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Department of the Treasury

# **Return of Private Foundation**

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

OMB No 1545-0052

	_	venue Service Note. The foundation may i			return to satisfy state repo			
For	aler		19,	2010	, and ending	DEC 31, 2010	) <u> </u>	
G Check all that apply:    Initial return								
Amended return Address change Name change								
Name of foundation A Employer identification number								
1		JOEY AND DEBORAH JACO	BS FA	WILY				
<u></u>		FOUNDATION		·		27-6771902	<u> </u>	
Nun	ber a	nd street (or P O box number If mail is not delivered to street	address)		Room/suite	B Telephone number		
		P.O. BOX 1869				615-377-46	500	
City	or to	own, state, and ZIP code				C If exemption application is p		
		BRENTWOOD, TN 37024				D 1. Foreign organization	s, check here	
H C	heck	type of organization: X Section 501(c)(3) ex	empt priva	te foundation		Foreign organizations me check here and attach care.	eeting the 85% test, pomputation	
<u></u>	] Se	ction 4947(a)(1) nonexempt charitable trust	Other taxat	ole private founda	ation	E If private foundation sta	itus was terminated	
I Fa	ır ma	rket value of all assets at end of year   J   Accounting	ng method:	X Cash	Accrual	under section 507(b)(1		
(fr	om I	Part II, col (c), line 16)	her (specif	y)		F If the foundation is in a	60-month termination	
		2,025,713. (Part I, colu	mn (d) mu	ist be on cash l	basis)	under section 507(b)(1	)(B), check here	
Pa	rt I	Analysis of Revenue and Expenses	(a) R	evenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements	
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expens	ses per books	income	income	for charitable purposes (cash basis only)	
	1	Contributions, gifts, grants, etc., received	2,0	11,097.		N/A		
	2	Check If the foundation is not required to attach Sch. B					1	
	3	Interest on savings and temporary cash investments		226.	226.		STATEMENT 1	
	4	Dividends and interest from securities						
	5a	Gross rents						
	b	Net rental income or (loss)						
•	6a	Net gain or (loss) from sale of assets not on line 10	2,0	11,566.			1	
ğ	b	Gross sales price for all 2,025,000.						
Revenue	7	Capital gain net income (from Part IV, line 2)			2,011,566.			
	8	Net short-term capital gain					<u> </u>	
	9	Income modifications					<del> </del>	
	10a	Gross sales less returns and allowances		<u>-</u> -			† · · · · · · · · · · · · · · · · · · ·	
		Less Cost of goods sold						
		Gross profit or (loss)					1	
	11	Other income						
	12	Total. Add lines 1 through 11	4,0	22,889.	2,011,792.			
	13	Compensation of officers, directors, trustees, etc		0.	0.		0.	
	14	Other employee salaries and wages					<del>                                     </del>	
	15	Pension plans, employee benefits					<del>                                     </del>	
enses		Local food		771.	0.	_ <del></del>	0.	
ens		Accounting fees REMEINE	0 - 1	3,626.	0.		0.	
Operating and Administrative Exp		Other professional fees	10					
Ve		Interest	280			<u> </u>	<del></del>	
ati		Taxes MAY 1 7 20	1 38			<del> </del>	<del> </del>	
iist	19	Depreciation and depletion		1			<del> </del>	
Ē	20	Occupancy OCDEN	11				<del>                                     </del>	
Adi	21	Occupancy Travel, conferences, and meetings GDEN.				<u> </u>	<del>                                     </del>	
Þ	22	Printing and publications	<del></del>		-		<del> </del>	
ig a	23	Other expenses STMT 4		150.	150.	<del></del>	0.	
atin		Total operating and administrative					<del>                                     </del>	
Der	-	expenses. Add lines 13 through 23		4,547.	150.		0.	
Ō	25	Contributions, gifts, grants paid		0.			0.	
	26	Total expenses and disbursements.					† · · · · · · · · · · · · · · · · · · ·	
		Add lines 24 and 25		4,547.	150.		0.	
-	27	Subtract line 26 from line 12:		<u> </u>			<del>                                     </del>	
		Excess of revenue over expenses and disbursements	4.0	18,342.			1	
		Net investment income (if negative, enter -0-)		,	2,011,642.		1	
		Adjusted net income (if negative, enter -0-)			<u> </u>	N/A		

