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

OMB No 1545 0052

2013

Department of the Treasury Internal Revenue Service

► Do not enter Social Security numbers on this form as it may be made public. ► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

For cale	endar year 2013, or tax year beginning	, 2013	, and ending				
P.O.	JACKSON FOUNDATION BOX 8230	<u> </u>			A Employer identification number 58-2546170 B Telephone number (see the instructions)		
THOM	ASVILLE, GA 31758-8230						
G Che	ck all that apply Initial return	Initial return of a form	mer public charity	С	If exemption application is	pending, check here	
	Final return Address change	Amended return Name change		D .	1 Foreign organizations, chec	ck here	
H C		1(c)(3) exempt private f	foundation	} ;	2 Foreign organizations meet here and attach computation		
	Section 4947(a)(1) nonexempt charitable		private foundation	Ε	If private foundation status	was terminated	
I Fai	r market value of all assets at end of year om Part II, column (c), line 16)	counting method: XC	ash Accrual	F	under section 507(b)(1)(A) If the foundation is in a 60	اا	
▶\$, column (d) must be or	r cash basis)	<u>i</u>	under section 507(b)(1)(B)		
Partel	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 expenses per books	(b) Net investmer income	nt	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash	
	(see instructions)) Contributions, gifts, grants, etc, received (att sch)	20,000	to always a settle of the	50 V 12	Product I I can be a section of	basis only)	
*	2 Ck rithe founds is not reg to att Sch B	20,000.					
2014.	3 Interest on savings and temporary cash investments	3,350.	3, 35		476.		
	4 Dividends and interest from securities .	4,502.	4,50				
~ "	5 a Gross rents						
E R	or (loss). 6 a Net gain/(loss) from sale of assets not on line 10 b Gross sales price for all			980			
E E V	7 assets on line 6a . Capital gain net income (from Part IV, line 2)						
	8 Net short-term capital gain				- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		
SCANNED and and a	9 Income modifications				The same of the same		
S	allowances b Less Cost of						
	c Gross profit/(loss) (att sch)	1000 F. 200.0 J. 200.00			CONTRACTOR OF STATES		
	11 Other income (attach schedule)		195 3 20 1 1 1 2 1 M W W W W W W W W W W W	77.41.75		できる動物があるものといる	
	12 Total. Add lines 1 through 11	27,852.	7,85	52	4,978.	下され続い、「新りら」を「下って、大田の大田の大田の大田の大田の大田の大田の大田の大田の大田の大田の大田の大田の大	
	13 Compensation of officers, directors, trustees, etc.	0.	,,,,,		4,570.	**************************************	
	14 Other employee salaries and wages15 Pension plans, employee benefits						
A	16 a Legal fees (attach schedule)			*			
M	b Accounting fees (attach sch) c Other prof fees (attach sch)						
O I P S	17 Interest						
P S T R A A T	18 Taxes (attach schedule)(see instrs) 19 Depreciation (attach		RECEIV	ED		-	
A A	sch) and depletion				SC	13 m 1 m 1 m 1 m 2 m 1 m 1 m 1 m 1 m 1 m 1	
N V G E	20 Occupancy21 Travel, conferences, and meetings			014	<u>S</u> O		
A E N X D P	22 Printing and publications) II			ŭ.		
D P E N	23 Other expenses (attach schedule)		OGDEN.	U			
Š	Total operating and administrative expenses. Add lines 13 through 23						
,	25 Contributions, gifts, grants paid STMT 1	19,000.	Same State	- 40.5	73% MAD 1 00	19,000.	
	26 Total expenses and disbursements. Add lines 24 and 25	19,000.		0.	0.	19,000.	
	27 Subtract line 26 from line 12: a Excess of revenue over expenses		A Comment		源:(1) "		
	and disbursements	8,852.				And the second	
	b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-)		7,85	52.	4,978.		
BAA F	or Paperwork Reduction Act Notice, see in:			TEEA	0504L 10/18/13	Form 990-PF (2013)	

