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Form 990-PF



Department of the Treasury  
Internal Revenue Service

Return of Private Foundation

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

Do not enter Social Security numbers on this form as it may be made public. By law, the IRS cannot redact the information on the form.

Information about Form 990-PF and its instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).





OMB No 1545-0052

2013

Open to Public Inspection

For calendar year 2013, or tax year beginning 07-01-2013 , and ending 06-30-2014

Name of foundation Braswell Fund		<b>A Employer identification number</b>  58-6033308	
Number and street (or P O box number if mail is not delivered to street address) PO Box 857		<b>B Telephone number</b> (see instructions)  (706) 343-6500	
City or town, state or province, country, and ZIP or foreign postal code Madison, GA 30650		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>	
<b>G</b> Check all that apply <div><input type="checkbox"/> Initial return</div> <div><input type="checkbox"/> Initial return of a former public charity</div> <div><input type="checkbox"/> Final return</div> <div><input type="checkbox"/> Amended return</div> <div><input type="checkbox"/> Address change</div> <div><input type="checkbox"/> Name change</div>		<b>D 1.</b> Foreign organizations, check here <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
<b>H</b> Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) <input type="checkbox"/> \$ 366,834		<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
<b>J</b> Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	1,950			
	2 Check <input type="checkbox"/> <input checked="" type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B				
	3 Interest on savings and temporary cash investments	6	6	6	
	4 Dividends and interest from securities. . . . .	7,809	7,809	7,809	
	5a Gross rents . . . . .				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	23,330			
	b Gross sales price for all assets on line 6a 46,233				
	7 Capital gain net income (from Part IV, line 2) . . .		23,330		
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold . . . . .				
	c Gross profit or (loss) (attach schedule) . . . . .				
	11 Other income (attach schedule) . . . . .				
	12 <b>Total.</b> Add lines 1 through 11 . . . . .	33,095	31,145	7,815	
	13 Compensation of officers, directors, trustees, etc	3,700	1,500		2,000
	14 Other employee salaries and wages . . . . .	500			300
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule) . . . . .				
	b Accounting fees (attach schedule) . . . . .	 3,100			
	c Other professional fees (attach schedule) . . . . .	 3,764	3,764		
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions)	 177			
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .				
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule) . . . . .	 480			465
	24 <b>Total operating and administrative expenses.</b> Add lines 13 through 23 . . . . .	11,721	5,264		2,765
	25 Contributions, gifts, grants paid . . . . .	10,000			10,000
	26 <b>Total expenses and disbursements.</b> Add lines 24 and 25	21,721	5,264		12,765
	27 Subtract line 26 from line 12				
	a <b>Excess of revenue over expenses and disbursements</b>	11,374			
	b <b>Net investment income</b> (if negative, enter -0-)		25,881		
	c <b>Adjusted net income</b> (if negative, enter -0-)			7,815	

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing . . . . .	12,478	8,386	8,386
	2	Savings and temporary cash investments . . . . .	8,093	1,735	1,735
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable . . . . .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use . . . . .			
	9	Prepaid expenses and deferred charges . . . . .			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) . . . . .	52,302	60,394	60,394
	c	Investments—corporate bonds (attach schedule). . . . .			
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans . . . . .			
	13	Investments—other (attach schedule) . . . . .	236,722	271,319	271,319
	14	Land, buildings, and equipment basis ▶ _____ 25,000 Less accumulated depreciation (attach schedule) ▶ _____	25,000	25,000	25,000
15	Other assets (describe ▶ _____)				
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	334,595	366,834	366,834	
Liabilities	17	Accounts payable and accrued expenses . . . . .			
	18	Grants payable . . . . .			
	19	Deferred revenue . . . . .			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule) . . . . .			
	22	Other liabilities (describe ▶ _____)	399		
	23	Total liabilities (add lines 17 through 22) . . . . .	399	0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted . . . . .			
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds . . . . .			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds	334,196	366,834	
	30	Total net assets or fund balances (see page 17 of the instructions) . . . . .	334,196	366,834	
	31	Total liabilities and net assets/fund balances (see page 17 of the instructions) . . . . .	334,595	366,834	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year’s return) . . . . .	1	334,196
2	Enter amount from Part I, line 27a . . . . .	2	11,374
3	Other increases not included in line 2 (itemize) ▶ _____	3	21,264
4	Add lines 1, 2, and 3 . . . . .	4	366,834
5	Decreases not included in line 2 (itemize) ▶ _____	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .	6	366,834

