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# Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

For	cale	endar year 2012 or tax year beginning		, and e	nding		
		of foundation				A Employer identificatio	n number
,,,							
	Tan	nes R. Meadows Jr. Found	dation			62-1545923	3
	_	and street (or P O box number if mail is not delivered to street			Room/suite	B Telephone number	<del></del>
		B Hyde Park	<b>,</b>	:		(615) 515-	-1700
		town, state, and ZIP code				<del> </del>	
		shville, TN 37215-2449				C If exemption application is j	pending, check here
			1 11-4-1-4			1	
G	unec	k all that apply: Initial return	Initial return of a f	former public c	narity	D 1. Foreign organization	s, cneck nere
		Final return	Amended return			2. Foreign organizations me	eeting the 85% test.
_		Address change	Name change			2. Foreign organizations me check here and attach co	omputation PL
<u> </u>	_	k type of organization; X Section 501(c)(3) e	1			E If private foundation sta	
<u> </u>		ection 4947(a)(1) nonexempt charitable trust	Other taxable private found			under section 507(b)(1	)(A), check here . $\triangleright$
1 F	air m	· 1	ting method: X Cash	L Accr	ıal	F If the foundation is in a	60-month termination
-			ther (specify)	·		under section 507(b)(1	)(B), check here
	<u>    \$                                </u>	1,673,254. (Part I, colu	umn (d) must be on cash	basis.)		ļ	
<b>P</b>	art	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) )	(a) Revenue and	(b) Net in		(c) Adjusted net	(d) Disbursements for charitable purposes
		necessarily equal the amounts in column (a) )	expenses per books	inco	me	income	(cash basis only)
	1	Contributions, gifts, grants, etc., received	1,759,048.	图5基22基的	C.EC	N/A	对他"基础"为
	2	Check from the foundation is not required to attach Sch. B		THE PARTY OF THE P	NI WA	National State of the last of	MARKET BY JUST
	3	Interest on savings and temporary cash investments	1,317.		1,317.		Statement 1
	4	Dividends and interest from securities					THE SHAPE OF SHAPE
	5	a Gross rents					
-	l i	Net rental income or (loss)		772	<b>建</b>		
_	6	Net gain or (loss) from sale of assets not on line 10	The second secon	1, 1, 2 (21)	7.27.25		
Σ	1	Gross sales price for all assets on line 6a		3.14.11.11			5/42/71/2015 (1974)
Revenue	7	Capital gain net income (from Part IV, line 2)	Contract to the same of the sa	Anna Bridgeling & R. T. Colle	0.	656 837 146 144	
æ	8	Net short-term capital gain	THE STREET STREET	Part of the		Santa in the Christian Christian Control	
	9	Income modifications		CH CPRO			
	1 -	Grane enlan lane returns	TANK TO A STATE OF THE STATE OF		2000		Zi. Kiri Edward
	Ι.	and allowances					
	١	Cross profit or (loss)		A DOTATION OF THE PARTY OF THE		At the special property of the	
	l	• • • •			五分代十.办公社		
	l	Other Income	1,760,365.		,317.		
_	12	Total. Add lines 1 through 11	0.		0.	<del></del>	A WAR AND A SHARE OF THE SHARE
	13	Compensation of officers, directors, trustees, etc	<del>-</del>		<u> </u>		0.
	14	Other employee salaries and wages	<u> </u>				<del></del>
ຜູ	15	Pension plans, employee benefits	F 200		200		
Jse		Legal fees Stmt 2	5,289.		,289.	·- <u>-</u>	0.
be		Accounting fees Stmt 3	737.		0.	<del></del>	0.
ũ	C	Other professional fees					···
tive	17	Interest					· · · · · · · · · · · · · · · · · · ·
tra	18	Taxes				NOV L - ZUIS	`
nis	19	Depreciation and depletion .		· <b>-</b>			國門 起一名 第二
E P	20	Occupancy					<del></del>
<u>≥</u>	21	Travel, conferences, and meetings					
200	22	Printing and publications					
ا ق	23	Other expenses Stmt 4	85.		85.		0.
NOV 2 0 2013 Operating and Administrative Expenses	24	Total operating and administrative					
		expenses. Add lines 13 through 23	6,111.	5	,374.	1	0.
_	25	Contributions, gifts, grants paid	81,000.		Jac mer i	A LOWER BEAUTY	81,000.
	26	Total expenses and disbursements.					<del></del>
<u> </u>		Add lines 24 and 25	87,111.	5	,374.		81,000.
<u>-</u>	27	Subtract line 26 from line 12:		是为提及形式	<b>福港學</b>		
SCANNED		Excess of revenue over expenses and disbursements	1,673,254.	重温温	<b>正规划</b>		<b>医类型类型</b>
უ		Net investment income (if negative, enter -0-)	PROPERTY I	Remark to the State of State o	0.1		THE THE PROPERTY OF THE WAY
		Adjusted net income (if negative, enter -0-)	CONTRACTOR SEE	FIGHT (1)	7 (120 <del>2)</del>	N/A	TENTON TOTAL
				المتحاضين المتناس المتعادمة	المستعددة التنظير	41/44	المستقلمة المعالمة ال