Page 2

Raintill Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (a) Book Volume (b) Book Volume (c)					f year		
Han	ang r	Balance Sneets	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash - non-interest	-bearing				
	2	Savings and tempor	ary cash investments	192,496.	104,313.	104,313.	
	3	Accounts receivable	, · · · · · · · · · · · · · · · · · · ·				
		Less, allowance for	doubtful accounts				
	4	Pledges receivable.	,	ALLES DE DETERMINE		AMENTAL MANAGEMENT	
		Less, allowance for	doubtful accounts >		management of the factor of th	A CONTRACTOR OF THE PROPERTY OF A STREET AND A STREET ASSESSMENT OF THE PROPERTY OF THE PROPER	
	5	Grants receivable		•			
	6	Receivables due from offi	cers, directors, trustees, and other				
	7	disqualified persons (atta Other notes and loans rec	ch schedule) (see instructions).		\$.5 50 77 STARSSTON	数据2000年3月2日 2011 1000年3月2日 - 2011	
Α	′	Less: allowance for	` -				
S	8	Inventories for sale					
A S S E T	9		nd deferred charges				
T S			•				
>	iua	obligations (attach s	and state government schedule)	50,802.	95,535.	95,883.	
	p	Investments — corporate	stock (attach schedule)	35,247.	35,247.	36,476.	
	С	: Investments — corporate	bonds (attach schedule)	19,660.	69,163.	70,055.	
	11	Investments — land equipment basis	, buildings, and				
,	l	Less accumulated depred (attach schedule)	ciation	and the second section of the second section of the second section of the section of the second section of the section of the second section of the section of the second section of the	g deserves and an all the second	de de 2000 (de la militaria de la major que forma de la principa de la manda de la manda de la manda de la mand	
	12	Investments - mort	gage loans.				
	13	Investments - othe	r (attach schedule) .	73,515.	76,314.	71,371.	
	14	Land, buildings, and	l equipment basis ►	STATESTALISTA	C. A. Marian C. C.		
		Less: accumulated depred (attach schedule)	ciation . ►				
	15	Other assets (descr	ibe ►)	,	·		
		Total assets (to be	completed by all filers	371,720.	380,572.	378,098.	
	17		nd accrued expenses	3/1,/20.	300/372.		
Ī	18	Grants payable					
A B	19	Deferred revenue					
Ţ	20		ctors, trustees, & other disqualified persons				
ī	21	•	es payable (attach schedule)			Special Control	
Ţ	22	Other liabilities (des					
Ė		·			_	Part A	
E S	23		I lines 17 through 22)	0.	0.		
	}	Foundations that for and complete lines	bllow SFAS 117, check here 24 through 26 and lines 30 and 31.	3			
NF	24	Unrestricted		371,720.	380,572.		
E U	25	Temporarily restrict	ed			医原列法氏管的	
D	26	Permanently restrict	ted				
A B S A L T A		Foundations that d and complete lines	o not follow SFAS 117, check here 🕒 🗀 27 through 31.				
ĒĹ	27	Capital stock trust	principal, or current funds			[19] [1] [1] [1] [1] [1] [1] [1] [1] [1] [1	
TA	28	•	, or land, building, and equipment fund			1. 蒙字語:九二章	
С	29	•	nulated income, endowment, or other funds .			[1] "以及"。	
O E R S	30		fund balances (see instructions)	371,720.	380,572.	(F) 147, 157 157	
	31		net assets/fund balances	371,720.	380,572.		
Par	FILL		nges in Net Assets or Fund Baland		300,312.	1	
Ь					egrae with		
1	end-	of-year figure reporte	palances at beginning of year — Part II, col ed on prior year's return)	umn (a), line 30 (must a	. 1	371,720.	
2		r amount from Part I			2	8,852.	
3		increases not included in			- 3	200 572	
4		lines 1, 2, and 3			5	380,572.	
5		ases not included in line 2		N = Part II column (b)		390 572	
6_	Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 30 6 380, 572.						