Part IV

Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1 a Capital Gain Dividends				
b				
c				
d				
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			7,209
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	23,330
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)  If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 . . . . .		3	

Part V

Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2012	18,670	320,432	0 05827
2011	12,185	311,726	0 03909
2010	14,182	297,457	0 04768
2009	12,577	291,710	0 04312
2008	17,756	276,883	0 06413

2 Total of line 1, column (d). . . . .	2	0 25227
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years . . . .	3	0 05046
4 Enter the net value of noncharitable-use assets for 2013 from Part X, line 5. . . . .	4	347,117
5 Multiply line 4 by line 3. . . . .	5	17,514
6 Enter 1% of net investment income (1% of Part I, line 27b). . . . .	6	259
7 Add lines 5 and 6. . . . .	7	17,773
8 Enter qualifying distributions from Part XII, line 4. . . . .	8	12,765

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

<b>Part VI    Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)</b>		
<b>1a</b> Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1		
Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
<b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	518
<b>c</b> All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
<b>2</b> Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	
<b>3</b> Add lines 1 and 2. . . . .	<b>3</b>	518
<b>4</b> Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	
<b>5</b> <b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	518
<b>6</b> Credits/Payments		
<b>a</b> 2013 estimated tax payments and 2012 overpayment credited to 2013	<b>6a</b>	
<b>b</b> Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b> Tax paid with application for extension of time to file (Form 8868)	<b>6c</b>	
<b>d</b> Backup withholding erroneously withheld . . . . .	<b>6d</b>	
<b>7</b> Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	
<b>8</b> Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	<b>8</b>	1
<b>9</b> <b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . . <input type="checkbox"/>	<b>9</b>	519
<b>10</b> <b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . <input type="checkbox"/>	<b>10</b>	
<b>11</b> Enter the amount of line 10 to be <b>Credited to 2014 estimated tax</b> <input type="checkbox"/> <b>Refunded</b> <input type="checkbox"/>	<b>11</b>	

<b>Part VII-A    Statements Regarding Activities</b>			
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .	<b>1a</b>	<b>Yes</b>	<b>No</b>
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)? . . . . . <i>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.</i>	<b>1b</b>		<b>No</b>
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year?. . . . .	<b>1c</b>		<b>No</b>
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: <b>(1)</b> On the foundation <input type="checkbox"/> \$ _____ <b>(2)</b> On foundation managers <input type="checkbox"/> \$ _____			
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____			
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities.</i>	<b>2</b>		<b>No</b>
<b>3</b> 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? <i>If "Yes," attach a conformed copy of the changes</i> . . . . .	<b>3</b>		<b>No</b>
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year?. . . . .	<b>4a</b>		<b>No</b>
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?. . . . .	<b>4b</b>		<b>No</b>
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T.</i>	<b>5</b>		<b>No</b>
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	<b>6</b>		<b>No</b>
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	<b>7</b>	<b>Yes</b>	
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions): <input type="checkbox"/> GA _____			
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation.</i>	<b>8b</b>	<b>Yes</b>	
<b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i> . . . . .	<b>9</b>		<b>No</b>
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>	<b>10</b>		<b>No</b>

Part 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		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
Website address ▶N/A				
14	The books are in care of ▶Charles Merritt Telephone no ▶(706) 343-6500 Located at ▶PO Box 857 Madison GA ZIP +4 ▶30650			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . ▶	15		
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
See instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes", enter the name of the foreign country ▶				