JOEY AND DEBORAH JACOBS FAMILY

Form 990-PF (2010) FOUNDATION 27-6771902 Page 2

Б	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End	of year
	ait	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			<u> </u>
	2	Savings and temporary cash investments		530,044	530,044.
		Accounts receivable ▶			
	Ĭ	Less: allowance for doubtful accounts			
	4	Pledges receivable			<del> </del>
	7	*			'
	_	Less: allowance for doubtful accounts			
	_	Grants receivable			<del></del>
	6	Receivables due from officers, directors, trustees, and other			ļ
		disqualified persons			L
	7	Other notes and loans receivable			
		Less; allowance for doubtful accounts			
ß	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges		12,656.	12,656.
ĕ		Investments - U.S. and state government obligations		<del></del>	
		Investments - corporate stock STMT 6	0.	699,365	705,785.
	1	Investments - corporate bonds STMT 7	0.	783,011	777,228.
	١	·		703,011	177,2201
	'''	Investments - land, buildings, and equipment basis	-		
	4.	Less accumulated depreciation			<del> </del>
		Investments - mortgage loans			<u> </u>
	13	Investments - other			ļ
	14	Land, buildings, and equipment: basis			
		Less accumulated depreciation			<u> </u>
	15	Other assets (describe )			<u> </u>
	16	Total assets (to be completed by all filers)	0.	2,025,076	2,025,713.
	17	Accounts payable and accrued expenses			
	18	Grants payable			]
c,	19	Deferred revenue			1
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons		, <u>.</u>	<b>†</b>
펿	21	Mortgages and other notes payable			1
Ë		Other liabilities (describe )	<del></del>		1
					•
	22	Total liabilities (add lines 17 through 22)	0.	0.	
_	23	Foundations that follow SFAS 117, check here			4
		·			
တ္ထ	.,	and complete lines 24 through 26 and lines 30 and 31.			
nces		Unrestricted			- !
ala		Temporarily restricted			-
8	26	Permanently restricted			4
Š		Foundations that do not follow SFAS 117, check here			
F	İ	and complete lines 27 through 31.	_	_	
S	27	Capital stock, trust principal, or current funds	0.	0	
Set	28	Paid-ın or capıtal surplus, or land, bldg., and equipment fund	0.	0	,
As	29	Retained earnings, accumulated income, endowment, or other funds	0.	2,025,076	
Net Assets or Fund Bala	30	Total net assets or fund balances	0.	2,025,076	1
_					
	31	Total liabilities and net assets/fund balances	0.	2,025,076	,
三		Analysis of Changes in Not Assets or Fund B	olonoos		
<u> </u>	art	Analysis of Changes in Net Assets or Fund B	aidiiCES		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		t agree with end-of-year figure reported on prior year's return)		1	0.
2	Enter	amount from Part I, line 27a		2	4,018,342.
		increases not included in line 2 (itemize)		3	0.
		ines 1, 2, and 3		4	4,018,342.
		eases not included in line 2 (itemize)	SEE STA		1,993,266.
		net assets or fund halances at end of year (line 4 minus line 5) - Part II. or		6	2.025.076.

023511 12-07-10

Form **990-PF** (2010)