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30			
	(must agree with end-of-year figure reported on prior year's return)	1	•	0.
2	Enter amount from Part I, line 27a	2	1,6	73,254.
3	Other increases not included in line 2 (itemize)	3		0.
4	Add lines 1, 2, and 3	4	1,6	73,254.
5	Decreases not included in line 2 (itemize)	5		0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	1,6	73,254.

(a) List and desc	ribe the l	osses for Tax on In kind(s) of property sold (e.g., ; or common stock, 200 shs.	real estate,	it Income	` P -	w acquired Purchase Donation		) Date acquired mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a					۲	Donation	+		
b NO	NE						╁╌		
C		·				·	<del>                                     </del>		
d							1_		
е									
(e) Gross sales price	(1)	Depreciation allowed (or allowable)		est or other basis expense of sale			(0	(h) Gain or (loss) e) plus (f) minus (	
<u>a</u>									
<u>b</u>									
<u>c</u>				<del></del>	-				
<u>d</u>									
Complete only for assets shown	a asia in	column (h) and owned by th	e foundation	n on 12/21/60	-		//\ C=	(O-1 (b)	
Complete only for assets showing					-	1	(1) Ga col. (k)	ıns (Col. (h) gaın , but not less than	minus  -0-) or
(i) F.M.V. as of 12/31/69		(j) Adjusted basis as of 12/31/69		col. (j), if any			La La	sses (from col. (t	n))
<u>a</u>									
<u>b</u>					-				
<u> </u>				<del></del>					· · · · · · · ·
<u>d</u>					_  _				<u></u>
<u>e</u>					+				
2 Capital gain net income or (net cap	pital loss	If gain, also enter ii If (loss), enter -0- i			<u>}</u>	2			
3 Net short-term capital gain or (los if gain, also enter in Part I, line 8,	column (d		(6):		1				
If (loss), enter -0- in Part I, line 8   Part V   Qualification U	ndor S	eation 4040/a) for I	30duooo	Tay an Nat		3			
If section 4940(d)(2) applies, leave th Was the foundation liable for the secti If "Yes," the foundation does not quali 1 Enter the appropriate amount in e	ion 4942 fy under	tax on the distributable amor section 4940(e). Do not com	plete this pa	rt					Yes X No
(a) Base period years		(b) Adjusted qualifying distril		Net value of non	(c)	da-uca acca		Distribu	d)
Calendar year (or tax year beginnin	g in)	Adjusted qualifying district		Net value of from	CHAHLAL			(col. (b) divid	led by col. (c))
2011			0.				$\frac{0.1}{0.1}$		.000000
20 <u>10</u> 2009			0.				0.1		.000000
2008		<del> </del>	0.	<del></del>	_		0.	<del></del>	.000000
2007			0.				<del>0.</del>  -		.000000
				<del></del>	-	-	-		
2 Total of line 1, column (d)								2	.000000
3 Average distribution ratio for the 5- the foundation has been in existen			line 2 by 5,	or by the number o	f years			3	.000000
4 Enter the net value of noncharitable		·	. F						547,789.
	5-USG dSS	865 101 2012 110111 Fait A, 11116	3 3				<u> </u>	4	<del></del>
5 Multiply line 4 by line 3				-			}-	5	0.
6 Enter 1% of net investment income	e (1% of I	Part I, line 27b)					-	6	0.
7 Add lines 5 and 6								7	0.
8 Enter qualifying distributions from	Part XII, I	line 4						8	81,000.
If line 8 is equal to or greater than I	ine 7. che	ock the how in Dart \// line 1h		ata that part young	- 40/ 1	-4-	•		