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Enter qualifying distributions from Part XII, line 4

Add lines 5 and 6

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Enter 1% of net investment income (1% of Part I, line 27b)

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6

7

		58-2546170		Р	age 4
·	t 💯 🔙 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 -	 see instructio 	ns)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here	ارم بالقرار و القرار		روز کی این استان ما انگریت	
	Date of ruling or determination letter. (attach copy of letter if necessary – see instrs)	i			
b	Domestic foundations that meet the section 4940(e) requirements in Part V,	- 1		1	157.
	check here. ► and enter 1% of Part I, line 27b	75777 500 Sec. 8 845	N. 5. 186	se["4].	
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)		390.70	MOS-T	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2			0.
3	Add lines 1 and 2	3		$\overline{}$	57.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0	0-) 4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		1	57.
6	Credits/Payments:	\$3.8 V.8	372337	GEN.	ALUE"
	2013 estimated tax pmts and 2012 overpayment credited to 2013 6 a				SANCE ENAMED
	Exempt foreign organizations — tax withheld at source				
	Tax paid with application for extension of time to file (Form 8868) 6 c		7	7.72	4 14 7 C
	Backup withholding erroneously withheld 6 d				
	· · · · · · · · · · · · · · · · · · ·		act		
_	Total credits and payments. Add lines 6a through 6d	7			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed.	▶ 9		1	<u> 57.</u>
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			
11	Enter the amount of line 10 to be. Credited to 2014 estimated tax Refunded	<u>►</u> 11			
Par	Statements Regarding Activities				
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did participate or intervene in any political campaign?	⊢it	1 a	Yes	No X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		1 b		Х
	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	1			
_	Did the foundation file Form 1100 DOL for this year?		1. C	المنظمان.	
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		. 1 c	2867 . 3483	X
	(1) On the foundation >\$ 0. (2) On foundation managers . >\$	0.			ty. 37, kb@3
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on				
	foundation managers • \$ 0 .			Lista Li	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		Х
	If 'Yes,' attach a detailed description of the activities		. , ,	· 1 *	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles				
3	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the change	25	3		X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4 a		X
	olf 'Yes,' has it filed a tax return on Form 990-T for this year?		4 b	N	
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
_	If 'Yes,' attach the statement required by General Instruction T.		3 8	A. 15	133 J
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		马强	\$3.5	(A)
·	By language in the governing instrument, or				2 42.27 2 20.2 2 4 20.2
			「抗菌		
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that confl with the state law remain in the governing instrument? 	ict	6	المالة المستقلة	X
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	х	
	Enter the states to which the foundation reports or with which it is registered (see instructions)	•	1	<u></u>	
5 8	•	· 	63.7.5.2	12.00	3,4
	GA		17	1, 7, 13, 15	337
t	o If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G? If 'No,' attach explanation</i> .		8 b	X	
^		(3) or 4042(1)(E)	20.78	, Y 's	<u></u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If 'Yes,' cor	nplete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their name				
10	and addresses		10	. <u> </u>	Х
BAA		Ë	orm 99 0)-PF (20	

b Are there any years listed in 2a for which the foundation is not 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) t all years listed, answer 'No' and attach statement — see instructions.)	o
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	
a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	s X No

•
b If 'Yes,' did it have excess business holdings in 2013 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 2013)

a Did the foundation in		the year any amount i	n a manner	that would	jeopardize its
charitable purposes?	• •	•		•	•

b Did the foundation make any investment in a prior y	ear (but after December 31, 1969) that coul	ld
jeopardize its charitable purpose that had not been remo	oved from jeopardy before the first day of	
the tax year beginning in 2013?	•	