27-6771902

Page 3

Part IV Capital Gains	and Lo	sses for Tax on In	vestmen	t Income						
(a) cast and describe the kind(s) of property sold (e.g., fear estate,					How ac - Purcl - Dona	quired hase	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)		
1a PSYCHIATRIC SOLUTIONS INC - 60,000 SHS						VARIOUS	11/11/10			
b			,		<del>                                     </del>					
С										
d					L					
<u>e</u>					Ц,				<u></u>	
(e) Gross sales price	(f) C	Pepreciation allowed (or allowable)		st or other basis expense of sale				(h) Gain or (los (e) plus (f) minus	s (g)	
a 2,025,000.				13,43	4.				2,011,566.	
b										
C										
d					_			<del></del>	<del></del>	
e Complete only for assets showin	o gain in o	column (h) and owned by t	he foundation	on 12/31/69				l) Gains (Col. (h) gai	n minus	
- Complete only for assets showing		j) Adjusted basis		cess of col. (I)			col	l. (k), but not less th	an -0-) <b>or</b>	
(i) F.M.V. as of 12/31/69	,	as of 12/31/69		col. (j), if any				Losses (from col	(h))	
a							·		2,011,566.	
b				<del></del>			-	<del></del>	<del></del> _	
C							•			
d										
е										
2 Capital gain net income or (net ca	pital loss)	If gain, also enter     If (loss), enter -0-	ın Part I, line ın Part I. line	7 7	}	2			2,011,566.	
3 Net short-term capital gain or (los		•			ر ا					
If gain, also enter in Part I, line 8,			u ( <i>0).</i>		Ĵ					
If (loss), enter -0- in Part I, line 8	,	•				3	L	N/2	<u> </u>	
Part V. Qualification U	nder S	ection 4940(e) for	Reduced	Tax on Net	Inv	estn	nent Ind	come		
(For optional use by domestic private	foundation	ons subject to the section 4	940(a) tax or	i net investment ir	ncome	e.)			N/A	
If section 4940(d)(2) applies, leave th	ns part bla	ınk.								
									Yes No	
Was the foundation liable for the sect If "Yes," the foundation does not qual					rioaz				L Yes L No	
1 Enter the appropriate amount in					es.			· · · · · · · · · · · · · · · · · · ·		
(a)	1	(b)			(c)				(d)	
Base periód years Calendar year (or tax year beginnii	na in)	Adjusted qualifying dist	ributions	Net value of no			Distribution ratio (col. (b) divided by col. (c))			
2009		·				-	_			
2008										
2007										
2006										
2005										
2 Total of line 1, column (d)								2		
3 Average distribution ratio for the			in line 2 by 5,	or by the number	of ye	ars				
the foundation has been in exister	nce if less	than 5 years						3		
4 Enter the net value of noncharitab	la uca sec	ests for 2010 from Bart V	ına F					4		
4 Litter the net value of noncharitab	16-026 922	sels for 20 to from Part A, i	ille 5					4		
5 Multiply line 4 by line 3						5				
• Mulaply line 4 by line 6										
6 Enter 1% of net investment incom	ne (1% of	Part I, line 27b)						6		
		, ,								
7 Add lines 5 and 6								7		
O Enter available and distinct a series	Dod VII	line 4								
8 Enter qualifying distributions from If line 8 is equal to or greater than			1h and come	lete that nart usin	ו בחו	% tav r	ate	8	<del></del>	
See the Part VI instructions.	1116 /, Ull		is, and conf	note that part usin	ıya I	/0 LGA	u.o.	<del></del>	5 000 DE (0010)	

JOEY AND DEBORAH JACOBS FAMILY Form 990-PF (2010) 27-6771902 FOUNDATION Page 4 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) Part VI 1a Exempt operating foundations described in section 4940(d)(2), check here \( \bigcup \) 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 and enter 1% 1 40,233. 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-) 3 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-5 6 Credits/Payments: a 2010 estimated tax payments and 2009 overpayment credited to 2010 6b b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) 6с 6d d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached 8 40.233. 9 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 10 Overpayment, If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Refunded > 11 Enter the amount of line 10 to be: Credited to 2011 estimated tax Part VII-A | Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in  $\overline{\mathbf{X}}$ 1a any political campaign? X b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 1b If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities X 1c c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 0 . (2) On foundation managers ▶ \$ (1) On the foundation. > \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ X 2 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 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 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? N/A 4b b If "Yes," has it filed a tax return on Form 990-T for this year? X 5 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 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 X remain in the governing instrument? X 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV. 8a Enter the states to which the foundation reports or with which it is registered (see instructions) TNb If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) X of each state as required by General Instruction G? If "No," attach explanation 8b 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  $\tilde{\mathbf{x}}$ 

