		X
(4) Reimbursement arrangements	1 b (4)		X
(5) Loans or loan guarantees	1 b (5)		X
(6) Performance of services or membership or fundraising solicitations	1 b (6)		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1 c		<u>X</u>
• • • • • • • • • • • • • • • • • • •		_	
d If the answer to any of the above is 'Yes,' complete the following schedule. Column (b) should always show the f the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair m any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.	arket value in	e of	
(a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transaction	s, and sharing arrar	ngement	\$
N/A			
		_	
			<u> </u>
RECEIVED			
		_	
SEP 2 0 2010 Q			
— OGDEN UT			
2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	Ye	s X	No
b If 'Yes,' complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description	of relationship		
(a) Name of organization (b) Type of organization (c) Description	or relationship		
N/A		_	
Under penalties of penury I declare that I have examined this return including accompanying schedules and statements, and to the best of my knowledge and bel	ef. it is true, correct. :	and	
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and beli complete. Declaration of preparer (other than tarpayer or fiduciary) is based on all information of which preparer has any knowledge.			
5 Nuch On Parsioen: 19/14/10 > Masi	omr		
G Signature of officer or wastes Date Title			
Check it	Preparer's Identif (See Signature in	ying nur the ins	nber trs)
E Paid signature 9/10/10 self-level = 0	P0070166		
Pre-   Parer's   Fum's name (or McNair, McLemore, Middlebrooks   EIN > 58	3-1094351		
Use yours if self Post Office Boy One			
Only employed), address, and IT Code Macon, GA 31202-0001	(478) 746	5-62	77
BAA	Form 9		

#### 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 (dentification number
CHARLES H. JONES FAMILY FOUND	PATION, INC.	58-1678452
Organization type (check one).		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a 527 political organization	private foundation
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a priv	ate foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the Ge Note: Only a section 501(c)(7), (8), or (10) orga	eneral Rule or a Special Rule anization can check boxes for both the General Rule and a S	pecial Rule See instructions
General Rule —		
For an organization filing Form 990, 990-EZ contributor (Complete Parts I and II.)	, or 990-PF that received, during the year, \$5,000 or more (i	n money or property) from any one
Special Rules —		
509(a)(1)/170(b)(1)(A)(vi) and received from	orm 990 or 990-EZ, that met the 33-1/3% support test of the n any one contributor, during the year, a contribution of the g r (ii) Form 990-EZ, line 1 Complete Parts I and II	regulations under sections greater of (1) \$5,000 or (2) 2% of the
	ation filing Form 990 or 990-EZ, that received from any one of the form of the file of the	
contributions for use exclusively for religiou this box is checked, enter here the total coil	ation filing Form 990 or 990-EZ, that received from any one is, charitable, etc., purposes, but these contributions did not intributions that were received during the year for an <i>exclusiv</i> unless the <b>General Rule</b> applies to this organization because	aggregate to more than \$1,000 If rely religious, charitable, etc.
religious, charitable, etc, contributions of \$5	5,000 or more during the year.	<b>►</b> \$
990-PF) but it must answer 'No' on Part IV, line	the General Rule and/or the Special Rules does not file Sche 2 of their Form 990, or check the box on line H of its Form grequirements of Schedule B (Form 990, 990-EZ, or 990-PF	990-EZ, or on line 2 of its Form
BAA For Privacy Act and Paperwork Reduction for Form 990, 990EZ, or 990-PF.	on Act Notice, see the Instructions Schedule E	3 (Form 990, 990-EZ, or 990-PF) (2009)

Schedule Name of org	B (Form 990, 990-EZ, or 990-PF) (2009)	Page 1	of 1 of Part I
•	CS H. JONES FAMILY FOUNDATION, INC.	' *	identification number 578452
Part I	Contributors (see instructions.)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	DWIGHT C. JONES P.O. BOX 7006 MACON, GA 31298,	\$ <u>58,500.</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution )
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	ESTATE OF CHARLES H. JONES P.O. Box 7006 MACON, GA 31298,	\$816,556.	Person X Payroll X Noncash X  (Complete Part II if there is a noncash contribution )
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<del></del>		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution )
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution )
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution )
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Page 1

of 1 of Part II

Name of organization

CHARLES H. JONES FAMILY FOUNDATION, INC.