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Form 990-PF (2012) James R. Meadows Jr. Foundation	62-154	5923 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NO	NE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	<u> </u>	0
PartiX-A Summary of Direct Charitable Activities	<del> </del>	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical info number of organizations and other beneficiaries served, conferences convened, research papers produced, e	ormation such as the tc.	Expenses
1 N/A		
	<del></del>	
2		
3		·
4		
PartiX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 a	and 2.	Amount
1N/A	<del></del>	
All other program-related investments. See instructions.		
Patel Add lines 1 through 2		

Page 8

Part X Minimum Investment Return (All domestic foundations must comp	olete this part. Foreign foundations, see instructions)
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., pur	poses:
a Average monthly fair market value of securities	1a 0
b Average of monthly cash balances	1b 556,131
c Fair market value of all other assets	1c
d Total (add lines 1a, b, and c)	1d 556,131
e Reduction claimed for blockage or other factors reported on lines 1a and	
1c (attach detailed explanation)	0.
2 Acquisition indebtedness applicable to line 1 assets	2 0
3 Subtract line 2 from line 1d	3 556,131
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instruc	ctions) 4 8,342
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line	e 4 5 547,789
6 Minimum investment return. Enter 5% of line 5	
Part XIII Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) print foreign organizations check here  and do not complete this part.)	
1 Minimum investment return from Part X, line 6	1 27,389
2a Tax on investment income for 2012 from Part VI, line 5	
b Income tax for 2012. (This does not include the tax from Part VI.)	
c Add lines 2a and 2b	2c 0
3 Distributable amount before adjustments. Subtract line 2c from line 1	3 27,389
4 Recoveries of amounts treated as qualifying distributions	4 ]0
5 Add lines 3 and 4	5 27,389
6 Deduction from distributable amount (see instructions)	6 0
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	. 7 27,389
Part XIII Qualifying Distributions (see instructions)	[6286\-28]
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	91 000
a Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a 81,000
b Program-related investments - total from Part IX-B	
Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., pur	
Amounts set aside for specific charitable projects that satisfy the:	
a Suitability test (prior IRS approval required)	3a
b Cash distribution test (attach the required schedule)	3b
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII,	line 4 4 81,000.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5 0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6 81,000.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculat 4940(e) reduction of tax in those years.	· · · · · · · · · · · · · · · · · · ·

#### Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI, line 7				27,389
2 Undistributed income, if any, as of the end of 2012		<b>通過機能力於</b>		TOWN THE REST.
a Enter amount for 2011 only		情况的是是可以	0.	
b Total for prior years:			· · · · · · · · · · · · · · · · · · ·	
6 Everes distributions community to 2010.		0.		
3 Excess distributions carryover, if any, to 2012:				
a From 2007 b From 2008				
c From 2009				
dFrom 2010				
eFrom 2011				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2012 from	777-38580 - 473-568			
Part XII, fine 4: ►\$ 81,000.				
a Applied to 2011, but not more than line 2a			0.	
b Applied to undistributed income of prior			1987 (1980 (202) HEE	75.147.77.77.73.75.79.
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2012 distributable amount		indicate for the		27,389.
e Remaining amount distributed out of corpus	53,611.			
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount	0.	That I was to see the con-		· · · · · · · · · · · · · · · · · · ·
must be shown in column (a) )				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	53,611.			
b Prior years' undistributed income. Subtract	t Hall of March	that the state of the	THE STATE OF	
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of		Ž		
deficiency has been issued, or on which the section 4942(a) tax has been previously		ن		
assessed		0.		
d Subtract line 6c from line 6b. Taxable		3		10000000000000000000000000000000000000
amount - see instructions		0.		
e Undistributed income for 2011. Subtract line				
4a from line 2a. Taxable amount - see ınstr.  1 Undistributed ıncome for 2012. Subtract	24 PA 18 1	7 2 2 2 2 2	0.1	rt. IPatel H
lines 4d and 5 from line 1. This amount must				
be distributed in 2013				0.
7 Amounts treated as distributions out of	Section and the second of the	以下了。 (1)	The state of the s	
corpus to satisfy requirements imposed by	i i			
section 170(b)(1)(F) or 4942(g)(3)	0. l			
B Excess distributions carryover from 2007	5.4			
not applied on line 5 or line 7	0 • 🖫			
Excess distributions carryover to 2013.	Ä		震力 医异糖皮肤	1772737 330
Subtract lines 7 and 8 from line 6a	53,611.	A CONTRACTOR OF THE STATE OF TH		
Analysis of line 9:			<b>建、建、</b>	<b>医工程等于</b> 12 12
a Excess from 2008				
b Excess from 2009				
c Excess from 2010				
dExcess from 2011 eExcess from 2012 53,611.				
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Total