year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

	JOEY AND DEBORAH JACOBS FAMILY			
		71902		Page 5
Pa	art VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			Ì
	August 17, 2008?	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	L
	Website address ► N/A	277 4	<u> </u>	
14	The books are in care of LBMC  Telephone no. > 615-	$\frac{377-4}{37024}$	600	
4 5	· · · · · · · · · · · · · · · · · · ·	3/024		$\overline{}$
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	N	/A	٠
16	and enter the amount of tax-exempt interest received or accrued during the year  At any time during colondar was 2010, did the foundation have an interest in or a constitute as other outbooks over a bank.		Yes	No
10	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank,	16	163	X
	securities, or other financial account in a foreign country?  See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of	10		1
	the foreign country	ŀ		
Pá	art 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.	<u> </u>	Yes	No
18	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?	0		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	ĺ		[
	a disqualified person?	0		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	0		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	o	1	
	(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)?	0		ļ
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		1	
	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.)	0		
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	ļ		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?		<u> </u>	
	Organizations relying on a current notice regarding disaster assistance check here	J		
(	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		ļ	ļ.,.
_	before the first day of the tax year beginning in 2010?	1c_	<u> </u>	Х
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)).			
ŧ	a At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	_		
	before 2010?  Yes X N	°		
	If "Yes," list the years   Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
١	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			i
	statement - see instructions.)	2b	<del> </del>	<u> </u>
	c If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.	,   -20	╁──	<del>                                     </del>
•	The provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years note.		Į .	
31	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
٠.	during the year?			
ı	b if "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after	-	İ	
-	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 2010)  N/A	3b		
48	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	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 2010?

JOEY AND DEBORAH JACOBS FAMILY 27-6771902 Form 990-PF (2010) FOUNDATION Page 6 Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations N/A 5b section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained 🔲 Yes 🔙 No N/A expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d) 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No a personal benefit contract? 6b X b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870. Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? N/A 7b b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation. (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (b) Title, and average hours per week devoted to position (e) Expense account, other (If not paid, enter -0-) (a) Name and address allowances CO-TRUSTEE JOEY JACOBS 9229 HUNTERBORO DRIVE BRENTWOOD, TN 37027 0.50 0 0 0. CO-TRUSTEE DEBORAH JACOBS 9229 HUNTERBORO DRIVE 0 0. 0. 0.50 BRENTWOOD, TN 37027

2 Compensation of five highest-paid employees (other than those in	ncluded on line 1). If none	, enter "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 deterred compensation	(e) Expense account, other allowances
NONE				
	7			
			1	
	7			ļ
		<del>                                     </del>	<u> </u>	
	-			
	<del></del>	<del> </del>	<del>                                     </del>	<del></del>
	$\dashv$			
	<del></del>	<del> </del>	<del>                                     </del>	<del></del>
	_			
			<u> </u>	L,
Total number of other employees paid over \$50,000				

Form	990-PF	`(2010)
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FOUNDATION

27-6771902

Page 7

Part:VIII	i, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
	ype of service	(c) Compensation
NONE		
		<del> </del>
<del></del>		
		<del> </del>
		ł
Total number of others receiving over \$50,000 for professional services		0
Part IX-A Summary of Direct Charitable Activities		<u>~</u>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such	as the	
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	20 1110	Expenses
1 NOT APPLICABLE		
		0.
2		
3		
<u></u>	- <del></del>	
4		
	<del></del>	
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1 NOT APPLICABLE		
		0.
2		
All other program-related investments. See instructions.		
3 NONE		
		^
		0.
Total, Add lines 1 through 3	<b>▶</b>	rm <b>990-PF</b> (2010)
	For	. III <b>330"FF</b> (2010)

Form 990-PF (2010)

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 1,379,503. 1a a Average monthly fair market value of securities 638,795. 1b **b** Average of monthly cash balances 10 c Fair market value of all other assets 2,018,298. 1d d Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and 0 1e 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 2,018,298 Subtract line 2 from line 1d 3 30,274. 4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 1,988,024. 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 36,765. Minimum investment return, Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here 

