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

OMB No. 1545-0052

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.

Ē	or c	alend	ar year 2014 or tax year beginning , a	and ending				
-		ne of fou				A Empk	oyer Identification number	
	mi		Thomas Samon Manadakian			20	0076000	
-			Ebenezer Acres Foundation street (or PO box number if mail is not delivered to street address)	T 80	om/suite		-8876292 hone number (see Instruction	
			Chattsworth Blvd	nu nu	OH#SULE	•	L-260-4835	15)
-			state or province, country, and ZIP or foreign postal code					
			eville TN 38501			C If exe	mption application is pending	j, check here 🛒 🕨 🔝
7				rn of a former public c	harity	D 1. Fo	reign organizations, check h	ere •
			Final return Amended	•		i	reign organizations meeting	
			Address change Name cha	inge			% test, check here and attac	
-	-	hock t	pe of organization: X Section 501(c)(3) exempt private			E Ifpriv	ate foundation status was te	rminated under
Ė				le private foundation			n 507(b)(1)(A), check here	_
L.			set value of all assets at J Accounting method:		nual	E If the	foundation is in a 60-month t	ermination
•			ear (from Part II, col. (c), Other (specify)	as Casii Acc	uai	6	section 507(b)(1)(B), check	_
		e 16) 🎚		he on cash basis \				,,
X.			Analysis of Revenue and Expenses (The total of	(a) Revenue and		L		(d) Disbursements
	LACALIT	CONTA SAME	amounts in columns (b), (c), and (d) may not necessarily equal	expenses per	(b) Net inv		(c) Adjusted net income	for charttable purposes
-			the amounts in column (a) (see instructions))	books				(cash basis only)
		1	Contributions, gifts, grants, etc., received (attach schedule)	21,775				
		2	Check ▶ ☐ if the foundation is not required to attach Sch. E			CONTRACTOR CONTRACTOR		
		3	Interest on savings and temporary cash investments					
		4	Dividends and interest from securities	1		<u>_</u>	1	
		5a	Gross rents		and the second and the second	ANNUAL PROPERTY	modračkog spremjer (mje skot prim)	
	e	b	Net rental income or (loss)				espinorienes espinorienes Regionales de la companya de la comp	
	e	l	Net gain or (loss) from sale of assets not on line 10			i in in annual in the		
	Revenue	_	Gross sales price for all assets on line 6a					
	œ	7	Capital gain net income (from Part IV, line 2)		- Chief and State of Control	U		
()			Net short-term capital gain	AND AND ADDRESS OF THE AND ADDRESS OF THE AND ADDRESS OF THE AND ADDRESS OF THE A			0	THE RESERVED OF THE PERSON OF
2015		9 10a	Income modifications	162 E. 128 C. 188 C. 18		an i se i a i a man a	garaikingsi, 4 dakasan sengara	
2		b	Gross sales less returns and allowances Less: Cost of goods sold					
65			Gross profit or (loss) (attach schedule)		TO SECURE OF CAMPACO AND A	THE PARTY AND ADDRESS OF THE PARTY.	3,077,741,440,010, 300,00,000,000,000,000,000	
		11	Other income (attach schedule)					
MAY.		12	Total. Add lines 1 through 11	21,776	***	1	1	
	es	13	Compensation of officers, directors, trustees, etc.	0				
NNED	xpense	14	Other employee salaries and wages					
Z	B	15	Pension plans, employee benefits					
		16a	Legal fees (attach schedule)					
SCA	Operating and Administrative E	b	Accounting fees (attach schedule)					
U ₂	at l	С	Other professional fees (attach schedule) Stmt 1	134	=7			
	Str.	17	Interest	ECRIVED,	, I			
	ij	18	Taxes (attach schedule) (see instructions)		<u>Б</u>			
	Ξ	19	Depreciation (attach schedule) and depletion Occupancy		P			ita yan da alaman a ta a ta a a a a a a a a a a a a a a
	A	20		10	ġ			
	פַ	21	Travel, conferences, and meetings					
	ā	22		GDEN. UI				
	g	23	Other expenses (att. sch.)					
	ati	24	Total operating and administrative expenses.	104		•	١ .	
	ĕ		Add lines 13 through 23	134		U Normania	0	
	ŏ	25	Contributions, gifts, grants paid See Statement 2	17,900				17,900
-		26	Total expenses and disbursements. Add lines 24 and 25	18,034	Linkon ili ili ili ili ili ili ili ili ili il	0	i China Valla di Santa Valla di Santa Valla di Santa Valla di Santa di Sant	17,900
		27	Subtract line 26 from line 12:	3,742				
		a	Excess of revenue over expenses and disbursements Net Investment Income (if negative, enter -0-)	3, 142		mr::::::::::::::::::::::::::::::::::::		
	i	p	Adjusted not income (if negative, enter -0-)	a tomboodi santani analan analan an		- 		