Form 990-PF (2012)

**▶** 3b

### Part XVI: A Analysis of Income-Producing Activities

Form 990-PF (2012)

Enter gross amounts unless otherwise indicated.		ted business income		uded by section 512, 513, or 514	(e)
	(a) Busiņess	(b)	(C)	• •	Related or exempt
1 Program service revenue:	code	Amount	sion	Amount	function income
a			Ţ		
b					
c			1		
e					†
f			<del>                                     </del>		
g Fees and contracts from government agencies		-	1		
2 Membership dues and assessments			<del>                                     </del>		<del> </del>
3 Interest on savings and temporary cash			<del>                                     </del>	<del>                                   </del>	<del> </del>
investments		l .	14	1,317.	
4 Dividends and interest from securities	<del>-</del>		1 - 3		
		M3341V-4-7-32 <b>98</b> 9861 <b>33</b> 889	Dat Obr		
5 Net rental income or (loss) from real estate:	MARKET AND		37346	#0" 25 TO BERGE THE 22 FOR 1-12 /	
a Debt-financed property			<del> </del>	<u> </u>	
b Not debt-financed property	<u> </u>	<del> </del>	<del> </del>		
6 Net rental income or (loss) from personal					
property			<u> </u>		
7 Other investment income					
8 Gain or (loss) from sales of assets other	1				
than inventory					
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:			i		
a					
b					
c					
d					
e					
2 Subtotal. Add columns (b), (d), and (e)	TO SHOW	0.		1,317.	0.
3 Total. Add line 12, columns (b), (d), and (e)				13	1,317.
See worksheet in line 13 instructions to verify calculations.)	•	• • • • • • • • • • • • • • • • • • • •		•	<del></del>
	- Al A				
Part:XVI-B: Relationship of Activities to	o the Acco	omplishment of Ex	emp	t Purposes	
Line No. Explain below how each activity for which incor	me is renorted i	n column (e) of Part XVI-A	contrib	uted importantly to the accom	infishment of
the foundation's exempt purposes (other than I	by providing fu	nds for such purposes).	00.1010	atod importantly to the docom	iphominone of
the foundation's exempt purposes (other than by The foundation was able	to pro	ovide suppor	t. t.	o 11 public c	harities.
, , , , , , , , , , , , , , , , , , , ,	- 00 PI	Ovido Buppor		o II public c.	
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	J-PF (201	2) James	s k. mead	ows Jr	<ul> <li>Foundation</li> </ul>	<u> </u>	62	1545923	Page 1
Part®	KVII.	Information R Exempt Organ		nsfers To	and Transactions	and Relation	nships With Nor	charitable	
1 Did	the orgai	nization directly or indi	rectly engage in an	y of the follow	ing with any other organiza	ation described in se	ection 501(c) of	132	Yes No
the	Code (otl	ner than section 501(c	:)(3) organizations)	or in section 5	527, relating to political org	anizations?			量 辭
a Trai	nsfers fro	m the reporting found	lation to a nonchari	table exempt c	organization of:				
(1)	Cash							1a(1)	X
(2)	Other as	sets					•	1a(2)	X
b Oth	er transac	ctions;						<b>多题</b>	
(1)	Sales of	assets to a noncharita	ible exempt organiz	ation				1b(1)	X
(2)	Purchas	es of assets from a no	ncharitable exempt	organization				1b(2)	X
(3)	Rental of	f facilities, equipment,	or other assets			_		1b(3)	X
		sement arrangements						1b(4)	X
(5)	Loans or	loan guarantees						1b(5)	X
		ance of services or me	embership or fundra	aising solicitati	ions			1b(6)	X
• •		cılıties, equipment, ma	· ·					1c	X
	-		-	-	nedule. Column (b) should a	always show the fail	market value of the go	ods, other asset	Ls.
					ved less than fair market va				·
		e value of the goods,				•	•	•	
(a)Line no	(b)	Amount involved	(c) Name (	of noncharitab	le exempt organization	(d) Descripti	on of transfers, transactions	s, and sharing arrar	ngements
	1	<del></del>		N/A	·		<del></del>		
			<u> </u>					<del>-</del>	
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		ion directly or indirect (c) of the Code (other			or more tax-exempt organ tion 527?	nizations described		Yes	X No
b If "Ye	es," comp	lete the following sche				<del></del>			
		(a) Name of orga	anızatıon		(b) Type of organization		(c) Description of relat	onship	
		N/A				<u> </u>			
				, . <u></u>		·			
		<u> </u>				ļ			
		· · · · · · · · · · · · · · · · · · ·				<u> </u>			
	and belief,	Mrucia		reparer (other tha	ng accompanying schedules and in taxpayer) is based on all infor	President Presid	er has any knowledge	May the IRS disc return with the pr shown below (se	reparer
		e of officer or trustee		I D	Date '	Title	Charle Tail 4 1-	FIN	
	Pri	nt/Type preparer's nar	me	Preparer's s	ignature	Date	LJ	TIN	
Paid	K	athleen G	rainger	Kathe	un Drung.	11/12/13	self- employed	2012596	32
Prepai Use O	rer Fire			ynolds	& Associate	s, PLLC	Firm's EIN ▶ 62		
JJ0 <b>U</b>	-				., Ste. 1020	)	<del>                                     </del>		
		Nas	shville,	TN 372	03		Phone no. 61!	5-255-22	<u> </u>