and do not complete this part.) 36,765. Minimum investment return from Part X, line 6 40,233. 2a Tax on investment income for 2010 from Part VI. line 5 2a b Income tax for 2010. (This does not include the tax from Part VI.) 40,233. 2c c Add lines 2a and 2b 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 0. 4 Recoveries of amounts treated as qualifying distributions 0. 5 Add lines 3 and 4 <u>0</u>. 6 Deduction from distributable amount (see instructions) 0. Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 0. 1a a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1b b Program-related investments - total from Part IX-B 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: 3a a Suitability test (prior IRS approval required) 3ь b Cash distribution test (attach the required schedule)  $\overline{0}$  . 4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 0. income. Enter 1% of Part I, line 27b 0. 6 Adjusted qualifying distributions. Subtract line 5 from line 4 Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Form **990-PF** (2010)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,				-
line 7				0.
2 Undistributed income, if any, as of the end of 2010			<del></del> -	<del></del>
a Enter amount for 2009 only			0.	
b Total for prior years:				
•		0.		
3 Excess distributions carryover, if any, to 2010:				
a From 2005				
<b>b</b> From 2006	1			,
c From 2007	†		1	
dFrom 2008	†			
e From 2009	1			
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2010 from				
Part XII, line 4: ►\$ 0.				1
a Applied to 2009, but not more than line 2a	1		0.	
<b>b</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)	0.			
d Applied to 2010 distributable amount				0.
Remaining amount distributed out of corpus	0.			
	0.		<u> </u>	0.
5 Excess distributions carryover applied to 2010 (if an amount appears in column (d), the same amount must be shown in column (a) )	0.			
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
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 2009. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010. Subtract				
lines 4d and 5 from line 1. This amount must	1			
be distributed in 2011	L			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 2005				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2011.				
Subtract lines 7 and 8 from line 6a	0.			
0 Analysis of line 9.				
a Excess from 2006				
b Excess from 2007				
c Excess from 2008	1			
d Excess from 2009	1			
e Excess from 2010				

## JOEY AND DEBORAH JACOBS FAMILY

27-6771902 Form 990-PF (2010) FOUNDATION Page 10 Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2010, enter the date of the ruling 4942(j)(3) or 4942(1)(5) b Check box to indicate whether the foundation is a private operating foundation described in section Prior 3 years Tax year 2 a Enter the lesser of the adjusted net (a) 2010 (b) 2009 (c) 2008 (d) 2007 (e) Total income from Part I or the minimum investment return from Part X for each year listed **b** 85% of line 2a c Qualifying distributions from Part XII. line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year 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(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization (4) Gross investment income Part XV+ Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see the instructions.) **Information Regarding Foundation Managers:** a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) JOEY JACOBS b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. NONE Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here 🕨 🔲 if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number of the person to whom applications should be addressed: JOEY JACOBS, 615-210-0714 9229 HUNTERBORO DRIVE, BRENTWOOD, TN 37027 b The form in which applications should be submitted and information and materials they should include: N/A c Any submission deadlines: N/A d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors: THE FOUNDATION ONLY MAKES CONTRIBUTIONS TO CHARITABLE ORGANIZATIONS THAT QUALIFY UNDER IRC SECTION 501(C)(3).

JOEY AND DEBORAH JACOBS FAMILY

Form 990-PF (2010)

Form 990-PF (2010) FOUNDATION

Part XVI Supplementary Information (continued)

27-6771902

Page 11

3 Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount				
	or substantial contributor	recipient						
a Paid during the year								
		ļ						
NONE								
		1						
			}					
		]						
			İ					
		1						
		j	]					
		1		}				
				•				
		1						
Total	_		<b>▶</b> 3a	0.				
b Approved for future payment								
				<u> </u>				
NONE								
NONE								
		ļ						
				}				
				[				
		1		1				
		1						
Total _			<b>▶</b> 3b	0.				
023611 12-07-10	<del></del>	<del></del>	F	orm <b>990-PF</b> (2010)				

Form 990-PF (2010)

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated		business income		od by section 512, 513, or 514	(e)
1 Program service revenue;	(a) Business code	( <b>b</b> ) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
a	Code		-	<del></del>	<del></del>
b			1 1		<del></del>
c	_		1		
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments	<u> </u>		14	226.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:					
a Debt-financed property			$\perp$		
b Not debt-financed property			$\bot$		
6 Net rental income or (loss) from personal					
property	<u> </u>		+		
7 Other investment income	<u> </u>		+	<del>_</del>	<del></del>
8 Gain or (loss) from sales of assets other	1		1 .	2 011 566	
than inventory	<b> </b>		18	2,011,566.	
9 Net income or (loss) from special events	<del></del>		++		
10 Gross profit or (loss) from sales of inventory	<u> </u>		+-+		
11 Other revenue:					
<u>a</u>	_ <del>   </del>				
b	_		+	-	
d			+-+		
e			+		
12 Subtotal. Add columns (b), (d), and (e)	- <del> +</del>	0	<del>-  </del>	2,011,792.	0
13 Total. Add line 12, columns (b), (d), and (e)	L		<u> </u>	13	2,011,792
(See worksheet in line 13 instructions to verify calculations.	)				
Part XVI-B Relationship of Activities		mplishment of I	Exempt	Purposes	
Line No. Explain below how each activity for which in		<u> </u>			dishment of
the foundation's exempt purposes (other th	ian by providing fund	is for such purposes).	-A COMMO	ted importantly to the accomp	Justiment of
NOT APPLICABLE	<u> </u>				
	-				
					<del></del>
	<del></del>	<del></del> _			<del></del>
					<del></del>
	<del> </del>			<del> </del>	
				· · · · · · · · · · · · · · · · · · ·	
23621					
023621 12-07-10					Form <b>990-PF</b> (2010)