3b N/A
4a X
4b X

2 b

BAA

3

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Part VIBB Statements Regarding Activit	ies for Which Form	i 4720 May Be Req	uired (continued)	
5 a During the year did the foundation pay or incu (1) Carry on propaganda, or otherwise attempt		n (section 4945(e))?	· · · Yes X	No
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	lic election (see section ation drive?	n 4955); or to carry 	Yes X	No S
(3) Provide a grant to an individual for travel,	•		Yes	No
(4) Provide a grant to an organization other to in section 509(a)(1), (2), or (3), or section	han a charıtable, etc, oı ı 4940(d)(2)? (see ınstrı	rganization described uctions) .	Yes X	No Paragraphic
(5) Provide for any purpose other than religio educational purposes, or for the prevention	us, charitable, scientific in of cruelty to children	c, literary, or or animals?	Yes] No
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53.4945 or in (see instructions)? Organizations relying on a current notice regains	a current notice regard	ding disaster assistance	etions e	56 N/A
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	the foundation claim ex sibility for the grant?	emption from the	N/A Yes] No
If 'Yes,' attach the statement required by Reg 6 a Did the foundation, during the year, receive a on a personal benefit contract?			s ∏Yes ဩ	√No .
b Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	iums, directly or indirec	tly, on a personal bene		6b X
7a At any time during the tax year, was the found	dation a party to a proh	ibited tax shelter transa	action? Tyes 5	No Property
b If 'Yes,' did the foundation receive any process				N/A 7b
Rart VIII Information About Officers, D and Contractors	irectors, Trustees,	Foundation Manag	gers, Highly Paid	Employees,
1 List all officers, directors, trustees, foundation	n managers and their	compensation (see inst	tructions).	
(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) Expense account, other allowances
HEROLD JACKSON P.O. BOX 8230 THOMASVILLE, GA 31758-8230	PRESIDENT 0	0.	0.	0.
PATSY JACKSON P.O. BOX 8230 THOMASVILLE, GA 31758-8230	SECRETARY/TR 0	0.	0.	0.
2 Compensation of five highest-paid employees (o	ther than those included	on line 1 – see instructio	ns). If none, enter 'NON	ξ.'
(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	(e) Expense account, other allowances
NONE				
				
		<u> </u>		
				1
Total number of other employees paid over \$50,00				

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Pa	Information About Officers, Directors, Trustees, Foundationand Contractors (continued)	on Managers, Highly Paid Em	ployees,
_3	Five highest-paid independent contractors for professional services (see instru	ctions). If none, enter 'NONE.'	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NOI	NE		
			· · · · · · · · · · · · · · · · · · ·
Tota	I number of others receiving over \$50,000 for professional services	•	0
Pai	THE Summary of Direct Charitable Activities		
1 .0+ +	he foundation's four largest direct charitable activities during the tax year. Include relevant statistical infor	motion such as the number of	
organ	izations and other beneficiaries served, conferences convened, research papers produced, etc	mation such as the number of	Expenses
1	N/A		
			
2			
•			
3			
4			
Pai	Summary of Program-Related Investments (see instruction	15)	
Des	cribe the two largest program-related investments made by the foundation during the tax	year on lines 1 and 2	Amount
1	17/X		
	<u>N/A</u>		
2			
-			
All	other program-related investments. See instructions.		
3			

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Total. Add lines 1 through 3

Part 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 a **b** Average of monthly cash balances ... 1 b c Fair market value of all other assets (see instructions) 1 c Ō. 1 d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1c Acquisition indebtedness applicable to line 1 assets . . 2 2 3 Subtract line 2 from line 1d . Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions) 4 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4. 5 0. 6 Minimum investment return. Enter 5% of line 5..... 6 0. Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations Minimum investment return from Part X, line 6 3 2 a Tax on investment income for 2013 from Part VI, line 5 2 a 157 b Income tax for 2013. (This does not include the tax from Part VI) . 2 b 2 c 157. 3 Distributable amount before adjustments. Subtract line 2c from line 1 -157.Recoveries of amounts treated as qualifying distributions 4 4 5 5 Add lines 3 and 4 . . . -157.Deduction from distributable amount (see instructions). 6 6 7 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 0. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes. a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1 a 19,000. **b** Program-related investments - total from Part IX-B. 1 b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes, 2 3 a **b** Cash distribution test (attach the required schedule) 3 Ь 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 19,000. Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions) 5 19,000. 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

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Part XIII Undistributed Income (see instructions)