Employer identification number 58-1678452

(a) lo. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
SEC	URITIES		
		\$ 729,803.	10/01/09
(a) o. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	
(a) o. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) o. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) lo. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	
(a) lo. from Part l	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		ss	

of 1 of Part III

Name of organization CHARLES H. JONES FAMILY FOUNDATION, INC

Employer identification number 58-1678452

<u> </u>	, <u> </u>							<u> </u>
Part III	Exclusivel	religious,	charitable, et	c, individual co	ntributions to	section 501(c)	(7), (8), o	r (10)
	organizatio	ns aggreg	ating more th	an \$1,000 for th	e year.(Complete	cols (a) through (	e) and the f	ollowing line entry)

	For organizations completing Part III, enter t contributions of \$1,000 or less for the year (	otal of <i>exclusively</i> religious, cha Enter this information once — s	iritable, etc. ee instruction:	s) <b>&gt;</b> \$	N/A
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift	is held
	N/A				
		(e)			
		Transfer of gift			_
	Transferee's name, address	s, and ZIP + 4	Rela	tionship of transferor to trans	feree
				<del></del>	
(a)	(b)	(c)		(d)	<del></del>
No. from Part I	Purpose of gift	Use of gift		Description of how gift	is held
		<del></del>			
		(e) Transfer of gift			
	Transferee's name, addres		Rela	ationship of transferor to trans	feree
				· · · · · · · · · · · · · · · · · · ·	
(a) No, from	(b) Purpose of gift	(c) Use of gift		(d)  Description of how gift	t ic hold
Part I	r ui pose oi giit			——————————————————————————————————————	
		(e)			
	Transferee's name, addres	s, and ZIP + 4	Relationship of transferor to transferee		
(a)	(b)	(c)		(d)	
No. from	Purpose of gift	Use of gift		Description of how gif	t is held
Part I					
					<del>.</del>
				<del> </del>	
	Transferee's name, addres	Transfer of gift s. and ZIP + 4	Rela	ationship of transferor to trans	sferee
	Transieres 3 Hame, addres	org worred Ball 1 7			
	L				

## Form 4562

Department of the Treasury Internal Revenue Service (99)

# Depreciation and Amortization (Including Information on Listed Property)

See separate instructions.
Attach to your tax return.

OMB No 1545 0172

2009

Attachment Sequence No 67

Identifying number CHARLES H. JONES FAMILY FOUNDATION, INC 58-1678452 Business or activity to which this form relates Rental activity - Land Rent Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I 1 Maximum amount. See the instructions for a higher limit for certain businesses 1 \$250,000 2 2 Total cost of section 179 property placed in service (see instructions) Threshold cost of section 179 property before reduction in limitation (see instructions) 3 \$800,000. Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 6 (a) Description of property (b) Cost (business use only) (c) Elected cost 7 Listed property Enter the amount from line 29 7 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs) 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12 ▶ 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property ) (See instructions ) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 15 Property subject to section 168(f)(1) election 16 Other depreciation (including ACRS) 16 MACRS Depreciation (Do not include listed property ) (See instructions) MACRS deductions for assets placed in service in tax years beginning before 2009 17 237 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B Assets Placed in Service During 2009 Tax Year Using the General Depreciation System (C) Basis for depreciation (g) Depreciation (a) (b) Month and (d) (e) Convention Classification of property year placed in service (business/investment use Recovery period only - see instructions) 19a 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property f 20-year property S/L 25 yrs g 25-year property 27.5 yrs MM h Residential rental S/L property 27.5 yrs MM S/L 39 yrs MM S/L i Nonresidential real property S/L MM Section C - Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System 20 a Class life S/L 12 yrs S/L b 12-year 40 yrs MM S/L c 40-year Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28. 21

the appropriate lines of your return Partnerships and S corporations — see instructions. For assets shown above and placed in service during the current year, enter

Total Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on

237.

22

2009	Federal Statements	Page 1				
Client 2504450	58-1678452					
9/09/10		09.34AM				
Statement 1 Form 990-PF, Part I, Line 16 Other Professional Fees	c					
	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income	(d) Charitable <u>Purposes</u>				
PROFESSIONAL FEES	Total \$ 86,306. \$ 81,806	\$ 4,500. \$ 4,500.				
Statement 2 Form 990-PF, Part I, Line 18 Taxes						
	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income	(d) Charitable <u>Purposes</u>				
EXCISE TAX	Total $\frac{\$}{\$}$ 5,321. $\frac{\$}{\$}$ 5,321.	\$ 0.				
Statement 3 Form 990-PF, Part I, Line 23 Other Expenses						
Rental Expenses	(a) (b) Net (c)  Expenses Investment Adjusted  per Books Income Net Income  \$ 84,767. \$ 84,767.  Total \$ 84,767. \$ 84,767.	(d) Charitable Purposes  \$ 0.				
Statement 4 Form 990-PF, Part II, Line 11 Investments - Land, Buildings, and Equipment						
Category	Accum. Book Basis Deprec. Value	Fair Market Value				
Buildings Land	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	\$ 0. 2,997,176. \$ 2,997,176.				