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?. . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?. . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days ). . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?. . . Organizations relying on a current notice regarding disaster assistance check here. . . . . ▶ <input type="checkbox"/>	1b		No
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2013?. . . . .	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2013?. . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions ). . . . .	2b		No
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____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?. . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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? ( <i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2013.</i> ). . . . .	3b		No
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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 2013?	4b		No

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			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 509(a)(1 ), (2), or (3), or section 4940(d)(2)? (see instructions).	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?	5b		No
	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 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 a personal benefit contract?			
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6b		No
	If "Yes" to 6b, file Form 8870.			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?			
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	7b		No

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).				
(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
Charles Merritt	Custodian	3,700		
259 North Second Street	3 00			
Madison,GA 30650				
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). 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 deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000.				

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".		
(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. . . . .		

Part IX-A

Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 The Fund provided scholarship funds to cover college tuition and other necessary expenses for scholarship winners. For the 2013 tax year, the Fund awarded 10 scholarships for \$1,000 each	10,000
2	
3	
4	

Part IX-B

Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See page 24 of the instructions	
3	
Total. Add lines 1 through 3. . . . .	



Part X

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities. . . . .	1a	322,357
b	Average of monthly cash balances. . . . .	1b	5,046
c	Fair market value of all other assets (see instructions). . . . .	1c	25,000
d	Total (add lines 1a, b, and c). . . . .	1d	352,403
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	1e	0
2	Acquisition indebtedness applicable to line 1 assets. . . . .	2	
3	Subtract line 2 from line 1d. . . . .	3	352,403
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	4	5,286
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	347,117
6	Minimum investment return. Enter 5% of line 5. . . . .	6	17,356

Part XI

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.)

1	Minimum investment return from Part X, line 6. . . . .	1	17,356
2a	Tax on investment income for 2013 from Part VI, line 5. . . . .	2a	518
b	Income tax for 2013 (This does not include the tax from Part VI ). . . . .	2b	
c	Add lines 2a and 2b. . . . .	2c	518
3	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	3	16,838
4	Recoveries of amounts treated as qualifying distributions. . . . .	4	
5	Add lines 3 and 4. . . . .	5	16,838
6	Deduction from distributable amount (see instructions). . . . .	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	7	16,838

Part XII

Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	1a	12,765
b	Program-related investments—total from Part IX-B. . . . .	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	2	
3	Amounts set aside for specific charitable projects that satisfy the		
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	12,765
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 (see instructions). . . . .	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4. . . . .	6	12,765
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			

Part XIII

Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI, line 7				16,838
2 Undistributed income, if any, as of the end of 2013				
a Enter amount for 2012 only. . . . .				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2013				
a From 2008. . . . .				
b From 2009. . . . .				
c From 2010. . . . .				
d From 2011. . . . .				
e From 2012. . . . .				
f Total of lines 3a through e. . . . .				
4 Qualifying distributions for 2013 from Part XII, line 4 ▶ \$ 12,765				
a Applied to 2012, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions). . . . .				
c Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
d Applied to 2013 distributable amount. . . . .				12,765
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b. . . . .				
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. . . . .				
d Subtract line 6c from line 6b Taxable amount—see instructions . . . . .				
e Undistributed income for 2012 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .				
f Undistributed income for 2013 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2014 . . . . .				4,073
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions). . . . .				
8 Excess distributions carryover from 2008 not applied on line 5 or line 7 (see instructions). . .				
9 Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a . . . . .				
10 Analysis of line 9				
a Excess from 2009. . . .				
b Excess from 2010. . . .				
c Excess from 2011. . . .				
d Excess from 2012. . . .				
e Excess from 2013. . . .				

Part XIV

Private Operating Foundations (see instructions and Part VII-A, question 9)

1a

If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2013, enter the date of the ruling.

b

Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

☐ 4942(j)(3) or ☐ 4942(j)(5)

2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed.	Tax year	Prior 3 years			(e) Total
		(a) 2013	(b) 2012	(c) 2011	(d) 2010	
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.					
3	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 listed.					
c	"Support" alternative test—enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties).					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(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 organization had \$5,000 or more in assets at any time during the year—see instructions.)