## Form 990-PF (2010) Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1	Did the	organization directly or indu	rectly engage in any	of the following	n with any other organization	on described in sec	tion 501(c) of	T	Yes	No
1 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?										
а	a Transfers from the reporting foundation to a noncharitable exempt organization of:									
(1) Cash										X
		ther assets						1a(2)		X
b		transactions:								
		ales of assets to a noncharita	ble exempt organizat	ion				1b(1)		X
		urchases of assets from a no						1b(2)		X
(3) Rental of facilities, equipment, or other assets										X
(4) Reimbursement arrangements										X
		oans or loan guarantees						1b(4) 1b(5)		X
		erformance of services or me	embership or fundrais	ing solicitation	ns			1b(6)		X
C		g of facilities, equipment, ma						1c		X
						wavs show the fair	market value of the goods, o	ther ass	ets.	
							on or sharing arrangement, sh		•	
		n (d) the value of the goods,					, , , , , , , , , , , , , , , , , , ,			
(a)∟	ine no	(b) Amount involved			exempt organization	(d) Description	on of transfers, transactions, and s	sharing an	angeme	nts
<u> </u>			,,,	N/A						
						<del>                                     </del>				
		<del></del>			<del>- · · · - · - · - · - · · - · · · ·</del>	<del></del>				
		·	<del></del>							
					<del></del>	<del></del>				
						<del>                                     </del>				
			<del> </del> -		<del></del>	<del></del>				
-			<del></del>		·····	<del> </del>				
					<del></del>	<del>                                     </del>				
		<del></del>	}		<del></del> -	<del></del>				
	$\neg \neg$		<u> </u>			<del></del>				
						<del> </del>				
						<del></del>				
		<del></del>	<del> </del>							
			<del></del>	<del></del>	<del></del>					
28	Is the	foundation directly or indirec	tly affiliated with or r	elated to one	or more tax-exempt organi	zations described				
		non 501(c) of the Code (other	•			zations described	Г	Yes	Γx	] No
b		," complete the following sch		(0)) 01 111 3001	1011 021 :		_			
<u> </u>	11 100	(a) Name of org			(b) Type of organization	T	(c) Description of relationsh	1ID		
		N/A			(4),)p===================================		(1) 1 P	<u> </u>		
		<del></del>			<u> </u>	<del> </del>				
						<del></del>				
			<del></del>		<u> </u>					
	7,	Inder penalties of per dry, I declare	e that I have examined th	is return, includi	ng accompanying schedules an	d statements, and to	the best of my knowledge and beli	ief, it is tro	је, согте	ct,
Si	gn	and complete Declaration i prepa	ore (other than taxpayer	or fiduciary) is ba	ased on all information of which	preparer has any know	vledge		-	
	ere l	Kar			1 5/13	12011	TRUSTEZ	مسحج		
	1	Signature of office or tru	ustee		Date	<b>— )</b> –	Title			
		Print/ype p/eparer's na		Preparer's		Date	Check if PTIN			
					<b>P</b>	J. /.	colf- amployed		_	
Pa	id	S.L. PILSO	N	KIW (L		3/2/11	· · ·   F	096	49	80
	epare		TIMORE BL	ACK MO	RGAN & CAIN,	P.C.	Firm's EIN ▶			
	e On		O. BOX 18				62-1	199	75	7
- •		Firm's address ▶ BR			24-1869		Phone no. (615)	377	$-\overline{46}$	00
				,					_ •	
						<del></del>	For	rm <b>990</b>	-PF	2010)
							101	550	- • (	,

13

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

Department of the Treasury Internal Revenue Service

Name of the organization

## Schedule of Contributors

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

OMB No 1545-0047

2010

**Employer identification number** 

JOEY AND DEBORAH JACOBS FAMILY 27-6771902 FOUNDATION Organization type (check one): Filers of: Section: \_\_\_ 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II **Special Rules** ☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and 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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

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).