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2009 **Federal Statements** Client 2504450 CHARLES H. JONES FAMILY FOUNDATION, INC. 9/09/10

Statement 5 Form 990-PF, Part II, Line 14 Land, Buildings, and Equipment

Category	_	Basis	 Accum. Deprec.	Book Value	 Fair Market Value
Machinery and Equipment Miscellaneous Tota	\$ 1 <u>\$</u>	742. 1,400. 2,142.	\$ 385. 0. 385.	\$ 357. 1,400. 1,757.	\$ 1,687. 0. 1,687.

## Statement 6 Form 990-PF, Part XV, Line 2a-d Application Submission Information

Name of Grant Program:

Name:

Dwight C. Jones

Care Of:

P.O. Box 7345

Street Address: City, State, Zip Code: Telephone:

Macon, GA 31209 (478) 471-2520

Form and Content: Submission Deadlines: Written request indicating need for aid and assistance.

Page 2

58-1678452

09 34AM

Restrictions on Awards:

#### Statement 7 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

•				
Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of Grant	 Amount
FIRST PRESBYTERIAN DAY SCHOOL 5671 CALVIN DRIVE MACON, GA 31210			GENERAL SUPPORT OF PROGRAMS	\$ 200,000.
MACON SYMPHONY ORCHESTRA 400 POPULAR STREET MACON, GA 31201			GENERAL SUPPORT OF PROGRAMS	26,000.
THE BIG "O" YOUTH EDUCATIONAL DREAM FOUN 339 COTTON AVENUE MACON, GA 31201			GENERAL SUPPORT OF PROGRAMS	2,400.
MACON LITTLE THEATER 4220 FORSYTH ROAD MACON, GA 31210			GENERAL SUPPORT OF PROGRAMS	2,500.
ALZHEIMER'S ASSOCIATION 277 MARTIN LUTHER KING BLVD MACON, GA 31201			GENERAL SUPPORT OF PROGRAMS	66,667.

2009	Fe	ederal State	ements			Page 3	
Client 2504450	CHARLES H.	CHARLES H. JONES FAMILY FOUNDATION, INC.					
9/09/10  Statement 7 (continued) Form 990-PF, Part XV, Line Recipient Paid During the	e 3a Year					09 34AM	
Name and Addres	s <u>Re</u> l	Donee ationship	Found- ation Status	Purpose of Grant		Amount	
CHERRY BLOSSOM FESTIV. 794 CHERRY STREET MACON, GA 31201	AL			GENERAL SUPPORT OF PROGRAMS	\$	5,000.	
THE BIG HOUSE FOUNDAT P.O. BOX 4201 MACON, GA 31208	ION			GENERAL SUPPORT OF PROGRAMS		25,000.	
COLLINGS FOUNDATION P.O. BOX 248 STOW, MA 01775				GENERAL SUPPORT OF PROGRAMS		2,200.	
THEATER MACON 438 CHERRY STREET MACON, GA 31210				GENERAL SUPPORT OF PROGRAMS		1,000.	
WESLEYAN COLLEGE 4760 FORSYTH ROAD MACON, GA 31210				GENERAL SUPPORT OF PROGRAMS		10,000.	
MACON STATE COLLEGE 100 COLLEGE STATION D MACON, GA 31210	RIVE			GENERAL SUPPORT OF PROGRAMS		62,000.	
UNITED WAY OF CENTRAL GEORGIA 277 MARTIN LUTHER KIN MACON, GA 31201				GENERAL SUPPORT OF PROGRAMS		28,000.	
KIDS YULE LOVE P.O. BOX 2011 MACON, GA 31203				GENERAL SUPPORT OF PROGRAMS		2,000.	
ROTARY CLUB OF UPTOWN P.O. BOX 28185 MACON, GA 31221	MACON			GENERAL SUPPORT OF PROGRAMS		500.	
MACON CIVIC CLUB P.O. BOX ONE MACON, GA 31202				GENERAL SUPPORT OF PROGRAMS		350.	
MONTEZUMA MENNONITE C 2563 PERKINS FARM ROA MARSHALLVILLE, GA 310	D			GENERAL SUPPORT OF PROGRAMS		2,500.	
COVENANT THEOLOGICAL SEMINARIES 1233 CONWAY ROAD ST. LOUIS, MO 63141				GENERAL SUPPORT OF PROGRAMS		4,478.	