E	Part	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year		End o	f year	
	##.1.K.E	should be for the or-year amounts duty. (See instructions.)	(a) Book Value	(b) Book Value			Market Value
	1	Cash – non-interest-bearing		26,			26,775
	2	Savings and temporary cash investments	25,488	2,	455		2,455
	3	Accounts receivable					
		Less: allowance for doubtful accounts ▶			:0.1.471 VI		
١	4	Pledges receivable ▶			Dabe	ACHANIA	
		Less: allowance for doubtful accounts ▶					
ı	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons (attach schedule) (see					
	_	instructions)			a.ana	mujalm	
	′	Other notes and loans receivable (att. schedule)	iya, aciliz (nearz datar Astropolica) annoca		in extensi		
اير	8	Less: allowance for doubtful accounts ▶		L			
췽	9	Description and defended the second		<u> </u>			
Assets	10a	Investments – U.S. and state government obligations (attach schedule)			•		
	b	Investments – corporate stock (attach schedule)					
	C	Investments – corporate bonds (attach schedule)	<u> </u>				
١	11	Investments – land, buildings, and equipment basis					
١	••	I am any my dated decrease the Authority ask N					<u>, - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 </u>
	12	Investments mentages loops					
	13	Investments – mongage loans Investments – other (attach schedule)				-	
	14	Land, buildings, and equipment basis ▶	and the second				a. a-ma
		Less accumulated depreciation (attach sch.) ▶					
- 1	15	Other assets (describe >					
- 1	16	Total assets (to be completed by all filers – see the					
	<u> </u>	instructions. Also, see page 1, item I)	25,488	29,	230		29,230
П	17	Accounts payable and accrued expenses					
	18	Grants payable					
Liabilities	19	Deferred revenue					**************************************
틧	20	Loans from officers, directors, trustees, and other disqualified persons				*************	
ā	21	Mortgages and other notes payable (attach schedule)					
	22	Other liabilities (describe ▶)					ntilmanique, marches Constanties (Constanti Timeres (Constanti
\perp	23	Total liabilities (add lines 17 through 22).	0		0		
S		Foundations that follow SFAS 117, check here					
nces		and complete lines 24 through 26 and lines 30 and 31.	25.488		000	7 Administration (1986) 1 Administration (1986)	
롈	~~	Unrestricted	25,488	29,	230		
ä	25	Temporarily restricted					eranakan di bermari da Kanakan di bermari di berm Kanakan di bermari da
밀	26	Permanently restricted Foundations that do not follow SFAS 117, check here		<u> </u>			
리		and complete lines 27 through 31.		1			w/scarper/i
Net Assets or Fund Bala	27	Control stants twint animaliant or automata friends		1			
ş	28	Paid-in or capital surplus, or land, bldg., and equipment fund					
SS	29	Retained earnings, accumulated income, endowment, or other funds	-				
IA	30	Total net assets or fund balances (see instructions)	25,488	29.	230		
割	31	Total liabilities and net assets/fund balances (see		·			
		instructions)	25,488	29,	230		
	Part					autoriori materia	
_		I net assets or fund balances at beginning of year - Part II, column (a), line 30 (r	nust agree with			T	·····
		of-year figure reported on prior year's return)	-		1	<u></u>	25,488
	Ente	r amount from Part I, line 27a			2		3,742
3	Othe				3		
4	Add	lines 1, 2, and 3			4		29,230
5	Dec	reases not included in line 2 (itemize) ▶			5	<u></u>	 <u> </u>
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, column	n (b), line 30		6	L	29,230