•		(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
Distributable amount fo line 7	r 2013 from Part XI,				0.
2 Undistributed income, if any,	as of the end of 2013:	ZARACIEMO	THE WORLD SEE SEE SEE SEE		THE STATE OF THE S
a Enter amount for 2012	only			0.	
b Total for prior years: 20	, 20, 20	建筑水流像(水水流	0.	科斯科科斯科	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
3 Excess distributions carryover	, if any, to 2013:		化建分类似的归		
a From 2008	35,500.				
b From 2009	37,500.				
c From 2010	50,000.				
d From 2011	63,200.				
e From 2012 .	33,840.				
f Total of lines 3a throug		220,040.	at the control of		encirculation
4 Qualifying distributions					
XII, line 4: ► \$	19,000.				
a Applied to 2012, but no	t more than line 2a			0.	是"特别的"。
b Applied to undistributed (Election required — se	I income of prior years e instructions)		0.		
c Treated as distributions	out of corpus				
(Election required – se	·	0.			
 d Applied to 2013 distribution e Remaining amount distribution 		10.000			0.
5 Excess distributions carryover	·	19,000.	15-16-75-1-5-76-1-0-36-1-0-36-1-0-36-1-0-36-1-0-36-1-0-36-1-0-36-1-0-36-1-0-36-1-0-36-1-0-36-1-0-36-1-0-36-1-0		RELIEFATION STATES
(If an amount appears	ın column (d), the	0. Miridadionalisti, 29	MERGARATA SANTANIAN S	7 77 W (4) 2 1 Equil 1972 (3) 2 19 No. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	U. #%- ```:!< '***
same amount must be	shown in column (a))		计算算机的数据		第一个人的工作。
6 Enter the net total of ea indicated below:	ich column as				
a Corpus. Add lines 3f, 4c, and	4e Subtract line 5	239,040.			
		2 (C. C. C	2 * * * * * * * * * * * * * * * * * * *	# 58 AS - SE	
b Prior years' undistribute line 4b from line 2b	d income Subtract		0.		is the state of
c Enter the amount of pri	or years' undistribut-				33
ed income for which a r has been issued, or on	notice of deficiency				
4942(a) tax has been p	reviously assessed .		0.		
d Subtract line 6c from lir	ne 6h. Taxable	POWER LANGUE			
amount - see instruction			0.		
e Undistributed income for 2012	. Subtract line 4a from	被名为"公司"	THE SELL SHEET		Jan 1980 300 200 4
line 2a. Taxable amount — se				0.	
f Undistributed income fo	or 2012 Subtract lines			《海道图》 [13]	
4d and 5 from line 1. The					
distributed in 2014	•		的模型的主义的	The State of the State of	0.
7 Amounts treated as discorpus to satisfy require				PART TEACH	·····································
by section 170(b)(1)(F)	or 4942(g)(3)				
(see instructions)		0.		的是有情况的 物的	TO WAR IN THE SECTION
8 Excess distributions car applied on line 5 or line	rryover from 2008 not e 7 (see instructions)	35,500.			
9 Excess distributions ca Subtract lines 7 and 8 f		203,540.			
10 Analysis of line 9			April 1		3 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
a Excess from 2009.	37,500.	医神经 经现代的	多學問的報告發行		罗 (基) " T T S (金)
b Excess from 2010.	50,000.	100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
c Excess from 2011.	63,200.		Filler Aller	門門家部門門	
d Excess from 2012	33,840.			ا خاري و ترکي پوران الحي د د يا	
e Excess from 2013	19,000.	A TOP OF STREET		The state of the s	The state of the s
BAA					Form 990-PF (2013)

A special private Operating Foundations (see instructions and Part VII-A, question 9) N/A	orm 990-PF (2013) BEN JACKSON FOUND				58-254617	
a Considerative the foundation is a private operating foundation described in section 4942(j)(3) or	1 a If the foundation has received a ruling or deter	rmination letter tha		<u>'</u>		N/A
2a Einter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year fished B 55 of line 2a Coulsifying distributions from Part X II. d Annual sociated in line 2 or not send directly for active conduct of sempla activities. Subtract line 2d from line 2c Countifying distributions made directly for active conduct of sempla activities. Subtract line 2d from line 2c Complete 3b, b or c for the alternative test ended upon: a Asset's alternative test ended upon: a Asset's alternative test ended upon: a Asset subtractive activities. Subtract line 2d from line 2c 2 Value of all assets (2) Yalue of assets qualifying under section 4942(0)(3)(6)(6) b Endowment standards test ender (2) of minimum investment (a) and activities acti	•	•	erating foundation	described in section	n	4942(1)(5)
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	d Any restrictions or limitations on awards, s	uch as by geogra	phical areas, charit	able fields, kinds of	institutions, or other	factors