FOUNDATION

Employer identification number

27-6771902

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	JOEY & DEBORAH JACOBS  9229 HUNTERBORO DRIVE  BRENTWOOD, TN 37027	\$\$.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(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) No.	(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) No.	(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) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2010) Name of organization

JOEY AND DEBORAH JACOBS FAMILY FOUNDATION

27-6771902

Part II	Noncash Property (see instructions)		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	60,000 SHARES PSYCHIATRIC SOLUTIONS, INC	-	
		\$ 2,006,700.	09/10/10
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - \$	
(a) No. rom Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
}		- - - - - - - - - -	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - - - - -	
(a) No. rom Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - \$	00, 990-EZ, or 990-PF) (

of Part III

Name of organization

Employer identification number

# JOEY AND DEBORAH JACOBS FAMILY

FOUNDATION

Part III

Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of

) 14O.			<b>&gt;</b> \$	
) No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
		(e) Transfer of gif		
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee	
No. om rt I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	(e) Transfer of o		Relationship of transferor to transferee	
No. om rt I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
		(e) Transfer of gif	t	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee	
No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	(e) Transfer of gift			
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee	

			AMOUNT				
		INTEREST					
TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A							
LEGAL	FEES		STATEMENT	2			
771.	0.			0.			
771.	0.			0.			
ACCOUNTING FEES		STATEMENT 3					
3,626.	0.			0.			
3,626.	0.		_	0.			
OTHER EXPENSES		STATEMENT 4					
150.	150.			0.			
150.	150.			0.			
	(A) EXPENSES PER BOOKS 771. 771.  ACCOUNTINA  (A) EXPENSES PER BOOKS 3,626.  3,626.  OTHER E  (A) EXPENSES PER BOOKS 150.	EXPENSES NET INVEST- PER BOOKS MENT INCOME  771. 0.  771. 0.  ACCOUNTING FEES  (A) (B) EXPENSES NET INVEST- MENT INCOME  3,626. 0.  3,626. 0.  OTHER EXPENSES PER BOOKS NET INVEST- MENT INCOME  150. 150.	(A) (B) (C) EXPENSES NET INVEST- ADJUSTED PER BOOKS MENT INCOME  771. 0.  771. 0.  ACCOUNTING FEES  (A) (B) (C) EXPENSES NET INVEST- ADJUSTED PER BOOKS MENT INCOME  3,626. 0.  OTHER EXPENSES  (A) (B) (C) ADJUSTED NET INCOME  3,626. 0.  OTHER EXPENSES  (A) (B) (C) ADJUSTED NET INCOME  150. 150.	(A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITAE PER BOOKS MENT INCOME NET INCOME PURPOSE  771. 0.  771. 0.  ACCOUNTING FEES STATEMENT  (A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITAE PER BOOKS MENT INCOME NET INCOME PURPOSE  3,626. 0.  OTHER EXPENSES STATEMENT  (A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITAE PER BOOKS MENT INCOME NET INCOME PURPOSE  (A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITAE PER BOOKS MENT INCOME NET INCOME PURPOSE  150. 150.			

FORM 990-PF OTHER DECR	EASES IN NET ASSETS	OR FUND BALANCES	STATEMENT	5
DESCRIPTION	AMOUNT			
BOOK-TAX DIFFERENCE ON SA	1,993,266.			
TOTAL TO FORM 990-PF, PAR				
FORM 990-PF	CORPORATE STO	OCK	STATEMENT	6
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE	1
MERRILL LYNCH 5LW-04003 -	EQUITIES	699,365.	705,78	5.
TOTAL TO FORM 990-PF, PAR	T II, LINE 10B	699,365.	705,78	5.
FORM 990-PF	CORPORATE BON	IDS	STATEMENT	7
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE	1
MERRILL LYNCH 5LW-04001 - MERRILL LYNCH 5LW-04003 -		402,639. 380,372.		
TOTAL TO FORM 990-PF, PAR	T II, LINE 10C	783,011.	777,22	8.