	and Losses for Tax on investible the kind(s) of property sold (e.g., real estate, rehouse, or common stock, 200 shs. MLC Co.)		(b) How acquired P – Purchase D – Donation		ate acquired o., day, yr)	(d) Date sold (mo , day, yr.)
1a N/A						
b						
C						
d						
8						
(e) Gross sales price	(f) Deprectation allowed (or allowable)		st or other basis expense of sale			or (loss)) minus (g)
a		······································				
b						
<u>C</u>		 				
<u>d</u>						
Complete only for accets chowing	I ng gain in column (h) and owned by th	e foundation on 1	2/21/60			
Complete only for assets shown				\dashv		. (h) gain minus less than -0-) or
(i) F.M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		xcess of col. (i) r col. (j), if any	1		om col. (h))
8				+-		
a b		+	· · · · · · · · · · · · · · · · · · ·			
C		†	·			
<u>d</u>		<u> </u>				
-		1		-		•
	If gain, also enter	in Part I, line 7				· · · · · · · · · · · · · · · · · · ·
Capital gain net income or (net	capital loss) If (loss), enter -0-			2		
Net short-term capital gain or (k	oss) as defined in sections 1222(5) and	•				
, -	8, column (c) (see instructions). If (loss	`	l			
Part I, line 8				3		
Part V Qualification U	Inder Section 4940(e) for Re	duced Toy or	Mad Insertation	A I		
section 4940(d)(2) applies, leave	te foundations subject to the section 4	940(a) tax on net	investment income.)	t incom	<u>le</u>	Yes X N
section 4940(d)(2) applies, leave t as the foundation liable for the se "Yes," the foundation does not qu	te foundations subject to the section 4 this part blank.	940(a) tax on net ount of any year in mplete this part.	investment income.) the base period?	t incom	ie .	Yes X N
section 4940(d)(2) applies, leave t as the foundation liable for the se "Yes," the foundation does not qu	te foundations subject to the section 4sthis part blank. ection 4942 tax on the distributable ame alify under section 4940(e). Do not con each column for each year; see the in	ount of any year in melete this part.	investment income.) the base period?		Dis	(d) tribution ratio divided by col. (c))
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section 4940(d)(2) applies, leave to set the foundation liable for the set "Yes," the foundation does not quall Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginning in 2013 2012 2011 2010 2009 Total of line 1, column (d) Average distribution ratio for the number of years the foundation Enter the net value of noncharith Multiply line 4 by line 3 Enter 1% of net investment income Add lines 5 and 6	this part blank. Inction 4942 tax on the distributable ame alify under section 4940(e). Do not contain each column for each year; see the in (b) Adjusted qualifying distribution 25 Adjusted qualifying distribution 25 34 25 26 27 28 29 30 30 31 31 32 33 34 35 36 36 37 36 37 37 38 38 39 30 30 30 30 30 30 30 30 30	ount of any year in mplete this part. Instructions before the part of the part	making any entries. (c) value of noncharitable-use 66 96	assets , 866 , 869	2 3 4 5 6 7	1.04069 0.52034 25,11 13,07
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section 4940(d)(2) applies, leave to section 4940(d)(2) applies, leave to set the foundation tiable for the set "Yes," the foundation does not quall Enter the appropriate amount in Base period years Calendar year (or tax year beginning in 2013 2012 2011 2010 2009 2 Total of line 1, column (d) 2009 2 Total of line 1, column (d) 3 Average distribution ratio for the number of years the foundation in Enter the net value of noncharital Multiply line 4 by line 3 2 Enter 1% of net investment income Add lines 5 and 6 3 Enter qualifying distributions fro	this part blank. Inction 4942 tax on the distributable ame alify under section 4940(e). Do not contain each column for each year; see the in (b) Adjusted qualifying distribution 25 Adjusted qualifying distribution 25 34 25 26 27 28 29 30 30 31 31 32 33 34 35 36 36 37 36 37 37 38 38 39 30 30 30 30 30 30 30 30 30	ount of any year in mplete this part. Instructions before the part of the part	investment income.) In the base period? making any entries. (c) value of noncharitable-use 66 96	assets 6, 866 7, 869	2 3 4 5 6 7 8	1.04069 0.52034 25,11 13,07