Page 11

3 Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount			
Name and address (home or business)	substantial contributor	recipient	00//// 24//01/				
Name and address (home or business) a Paid during the year	substantial contributor	recipient					
Total		l	► 3a				
b Approved for future payment Total			- 3a				

Part XVIPA Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated. Unrelated business income Exclude		Exclude	d by section 512, 513, or 514	4.5			
1		am service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (See instructions)
а							
b	,			_			
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f			<u> </u>		ļ		
_		and contracts from government agencies			-		
2		pership dues and assessments			ļ		
3		t on savings and temporary cash investments	ļ		ļ. —		3,350.
4		ends and interest from securities	s (8.46/2007 1.10))	Mil. Com. avy to vermente	2.5000000000000000000000000000000000000	errole in errol townsprint our	4,502.
5		ental income or (loss) from real estate.	1288 X 2-1560	Contract and the second	13 C C	FREE COLUMN	
		financed property			 		
_		ebt-financed property					
6 7		ital income or (loss) from personal property investment income			 		
8		(loss) from sales of assets other than inventory	ļ				
9		ncome or (loss) from special events.		_	 		
		s profit or (loss) from sales of inventory					
10 11		revenue.	446718 3 27273	Contract Con	No resident	BOOKER BOOK	BARDER, BART TO BE WELL OF
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		etal. Add columns (b), (d), and (e)					7,852.
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12 13			Service Services	<u> </u>	1800,000 300		7,852
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13 (See Par Lin	Total. works t XVI; e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculate Relationship of Activities to the	ons.) e Accompl	ishment of Exemp	t Purp	oses	7,852.
13 (See Par Lin	Total. works t XVI; e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculate Relationship of Activities to the	ons.) e Accompl	ishment of Exemp	t Purp	oses	7,852.
13 (See Par Lin	Total. works t XVI; e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculate Relationship of Activities to the	ons.) e Accompl	ishment of Exemp	t Purp	oses	7,852.
13 (See Par Lin	Total. works t XVI; e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculate Relationship of Activities to the	ons.) e Accompl	ishment of Exemp	t Purp	oses	7,852.
13 (See Par Lin	Total. works t XVI; e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculate Relationship of Activities to the	ons.) e Accompl	ishment of Exemp	t Purp	oses	7,852.
13 (See Par Lin	Total. works t XVI; e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculate Relationship of Activities to the	ons.) e Accompl	ishment of Exemp	t Purp	oses	7,852.
13 (See Par Lin	Total. works t XVI; e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculate Relationship of Activities to the	ons.) e Accompl	ishment of Exemp	t Purp	oses	7,852.
13 (See Par Lin	Total. works t XVI; e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculate Relationship of Activities to the	ons.) e Accompl	ishment of Exemp	t Purp	oses	7,852.
13 (See Par Lin	Total. works t XVI; e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculate Relationship of Activities to the	ons.) e Accompl	ishment of Exemp	t Purp	oses	7,852.
13 (See Par Lin	Total. works t XVI; e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculate Relationship of Activities to the	ons.) e Accompl	ishment of Exemp	t Purp	oses	7,852.
13 (See Par Lin	Total. works t XVI; e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculate Relationship of Activities to the	ons.) e Accompl	ishment of Exemp	t Purp	oses	7,852.

Form 990-PF (2013) BEN JACKSON FOUNDATION 58-2546170 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