1

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) )

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

2

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 or e-mail address of the person to whom applications should be addressed

Charles Merritt  
259 N Second Ave Probate Ct  
Madison, GA 30650  
(706) 343-6500

b

The form in which applications should be submitted and information and materials they should include

See Exhibit "A" pages 1-9

c

Any submission deadlines

March 15

d

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

See Exhibit "A" page 1

Part XV

Supplementary Information (continued)

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 recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year See Additional Data Table				
Total . . . . .			3a	10,000
b Approved for future payment				
Total . . . . .			3b	

Enter gross amounts unless otherwise indicated

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Form **990-PF** (2013)



Form 990PF Part XV Line 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 recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Ronald Chris Clyde University of Georgia Athens,GA 30602	None	Paid	Education	1,000
William Beverly Cochran Georgia Military College Milledgeville,GA 31061	None	Paid	Education	1,000
Michael Mandel Gray LaGrange College LaGrange,GA 30240	None	Paid	Education	1,000
Jacob Thomas Jarrad North Georgia Technical College Clarkesville,GA 30523	None	Paid	Education	1,000
Zachary James Jenkins Point University West Point,GA 31833	None	Paid	Education	1,000
Timothy John LeClair Brown University Providence,RI 02912	None	Paid	Education	1,000
Tiara Renae Mohone Valdosta State University Valdosta,GA 31698	None	Paid	Education	1,000
Katherine Louise Reid Georgia Gwinnett College Lawrenceville,GA 30043	None	Paid	Education	1,000
Malaysia Sharnay Smith Gordon State College Barnesville,GA 30204	None	Paid	Education	1,000
Ladarrius Deontray Walker Georgia Military College Milledgeville,GA 31061	None	Paid	Education	1,000
<b>Total . . . . .</b>			<b>3a</b>	10,000

## TY 2013 Accounting Fees Schedule

**Name:** Braswell Fund

**EIN:** 58-6033308

**Software ID:** 13000170

**Software Version:** 2013v4.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Accounting and tax preperation	3,100	0	0	0



**TY 2013 Investments Corporate  
Stock Schedule****Name:** Braswell Fund**EIN:** 58-6033308**Software ID:** 13000170**Software Version:** 2013v4.0

Name of Stock	End of Year Book Value	End of Year Fair Market Value
AGL Res Inc	33,018	33,018
NRG Energy Inc	148	148
Southern Company	27,228	27,228

**TY 2013 Investments - Other Schedule****Name:** Braswell Fund**EIN:** 58-6033308**Software ID:** 13000170**Software Version:** 2013v4.0

<b>Category/ Item</b>	<b>Listed at Cost or FMV</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
Invesco Global Real Estate	FMV	26,309	26,309
Columbia Acorn Fund	FMV	43,332	43,332
Dodge and Cox Stock Fund	FMV	47,664	47,664
Grandeur Peak Global Opp	FMV	26,977	26,977
Franklin Convertible Sec Fund	FMV	10,662	10,662
Growth Fund of America - Class F1	FMV	19,292	19,292
Oakmark Global Fund	FMV	26,171	26,171
Oakmark International Fund	FMV	24,344	24,344
Loomis Sayles Bond Fund	FMV	46,568	46,568

TY 2013 Land, Etc. Schedule

**Name:** Braswell Fund

**EIN:** 58-6033308

**Software ID:** 13000170

**Software Version:** 2013v4.0

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
Land	25,000		25,000	25,000

**TY 2013 Other Expenses Schedule****Name:** Braswell Fund**EIN:** 58-6033308**Software ID:** 13000170**Software Version:** 2013v4.0

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Advertising	310			310
Insurance	135			135
Office expense	15			
Postage	20			20

TY 2013 Other Professional Fees Schedule

**Name:** Braswell Fund

**EIN:** 58-6033308

**Software ID:** 13000170

**Software Version:** 2013v4.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Investment management fees	3,764	3,764	0	0