DAA

Enter the states to which the foundation reports or with which it is registered (see instructions)

(or designate) of each state as required by General Instruction G? If "No," attach explanation

If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General

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 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"

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

 •	arceirait annais	19921	
 	9		x

Form 990-PF (2014)

None

complete Part XIV

	990-PF (2014) The Edenezer Acres Foundation		8/0292		Page (2
Pa	MWI-B Statements Regarding Activities for Which Forn	1 4720 May Be	Required (co	ontinued)		=
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(θ))?	📙 Y	es 🗶 No		ig H
	(2) Influence the outcome of any specific public election (see section 4955); or	to carry on,				SHORE
	directly or indirectly, any voter registration drive?		🗌 Y	es 🗓 No		j
	(3) Provide a grant to an individual for travel, study, or other similar purposes?			es 🗓 No		
	(4) Provide a grant to an organization other than a charitable, etc., organization		—			
	section 4945(d)(4)(A)? (see instructions)		□ Y	es X No		See
	(5) Provide for any purpose other than religious, charitable, scientific, literary, of	or educational			AND THE PERSON NAMED IN COLUMN	
				es X No		
ь	If any answer is "Yes" to 5a(1)—(5), did any of the transactions fail to qualify un	der the exceptions				9
•	Regulations section 53.4945 or in a current notice regarding disaster assistance			N/A	5b	-
			? ; ;;, .	···· *********************************	Maar saandarai	i
_	Organizations relying on a current notice regarding disaster assistance check to					2000
С	If the answer is "Yes" to question 5a(4), does the foundation claim exemption for		N/A 🗌 Y	🗆 🗆		
			K/A 🗀 T	es 💹 No		
_	If "Yes," attach the statement required by Regulations section 53.4945–5(d).					2000
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums	rm .			1
	on a personal benefit contract?		· · · · · · · ·	es 🔀 No		
Ь	Did the foundation, during the year, pay premiums, directly or indirectly, on a per-	ersonal benefit cor	ntract?		6b X	11
	If "Yes" to 6b, file Form 8870.			(==)		
	At any time during the tax year, was the foundation a party to a prohibited tax s			es X No		200
	If "Yes," did the foundation receive any proceeds or have any net income attrib	utable to the trans	action?	N/A	7b	_
P	int VIII Information About Officers, Directors, Trustees, F	oundation Ma	anagers, Higi	niy Paid Emp	loyees,	
	and Contractors					_
<u>1 l</u>	ist all officers, directors, trustees, foundation managers and their compe	insation (see ins	tructions).		Y	_
	(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	
Ke	vin Bowling	Director	1			_
		0.00	o	0		٥
•						
•						
	talan mengangkang menanggapantan mengan mengan mengangkan panggan pada ang mengangkan pada dalah dan dalah den					_
					<u> </u>	_
•						
2	Compensation of five highest-paid employees (other than those include "NONE."	d on line 1 – see	instructions). If	none, enter		-
		(b) Title, and average		(d) Contributions to		_
	(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	(e) Expense account other allowances	٠
NC	NE					
•••						
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Form 990-PF (2014)