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2009	Feder	al Statements		Page 4
Client 2504450	CHARLES H. JONE	58-1678452		
9/09/10  Statement 7 (continued) Form 990-PF, Part XV, Line 3 Recipient Paid During the Yo	3a ear			09 34AM
Name and Address	Don Relatio		n Purpose of	Amount
WHITEFIELD ACADEMY ONE WHITEFIELD DRIVE MABLETON, GA 30126			GENERAL SUPPORT OF PROGRAMS	\$ 15,000.
FRIENDS OF THE LIBRARY 1180 WASHINGTON AVENUE MACON, GA 31204			GENERAL SUPPORT OF PROGRAMS	10,000.
CAMPUS CLUBS, INC 682 MULBERRY STREET MACON, GA 31201			GENERAL SUPPORT OF PROGRAMS	45,000.
CENTER FOR RACIAL UNDERSTANDING 344 SECOND STREET MACON, GA 31201			GENERAL SUPPORT OF PROGRAMS	2,500.
NORTHMINSTER PRESBYTER CHURCH 565 WIMBISH ROAD MACON, GA 31210	IAN		GENERAL SUPPORT OF PROGRAMS	100.
STRONG TOWER FELLOWSHI 2193 VINEVILLE AVENUE MACON, GA 31204	P		GENERAL SUPPORT OF PROGRAMS	20,000.
BOYS & GIRLS CLUBS OF CENTRAL GEORGIA P.O. BOX 4431 MACON, GA 31209			GENERAL SUPPORT OF PROGRAMS	5,000.
FIRST PRESBYTERIAN CHU 682 MULBERRY STREET MACON, GA 31201	RCH		GENERAL SUPPORT OF PROGRAMS	22,000.
			Total	\$ 560,195.

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#### Form 8868 (Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545 1709

Department of the Treasury Internal Revenue Service

File a separate application for each return.

illenia illeaende	Service	the a separate approximation and a second	
• If you are	filing for an Automatic 3-Mont	h Extension, complete only Part I and check this bo	× ► X
• If you are	filing for an Additional (Not Au	utomatic) 3-Month Extension, complete only Part II	on page 2 of this form)
Do not comp	plete Part II unless you have alre	eady been granted an automatic 3 month extension of	on a previously filed Form 8868
	<del></del>	sion of Time. Only submit original (no cop	
A corporation	n required to file Form 990-T an	d requesting an automatic 6-month extension — che	ck this box and complete Part I only
All other corp income tax r		s), partnerships, REMICS, and trusts must use Form	7004 to request an extension of time to file
returns noted the additiona Form 990-T	d below (6 months for a corpora al (not automatic) 3-month exter Instead, you must submit the fu	electronically file Form 8868 if you want a 3-month a tion required to file Form 990-T). However, you cann asion or (2) you file Forms 990-BL, 6069, or 8870, gra ally completed and signed page 2 (Part II) of Form 80 an e-file for Charities & Nonprofits	ot file Form 8868 electronically if (1) you want our returns, or a composite or consolidated
	Name of Exempt Organization		Employer identification number
Type or	1		
print	CHARLES H JONES FA	MILY FOUNDATION, INC.	58-1678452
File by the	Number street and room or suite number		
due date for filing your	P. O. BOX 7345		
eturn See instructions	City town or post office state, and ZIP of	code. For a foreign address, see instructions	
	MACON, GA 31209	•	
Chack hope	<del></del>	rate application for each return)	
Form 99			Form 4720
<b>}</b> —⊣		Form 990-T (corporation)	$\Box$
Form 99		Form 990-T (section 401(a) or 408(a) trust)	Form 5227
X Form 99		Form 990-T (trust other than above) Form 1041-A	Form 8870
The books	s are in the care of <a> DWIGHT</a>	C. JONES	
Telephon	e No ► 478-471-2520	FAX No ►	
		ce or place of business in the United States, check t	his box
_		rganization's four digit Group Exemption Number (GE	
		f the group, check this box	
	nsion will cover	The group, eneck this box	with the hames and Elits of all members
	<del></del>	nths for a corporation required to file Form 990-T) ex	tension of time
	tension is for the organization's	le the exempt organization return for the organizatio	m named above
► [	_	Tetair ioi	
▶ X	calendar year 20 or tax year beginning 6/01	20 00 5/21 20	10
V	tax year beginning _ 6/01_	, 20 $09$ , and ending $5/31$ , 20	10_
2 If this	tax year is for less than 12 mon	ths, check reason  Initial return Final	return Change in accounting period
	application is for Form 990-BL, undable credits. See instruction	990-PF, 990-T, 4720, or 6069, enter the tentative taxs	, less any 3a \$ 0.
	application is for Form 990-PF of Include any prior year overpayr	or 990-T, enter any refundable credits and estimated ment allowed as a credit	3b\$ 0.
deposi	ce Due. Subtract line 3b from lin it with FTD coupon or, if require structions	ie 3a Include your payment with this form, or, if requ d, by using EFTPS (Electronic Federal Tax Payment	ured.
Caution. If y payment ins		onic fund withdrawal with this Form 8868, see Form	8453-EO and Form 8879-EO for
BAA For Pr	ivacy Act and Paperwork Redu	ction Act Notice, see instructions.	Form 8868 (Rev. 4 2009)