										
describe	organization directly d in section 501(c) c to political organizat	of the Code (of	ngage in any of t ther than section	the following wi 501(c)(3) organ	th any other nizations) or	organizatio in section 5	n 527,	į. I	Ye	es No
a Transfer	s from the reporting	foundation to	a noncharitable	exempt organız	ation of:			Ľ		
(1) Cash	n								1 a (1)	Х
(2) Othe	er assets							.	1 a (2)	X
\- /	ansactions'							7	MAN SA SA	2 22 2 44
-	s of assets to a non-	charitable eve	mot organization	•					1 b (1)	L .
, ,			. •					-		- X
` '	chases of assets fron		. •		•				1 b (2)	X
(3) Ren	tal of facilities, equip	ment, or othe	r assets .	• • • •			•		1 b (3)	X
(4) Rein	nbursement arranger	ments						L	1 b (4)	X
(5) Loar	ns or Ioan guarantee	s	•						1 b (5)	Х
(6) Perf	ormance of services	or membersh	ip or fundraising	solicitations					1 b (6)	X
c Sharing	of facilities, equipme	ent, mailing lis	sts, other assets.	or paid employ	ees			⊢	1 c	X
5		,	,	pap,				_		
d If the an the good any tran	swer to any of the a s, other assets, or ser saction or sharing ar	bove is 'Yes,' vices given by t rrangement, sl	complete the foll the reporting found how in column (d	lowing schedule dation. If the four I) the value of the	. Column (b idation receive ne goods, ot) should alw ved less than her assets,	rays show the I fair market va or services re	fair ma ilue in ceived	arket value	of
(a) Line no	(b) Amount involved	(c) Name o	of noncharitable exem	pt organization	(d) Des	cription of tran	sfers, transaction	s, and sh	aring arrangen	nents
N/A	\(\frac{1}{2}\)	(3)		<u>,</u>	\ <u>```</u>		· · · · ·			
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					<u> </u>					
										
- +		 								
		<u> </u>]					
describe	undation directly or ind ed in section 501(c) o complete the followi	of the Code (of	d with, or related to ther than section	o, one or more ta 501(c)(3)) or in	x-exempt or section 527	ganizations 77 .			Yes [X No
	Name of organization	 ,	(b) Type	of organization		(c)) Description	of relati	onship	
N/A			(<u> </u>					<u></u>	
11/11						<u> </u>				
			<u> </u>							
										
Under p	enalties of perjury, I declar and complete Declaration	e that I have exam	ined this return, includ	ing accompanying so	hedules and sta	tements, and to	the best of my kn	owledge a	and belief, it is t	rue,
i i	And complete Declaration	or preparer (other	than taxpayer) is base	u on an imonnation t	n which prepare	i ilas ally kilowi	euge			
Sign 📈	~ 060	. (1	•			_			May the IRS of this return wit	th the
Here 🔱	ance A	acriso	7			5-12	- 14		preparer show (see instruction	vn below ons)2_
Signa	ture of officer or trustee	!		Date	Tille		•		X Yes	No
	Print/Type preparer's nan	ne	Preparet's	gnatu e	Da	ite	Check	ıt P	TIN	
Paid	EDWIN A. SIM	MONS	F. CALL	A. SIMMON	ξ	5-9-14	self-employe	ᇻᆝᅚ	20012044	15
			IILLS & SM	MON8 PC	- 1.	· · · · · · · · · · · · · · · · · · ·			21225	
Preparer	1			WOMO EC			THURSEN . 2	0-202	11443	
Use Only	· -		1098 V	1			_		000	
	<u> T</u>	HOMASVILL	E, GA 3179	9			Phone no (226-251	
BAA								1	Form 990-PF	(2013)

Schedule B (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

2013

OMB No 1545-0047

► Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990. Employer identification number Name of the organization 58-2546170 BEN JACKSON FOUNDATION Organization type (check one). Section: Filers of: 501(c)() (enter number) organization Form 990 or 990-EZ 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 To ran 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) 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 its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990EZ. or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of org	anization ACKSON FOUNDATION	nployer identification number 8-2546170	
	Contributors (see instructions) Use duplicate copies of Part I if additional space		
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PHYLLIS JONES P.O. BOX 1955	\$10,0	Person X Payroll 00. Noncash
	THOMASVILLE, GA 31799	-	(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	HAROLD JACKSON P.O. BOX 8230 THOMASVILLE, GA 31758	\$ <u>10,0</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - - -	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- -\$	Person Payroll Onnocash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
BAA	TEEA0702L 12/27/13	Schedule B (For	m 990, 990-EZ, or 990-PF) (2013)

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2013)