223622 12-05-12

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

Department of the Treasury Internal Revenue Service

#### **Schedule of Contributors**

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

OMB No 1545-0047

2012

Name of the organization Employer identification number James R. Meadows Jr. Foundation 62-1545923 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 X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule 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, total 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 total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$ Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF),

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) (2012)

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 Part I, 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).

Employer identification number

#### James R. Meadows Jr. Foundation

62-1545923

Part I	Contributors (see instructions). Use duplicate copies of Part I if addit	ional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Estate of James R. Meadows, Jr.  408 Hyde Park  Nashville, TN 37215		Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total 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) Total contributions	(d) Type of contribution
		- - - -	Person Payroll Oncash Occash Complete Part II if there is a noncash contribution.)
(a) No	(b) Name, address, and ZIP + 4	(c) Total 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) Total 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) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II if there is a noncash contribution.)

Employer identification number

#### James R. Meadows Jr. Foundation

62-1545923

Part III	Noncash Property (see instructions). Use duplicate copies of Part II if a	additional space is needed.	
(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. 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
		\$	<del></del>
(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
		\$	00. 000 E7. or 000 PE) (2012)

(e) Transfer of gift

Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee Form 990-PF

List of Substantial Contributors
Part VII-A, Line 10

Statement

5

Name of Contributor

Address

Estate of James R. Meadows, Jr.

408 Hyde Park Nashville, TN 37215

Rart XV Supplementary Information 3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual.	T	T	<u>-</u> -
	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
The Land Trust for Tennessee		Public Charity	For use in the	
209 10th Ave South, Suite 511			organization's exempt	
Nashville, TN 37203			function.	3,000.
Vanderbilt University		Public Charity	For use in the	
2301 Vanderbilt Place			organization's exempt	
Nashville, TN 37240			function.	10,000.
Westminster Presbyterian Church		Public Charity	For use in the	
3900 West End Avenue		1	organization's exempt	
Nashville, TN 37205			function.	2,000.
Nashville Rescue Mission		Public Charity	For use in the	
639 Lafayette Street		_	organization's exempt	
Nashville, TN 37203		1	function.	1,000.
Nashville Public Television		Public Charity	For use in the	
161 Rains Avenue			organization's exempt	
Nashville, TN 37203			function.	1,000.
Nashville Public Radio		Public Charity		
630 Mainstream Drive	İ	1 1	organization's exempt	
Nashville, TN 37228		! - 1	function.	1,000.
			İ	
Total from continuation sheets	<u> </u>			18,000.