Form 990-PF (2014) The Ebenezer Acres Foundation	20-8876292	Page 7
Information About Officers, Directors, Trustees, Foundand Contractors (continued)	ation Managers, Highly Pai	d Employees,
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
NONE		
Total number of others receiving over \$50,000 for professional services	<u></u>	
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's organizations and other beneficiaries served, conferences convened, research papers produced, etc	uch as the number of	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see instru	ctions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1.N/A		
2		
All other program-related investments. See instructions		
3		

Total. Add lines 1 through 3

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

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., Average monthly fair market value of securities 18 Average of monthly cash balances Fair market value of all other assets (see instructions) 1c 1d Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 2 Acquisition indebtedness applicable to line 1 assets ______ Subtract line 2 from line 1d 3 Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see instructions) 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 Minimum investment return. Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here \(\bigcap \) and do not complete this part.) 1,256 Minimum investment return from Part X, line 6 Tax on investment income for 2014 from Part VI, line 5 2a Income tax for 2014. (This does not include the tax from Part VI.) Add lines 2a and 2b C 2c Distributable amount before adjustments. Subtract line 2c from line 1 1,256 3 3 Recoveries of amounts treated as qualifying distributions 4 1,256 5 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII. 1,256 line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 17,900 1a Program-related investments – total from Part IX-B ь 1b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 3 Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required) 3а Cash distribution test (attach the required schedule) 17,900 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 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) 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

Form 990-PF (2014)

(<u>, </u>	HEARING DINGISTRIBUTED INCOME (See Instruction	5)			
1	Distributable amount for 2014 from Part XI,	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
	fine 7				1,256
2	Undistributed income, if any, as of the end of 2014:				
a	Enter amount for 2013 only				
þ	Total for prior years: 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2014:				
а	From 2009 34,164				
b	From 2010 54,000				
C	From 2011 26, 400				
d	From 2012 53, 128				
e	From 2013 26, 275	TRANSPORT OF STREET OF STREET OF STREET			
f	Total of lines 3a through e	193,967			
Δ	Qualifying distributions for 2014 from Part XII,	esa de assetias e e encretara a a ca		erre din ere anne	
•	line 4: ▶ \$ 17,900				
	Applied to 2013, but not more than line 2a				
	Applied to undistributed income of prior years	elaberati i de (di vedeskelabek i ser			
U					
_	(Election required – see instructions)				
C	Treated as distributions out of corpus (Election			77712C 4777 CHILLEY CHILLIAN C	
	required – see instructions)	nedigleljeneden, i klikeri (-låkeri	englis Ments as policy (* 1862). A di Congression and discount (* 1863).		1 056
	Applied to 2014 distributable amount				1,256
е	Remaining amount distributed out of corpus	16,644	arandaying and some	augumonometrio nic	
5	Excess distributions carryover applied to 2014			2000 200 1777	
	(If an amount appears in column (d), the same	tonen en aren e president de la composición del composición de la composición del composición de la co			
	amount must be shown in column (a).)			Long-transactor (100 processor Caraca)	
6	Enter the net total of each column as	#734			
	indicated below:				The same of the control of the same of the
8	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	210,611			ariana arian Ariana ariana arian
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	TOLER TOLER TO THE STREET OF T		CONTRACTOR	Biblio (albrecani albrecando) Biblio (albrecando)
	been issued, or on which the section 4942(a)	Riving Company of Commercial			1271.000 -0. ALBERT 1277.0007.00000.
	tax has been previously assessed	A THE STREET AND ADDRESS OF THE STREET, TH			andrework town in the same of
d	Subtract line 6c from line 6b. Taxable	ara occuparadores establicado establicada establicada establicada establicada establicada establicada establic Assentadores establicadas establicada			
_	amount - see instructions			**************************************	Constant of the Constant
A	Undistributed income for 2013. Subtract line	andriasay, Erry Greenstay, 19	Children and County to his his his		Allandor de Landre -
•	4a from line 2a. Taxable amount – see				
	instructions	Armonista receivaria de deserva			
	Undistributed income for 2014. Subtract lines	Transport of the contract of t			SALLAD, WITH STATES AND SALLAD SALESSESSES
•	4d and 5 from line 1. This amount must be				
					^
7	distributed in 2015				
•	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
_	required—see instructions)			ekiye (1910) (1919) pendaniya (191	
8	Excess distributions carryover from 2009 not				
	applied on line 5 or line 7 (see instructions)	34,164			
9	Excess distributions carryover to 2015.				
	Subtract lines 7 and 8 from line 6a	176,447			
0	Analysis of line 9:		KSANKINISHWAK		
a	Excess from 2010 54,000				
b	Excess from 2011 26, 400				
С	Excess from 2012 53, 128				
d	Excess from 2013 26, 275				
e	Excess from 2014 16, 644				