Page

1 of

1 of Part 1

Page

1 to

1 of Part II

Name of organization Employer identification number BEN JACKSON FOUNDATION 58-2546170

Partill	Noncash Property (see instructions) Use duplicate copies of Part II if additional sp	pace is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A		
		Is	
(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
		\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
BAA	School	lule B (Form 990, 990-EZ, o	or 990-PE) (2013)

Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8) or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) Use duplicate copies of Part III if additional space is needed (b) Purpose of gift (a) No. from Part I (c) Use of gift Description of how gift is held N/A (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (b) Purpose of gift (c) Use of gift (a) No. from Part I (d)
Description of how gift is held (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (b) Purpose of gift (a) No. from (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (d) Description of how gift is held (a) No. from Part I (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Transfer of gift
Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

2013 FEDERAL STATEMENTS PA				
GLIENT 1987	BEN JACKSON FOUNDATION	58-2546170		
5/08/14		03·33PM		
STATEMENT 1 FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GR	ANTS			
CASH GRANTS AND ALLOCATIONS				
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	MERCER UNIVERSITY			
RELATIONSHIP OF DONEE:	MACON, GA			
ORGANIZATIONAL STATUS OF DO AMOUNT GIVEN:		\$ 1,000.		
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	FUNDS TO SUPPORT ORG. GEORGIA SOUTH WESTERN UNIV.			
	AMERICUS, GA			
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DO AMOUNT GIVEN:	NEE: 501 (C) (3)	2,000.		
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	FUNDS TO SUPPORT ORG VALDOSTA STATE UNIVERSITY			
	VALDOSTA, GA			
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DO AMOUNT GIVEN:	NEE: 501 (C) (3)	4,000.		
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	FUNDS TO SUPPORT ORG UNIVERSITY OF GEORGIA			
	ATHENS, GA			
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DO AMOUNT GIVEN:	NEE: 501(C)(3)	4,000.		
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	FUNDS TO SUPPORT ORG GEORGIA SOUTHERN UNIVERSITY			
RELATIONSHIP OF DONEE:	, 501 (0) (0)			
ORGANIZATIONAL STATUS OF DO AMOUNT GIVEN:	NEE: 501(C)(3)	1,000.		
CLASS OF ACTIVITY: DONEE'S NAME:	FUNDS TO SUPPORT ORG GA STATE UNIVERSITY			
DONEE'S ADDRESS:	ATLANTA, GA			
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DO AMOUNT GIVEN:	NEE: 501 (C) (3)	1,000.		
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	FUNDS TO SUPPORT ORG FELLOWSHIP OF CHRISTIAN ATHLETES			
	THOMASVILLE, GA 31792			
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DO AMOUNT GIVEN:	NEE: 501 (C) (3)	1,000.		

2013

FEDERAL STATEMENTS

PAGE 2

CLIENT 1987

BEN JACKSON FOUNDATION

58-2546170

1,000.

5/08/14

03 33PM

STATEMENT 1 (CONTINUED) FORM 990-PF, PART I, LINE 25 **CONTRIBUTIONS, GIFTS, AND GRANTS**

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

FUNDS TO SUPPORT ORG

SOUTHWEST GEORGIA TECHNICAL COLLEGE

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

501 (C) (3)

FUNDS TO SUPPORT ORG

DONEE'S NAME: BERRY COLLEGE DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

MT BERRY , GA 30149

501 (C) (3)

1,000.

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CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

CLASS OF ACTIVITY:

FUNDS TO SUPPORT ORG

COVENANT COLLEGE

OXFORD , MS 38677

LOOKOUT MOUNTAIN, GA 30750

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

501 (C) (3)

1,000.

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

FUNDS TO SUPPORT ORG

UNIVERSITY OF MISSISSIPPI

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:

501 (C) (3)

1,000.

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

FUNDS TO SUPPORT ORG CROWN BIBLE COLLEGE

RELATIONSHIP OF DONEE:

POWELL, TN 37849

ORGANIZATIONAL STATUS OF DONEE: 501(C)(3)

AMOUNT GIVEN:

DONEE IS SUPPORTED ORG

1,000.

TOTAL \$ 19,000.