Form 990-PF Interest on Sav	ings and Tem	nporary Cash I	nvestments	Statement 1
Source	-			Amount
Bank of Nashville Civic Bank & Trust SunTrust Bank			-	257. 347. 713.
Total to Form 990-PF, Part I	, line 3, Co	olumn A	- -	1,317.
Form 990-PF	Legal	Fees		Statement 2
Description	(a) Expenses Per Books		(c) Adjusted Net Income	
Legal	5,289.	5,289.		0.
To Fm 990-PF, Pg 1, ln 16a	5,289.	5,289.		0.
Form 990-PF	Accounti	ng Fees		Statement 3
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Accounting	737.	0.		0.
- To Form 990-PF, Pg 1, ln 16b =	737.	0.		0.
Form 990-PF	Other E	xpenses		Statement 4
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Description Office	Expenses	Net Invest-	Adjusted	Charitable

#### Form **8868**

(Rev. January 2013)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.

OMB No 1545-1709

III GII AI I TOTO	I lie a set	Jarate app	pilcation for each return.									
-	are filing for an Automatic 3-Month Extension, comple	-		•		. <b>•</b> X						
	are filing for an Additional (Not Automatic) 3-Month E											
	omplete Part II unless you have already been granted											
	c filing (e-file). You can electronically file Form 8868 if											
•	to file Form 990-T), or an additional (not automatic) 3-mo		•		•							
of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain												
	Benefit Contracts, which must be sent to the IRS in pa	-	t (see instructions). For more details o	on the e	lectronic filing of	this form,						
Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).												
	tion required to file Form 990-T and requesting an auto											
Part I only	-	mano o m	one oxionsion oned and box and	oompiot	·							
	corporations (including 1120-C filers), partnerships, REN	 IICs, and	trusts must use Form 7004 to reques	t an exte	ension of time							
	ome tax returns.		·	_								
Type or	Name of exempt organization or other filer, see instru	Employer identification number (EIN) or										
orint												
	James R. Meadows Jr. Found	62-1545923										
Number, street, and room or suite no. If a P.O. box, s			ctions.	Social s	Social security number (SSN)							
ling your sturn See	408 Hyde Park											
structions.	City, town or post office, state, and ZIP code. For a for	oreign add	dress, see instructions.									
Nashville, TN 37215-2449												
nter the I	Return code for the return that this application is for (file	a separa	te application for each return)		minut	04						
		τ	T			<del></del>						
pplicatio	on	Return	Application	Return								
s For	E 000 E7	Code	Is For	Code								
orm 990 or Form 990-EZ		01	Form 990-T (corporation)			07						
orm 990-i		02	Form 1041-A			08						
	) (individual)	03	Form 4720			09						
orm 990-l		04	Form 5227	_		10						
		05	Form 6069			11						
orm 990-T (sec. 401(a) or 408(a) trust) orm 990-T (trust other than above) Patricia Meadow		06	Form 8870			12						
The boo	oks are in the care of <b>Augusticia</b> Meadow		างว่าได									
	ne No. ► (615) 832-7000	_Nası	FAX No. ►		<del></del> -							
-	ganization does not have an office or place of business	in the Lin	· ————			ightharpoonup						
	for a Group Return, enter the organization's four digit G			 this is fo	or the whole arou	in check this						
ox <b>▶</b> □	. If it is for part of the group, check this box		ch a list with the names and EINs of a									
	uest an automatic 3-month (6 months for a corporation	·	· · · · · · · · · · · · · · · · · · ·		JOIO LIIO OXIONOR							
			ion return for the organization named		The extension							
	the organization's return for:	Ū										
► X calendar year 2012 or												
tax year beginning , and ending .												
If the	tax year entered in line 1 is for less than 12 months, ch	eck reaso	n: Initial return E	nal retur	'n							
	Change in accounting period											
	application is for Form 990-BL, 990-PF, 990-T, 4720, or	6069, enter the tentative tax, less any										
	efundable credits See instructions.			3a	\$	7,300.						
	application is for Form 990-PF, 990-T, 4720, or 6069, e	-				•						
	ated tax payments made. Include any prior year overpa			3b	_\$	0.						
	nce due. Subtract line 3b from line 3a. Include your pay		• • •									
	ing EFTPS (Electronic Federal Tax Payment System). S			3c	\$	7,300.						
	you are going to make an electronic fund withdrawal wi			n 8879-l								
∙lA For	Privacy Act and Paperwork Reduction Act Notice, s	ee instruc	ctions.		Form <b>8868</b>	(Rev. 1-2013)						