TY 2013 Taxes Schedule

**Name:** Braswell Fund

**EIN:** 58-6033308

**Software ID:** 13000170

**Software Version:** 2013v4.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Excise tax	177			

## BRASWELL FUND SCHOLARSHIP APPLICATION

& Michael F. Bracewell  
Probate Judge  
Morgan County Courthouse  
Madison, Georgia 30650  
(706) 342-1373

Persons potentially eligible for Braswell Fund Scholarships: Any person who has resided in Morgan County, Georgia for at least one (1) year prior to making application for such funds and who at that time is deprived of the care of one or more parent due to death and who will be enrolled as a full-time student in a post-secondary educational institution for three consecutive quarters or two consecutive semesters within the 13 month period starting June 1 of this year. Said educational institution must be accredited by all relevant state and/or regional agencies and said institution must require all students to have a high school diploma or its equivalent.

APPLICATION FOR SCHOLARSHIP  
SCHOOL TERMS

200 - 200

To receive consideration for financial assistance, you must complete and return this form along with a school certified copy of all high school and college transcripts to the above address on or before March 15 of the year for which you desire a scholarship. Also include a one-page, typed or handwritten essay on why a post-secondary education is important to you.

NAME: \_\_\_\_\_  
          (Last)                 (First)                 (Middle)                 (Maiden)                 (Soc. Sec. No.)

PERMANENT ADDRESS: \_\_\_\_\_ Telephone: \_\_\_\_\_

(City) (County) (State) (Zip Code)

(Date of Birth)	(Place of Birth)	(Country of Citizenship, if not U.S., state Visa type)
11/11/1924	San Francisco, California	U.S.

MARITAL STATUS:      Single\_\_\_\_\_Engaged\_\_\_\_\_Married\_\_\_\_\_  
Widowed\_\_\_\_\_Divorced\_\_\_\_\_Separated\_\_\_\_\_

(Name of Husband or Wife)	(Date of Marriage)	(No. & Ages of Children)

(Occupation of Spouse) (Employer of Spouse)

PAID  
COPY

EXHIBIT A, PAGE 2

Has your Father died?

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, give date of death:

\_\_\_\_\_

Has your Mother died?

Yes \_\_\_\_\_ No \_\_\_\_\_ Unknown \_\_\_\_\_

If yes, give date of death:

\_\_\_\_\_

FATHER'S NAME: \_\_\_\_\_ MOTHER'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

OCCUPATION: \_\_\_\_\_ OCCUPATION: \_\_\_\_\_

IF BOTH PARENTS DECEASED, GIVE NAME, ADDRESS AND OCCUPATION OF GUARDIAN(S):

\_\_\_\_\_

\_\_\_\_\_

CHECK THE CATEGORY IN WHICH THE TOTAL INCOME OF YOUR PARENT(S) OR GUARDIAN FALLS:

Under \$12,000 ( ); \$12,000-\$15,000 ( ); \$15,000-\$20,000 ( );

\$20,000-\$25,000 ( ); \$25,000-\$30,000 ( ); \$30,000-\$35,000 ( );

\$40,000-\$50,000 ( ); \$50,000-\$60,000 ( ); Over \$60,000 ( );

NUMBER OF BROTHERS OLDER? \_\_\_\_\_ YOUNGER? \_\_\_\_\_

NOW IN COLLEGE? \_\_\_\_\_ NOW IN HIGH SCHOOL? \_\_\_\_\_

NUMBER OF SISTERS OLDER? \_\_\_\_\_ YOUNGER? \_\_\_\_\_

NOW IN COLLEGE? \_\_\_\_\_ NOW IN HIGH SCHOOL? \_\_\_\_\_



EXHIBIT A, PAGE 3

LIST TWO PERSONS (NOT RELATIVES) AS CHARACTER REFERENCES:

Name \_\_\_\_\_ No. of Years Known \_\_\_\_\_ Occupation \_\_\_\_\_

Address and Phone Number: \_\_\_\_\_

Name \_\_\_\_\_ No. of Years Known \_\_\_\_\_ Occupation \_\_\_\_\_

Address and Phone Number: \_\_\_\_\_

ARE YOU CURRENTLY ENROLLED AT A COLLEGE OR UNIVERSITY? \_\_\_\_\_

DID YOU ATTEND A COLLEGE OR UNIVERSITY PRIOR TO THIS QUARTER? \_\_\_\_\_

IF SO, WHAT WAS THE DATE OF YOUR INITIAL ENROLLMENT? \_\_\_\_\_

NAME AND ADDRESS OF COLLEGE OR UNIVERSITY: \_\_\_\_\_

WHAT COLLEGE OR UNIVERSITY DO YOU PLAN TO ATTEND? \_\_\_\_\_

HAS YOUR APPLICATION FOR ADMISSION BEEN APPROVED? \_\_\_\_\_

WHEN DO YOU EXPECT TO ENTER? \_\_\_\_\_

WHAT COLLEGE COURSE WILL YOU STUDY? \_\_\_\_\_

(Degree)

(Major)

FOR WHAT CAREER ARE YOU PREPARING? \_\_\_\_\_

DATE OF GRADUATION? \_\_\_\_\_

CHECK THE APPROPRIATE CLASSIFICATION AND SCHOOL EFFECTIVE THE FIRST TERM TO BE COVERED BY THE APPLICATION:

_____ Freshman _____	_____ Sophomore _____	_____ Junior _____	_____ Senior
_____ Agriculture		_____ Home Economics	
_____ Arts and Sciences		_____ Journalism	
_____ Business Administration		_____ Pharmacy	
_____ Education		_____ Social Work	
_____ Environmental Design		_____ Veterinary Medicine	
_____ Forestry Resources		_____ Other	

EXHIBIT A, PAGE 4

EDUCATION: (Begin with high school and include current school):

Name of Institution	Dates Attended		Degree	Date	Major	Academic Average
	From	To				

HONORS AND ACTIVITIES:

College Honors, Honorary Organizations and Professional Societies:

College & High School Activities (athletic, social and literary) and office held:

MILITARY SERVICE: NON-VET \_\_\_\_\_ VET \_\_\_\_\_ RESERVE \_\_\_\_\_ R.O.T.C. \_\_\_\_\_

PRESENT CLASSIFICATION \_\_\_\_\_

EMPLOYMENT EXPERIENCE: (full-time, significant part-time, summer work and military):

NAME OF EMPLOYER (Most Recent Position at Top)	LOCATION	TYPE OF WORK	DATES FROM	(MO./YR.) TO

EXHIBIT A, PAGE 5

Have you ever been granted a scholarship? \_\_\_\_\_

Have you received a previous National Defense Student Loan? \_\_\_\_\_

Have you borrowed from a State guaranteed loan program? \_\_\_\_\_

Do you have other outstanding debts or financial obligations, (including automobile)? \_\_\_\_\_

IF YOU HAVE ANSWERED "YES" TO ANY OF THE ABOVE QUESTIONS, EXPLAIN BELOW IN DETAIL:

<u>To whom indebted</u>	<u>For what purpose</u>	<u>Total Amount</u>	<u>Monthly Payment</u>	<u>Date Final Payment Due</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Will you operate a car at school? \_\_\_\_\_ Will you in the future ? \_\_\_\_\_

Why? \_\_\_\_\_ Owner? \_\_\_\_\_

Year? \_\_\_\_\_ Make? \_\_\_\_\_ Model? \_\_\_\_\_ When Purchased? \_\_\_\_\_

PROPOSED BUDGET

Please complete carefully for the school year for which you are applying, indicating quarters or semesters covered:

Quarters:      Fall 199\_\_ Winter 199\_\_ Spring 199\_\_ Summer 199\_\_

Semester:      1st \_\_\_\_\_ 2nd \_\_\_\_\_ Summer \_\_\_\_\_

INCOME:

PERSONAL SAVINGS.....\$ \_\_\_\_\_

## STUDENT EARNINGS

Summer/Vacation..... \_\_\_\_\_

Part-Time..... \_\_\_\_\_

## FAMILY AID

Parents..... \_\_\_\_\_

Other relatives..... \_\_\_\_\_

Spouse's income..... \_\_\_\_\_

## SCHOLARSHIP, OTHER AID:

Gift scholarships... \_\_\_\_\_

(specify)..... \_\_\_\_\_

Military allowance.. \_\_\_\_\_

G.I. Bill/War Orphans \_\_\_\_\_

Vocational Rehab. Aid.. \_\_\_\_\_

OTHER:      (specify)..... \_\_\_\_\_

TOTAL INCOME.....\$ \_\_\_\_\_

EXPENSES:

ALL FEES (including all tuition).....\$ \_\_\_\_\_

BOOKS AND SUPPLIES... \_\_\_\_\_

## RESIDENT STUDENTS ONLY:

Room.. . . . . \_\_\_\_\_

Board..... \_\_\_\_\_

## COMMUTING STUDENTS ONLY:

Lunches..... \_\_\_\_\_

Transportation .. \_\_\_\_\_

## MARRIED STUDENTS ONLY:

Rent..... \_\_\_\_\_

Food..... \_\_\_\_\_

Utilities..... \_\_\_\_\_

Child Care ..... \_\_\_\_\_

CLOTHING..... \_\_\_\_\_

AUTOMOBILE..... \_\_\_\_\_

## SPENDING ALLOWANCE:

Fraternity-Sorority... \_\_\_\_\_

Laundry, Recreation & recreational necessities \_\_\_\_\_

TOTAL EXPENSES.....\$ \_\_\_\_\_

Do you plan to work this summer? \_\_\_\_\_ Where/What? \_\_\_\_\_

Are you interested in working part-time while attending school?

What type of work are you qualified for and interested in? \_\_\_\_\_

What office skills do you possess?    Typing \_\_\_\_\_ wpm    Dictation \_\_\_\_\_ wpm

Office Machines \_\_\_\_\_  
(List)

Other Skills? \_\_\_\_\_  
(Specify)

Additional information you wish the Braswell Fund Scholarship Committee to know:

STUDENT'S AGREEMENT

- a) The information stated in this application is true and correct.
- b) If I am granted and accept a scholarship, I hereby certify that:
- (i) I am or will be a full-time college student as defined by the school College or University I (plan to) (am) attending;
  - (ii) I understand that a scholarship grant is made for no more than one school year, and that by awarding a scholarship the Braswell Fund in no way obligates itself for subsequent year grants;
  - (iii) I will use the proceeds of the scholarship award for the payment of tuition and required fees, board and room or similar living expenses and for instructional equipment, materials and books;
  - (iv) I hereby acknowledge that the information submitted on the Parent's (Guardian's) Statement is true and correct to the best of my knowledge and belief.
  - (v) I agree to notify the Braswell Fund of any substantial changes in my family or personal financial situation. I also agree to notify the Braswell Fund of any additional financial assistance which I may receive from other sources and understand such assistance may cause change in any subsequent scholarship awards.

(SEAL)

\_\_\_\_\_  
Signature of Applicant

Sworn to and subscribed  
before me this \_\_\_\_\_ day  
of \_\_\_\_\_, 199\_\_\_\_\_.

Notary Public \_\_\_\_\_ Co., GA  
My Commission expires: \_\_\_\_\_  
(Affix Notary Seal)

Parent's (Guardian's) Statement (if student is under 18):

This is to certify that I know about and approve of this application for a scholarship being made by my son/daughter/ward and that the information stated in the application is true and correct to the best of my knowledge and belief.

(SEAL)

\_\_\_\_\_  
Signature of Parent or Guardian

Sworn to and subscribed  
before me this \_\_\_\_\_ day  
of \_\_\_\_\_, 199\_\_\_\_\_.

Notary Public \_\_\_\_\_ Co., GA  
My Commission expires: \_\_\_\_\_  
(Affix Notary Seal)

ESSAY - Handwrite below or attach typed page if you prefer.

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.