Form 8	868 (Rev. 1·2013)		•	,		Page			
	u are filing for an Additional (Not Automatic) 3-Month E	xtension.	complete only Part II and check th	is box		► X			
	Only complete Part II if you have already been granted an				n 8868.				
	u are filing for an Automatic 3-Month Extension, comple		• • •						
Part				nal (no	copies r	needed).			
			······································			er, see instructions			
Type o	Name of exempt organization or other filer, see instru	Employer identification number (EIN) o							
print	, tame of oxompt organization of outst they obstitute								
File by the	James R. Meadows Jr. Founda	1	62-1545923						
due date i	data tau					Social security number (SSN)			
filing your return Se	400 Trade Desile	000	, county	mod (octy					
instruction		oreign add	tress, see instructions.	<b>.</b>					
	Nashville, TN 37215-2449	o.o.g.r ao.							
						<del></del>			
Enter th	ne Return code for the return that this application is for (file	e a cenara	ite application for each return)			0 4			
	o riotally odds for the fotolith triat this application is for this	o a separe	to application for each retains	•	•	💆 🕹			
Applica	etion .	Return	Application	<del></del>		Return			
Is For		Code	Is For			Code			
	90 or Form 990-EZ	01			<del></del>	- / Code			
Form 99		02	Form 1041-A	•		08			
	720 (individual)	03	Form 4720			09			
Form 99		04	Form 5227			10			
	00-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11			
	00-T (trust other than above)	06	Form 8870		<del>-</del>	12			
	Do not complete Part II if you were not already granted			iouolu fil	ad Form 9				
<u> </u>	Patricia Meadow		natio o month extension on a prev	iousiy iii	ear omic				
■ The b	pooks are in the care of $\triangleright$ 408 Hyde Park -		ovillo my 37215			•			
	shone No. ► (615) 832-7000	Nasi	FAX No. ▶						
		in tha l la	· •		~				
	organization does not have an office or place of business			 Fabro io do		a araun ahaak thia			
_	is for a Group Return, enter the organization's four digit G	-				= :			
oox ▶	. If it is for part of the group, check this box		ch a list with the names and EINs of	air memi	ers trie ex	tension is for.			
	I request an additional 3-month extension of time until <u>November 15, 2013</u> .								
	For calendar year 2012, or other tax year beginning, and ending, and ending  If the tax year entered in line 5 is for less than 12 months, check reason:   Initial return   Final return								
6 If 1	the tax year entered in line 5 is for less than 12 months, ch	neck reaso	on: L Initial return L_	Final	return				
~ C	Change in accounting period								
	State in detail why you need the extension								
	Taxpayer does not have all K-1s necessary to file a complete and								
<u>a</u>	ccurate return.								
0 161	h		And the Annual Control of the Contro						
	his application is for Form 990-BL, 990-PF, 990-T, 4720, or	r 6069, en	iter the tentative tax, less any			7 200			
	nrefundable credits. See instructions.		<del></del>	8a	\$	7,300.			
	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated								
	tax payments made. Include any prior year overpayment allowed as a credit and any amount paid					7 200			
	previously with Form 8868.					7,300.			
	Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.					•			
EF	EFTPS (Electronic Federal Tax Payment System). See instructions.  Signature and Verification must be completed for Part II only					0.			
	_		•	•					
inder pen	ialties of perjury, I declare that I have examined this form, includin correct, and complete, and that I am authorized to prepare this fori	g accompa	nying schedules and statements, and to	tne best o	r my knowle	dge and belief,			
			<b>.</b>		_				
<u>ignature</u>	► Title ► P:	<u>resid</u>	ent	<u>Date</u>	<u> </u>				

Form 8868 (Rev. 1-2013)