Form	990-PF (2014) The Ebeneze	r Acres Fou	ındation	20-88762	92	Page 10
PE	it XIV Private Operating Fo	oundations (see	instructions and	Part VII-A, questic	n 9)	
1a	If the foundation has received a ruling of					
	foundation, and the ruling is effective for	or 2014, enter the date	of the ruling	>		
b	Check box to indicate whether the foun				942(j)(3) or 494	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) 10ai
	investment return from Part X for					
	each year listed					
b	85% of line 2a					
C	Qualifying distributions from Part XII,					
	line 4 for each year listed	İ				
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					
8	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:					
а	"Assets" alternative test - enter:		İ			
	(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	1				
	Part X, line 6 for each year listed					
C	"Support" alternative test – enter:					
	(1) Total support other than gross					
	investment income (interest,		}			ļ
	dividends, rents, payments on					
	securities loans (section			1		
	512(a)(5)), or royalties)			 		
	and 5 or more exempt					
	organizations as provided in	1				
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization					
Sex	(4) Gross investment income	<u> </u>			<u></u>	<u> </u>
P	Int XV. Supplementary Info			y if the foundatio	n had \$5,000 or i	more in assets a
	any time during the		ictions.)			
1	Information Regarding Foundation	-				
8	List any managers of the foundation wh					
	before the close of any tax year (but or	nly if they have contribi	uted more than \$5,00	00). (See section 507(d)(2).)	
	N/A	4004		4		
D	List any managers of the foundation wh		•		irge portion of the	
	ownership of a partnership or other ent	ity) of which the found	ation has a 10% or g	reater interest.		
_	N/A	0	N-1			
2	Information Regarding Contribution		• • • • • • • • • • • • • • • • • • • •	_	d door not conset	
		•		itable organizations an		_
	unsolicited requests for funds. If the for		grants, etc. (see instr	ructions) to individuals	or organizations unde	į
	other conditions, complete items 2a, b,			on contractions about	t be eddropped:	
a	The name, address, and telephone number / 3	mber or e-mail address	s of the person to wh	om applications should	oe addressed:	
	N/A					
<u> </u>	The form in which applications should	he submitted and infor	mation and materials	they should include:		· · · · · · · · · · · · · · · · · · ·
•	N/A	be submitted and into	mation and materials	they should include.		
С	Any submission deadlines:					
	N/A		· · · <u>- · · · · · · · · · · · · · · · ·</u>			
d	Any restrictions or limitations on award	s, such as by geograp	hical areas, charitab	le fields, kinds of institu	itions, or other	
	factors:					
	N/A		· - , 	 		- 000 DE

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of Amount contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year Crisis Pregnancy Center Charitable Contribution 5,000 Heart of the Cumberland Charitable Contribution 2,500 Windy Gap 200 Young Life 5,200 FCA **Charitable** 5,000 17,900 ▶ 3a Total **b** Approved for future payment N/A Total **▶** 3b

酮	Part-XVI-A	Analysis of Income-Producing Ac	tivities				
		ounts unless otherwise indicated.	Unrelate	d business income	Exclude	by section 512, 513, or 514	(e)
			(a)	(b)	(c)	(d)	Related or exempt
_	0		Business code	Amount	Exclusion code	Amount	function income (See instructions.)
1	_	rvice revenue:		·····			
					1		
	d						
	θ						
	f			<u> </u>			
	g Fees an	d contracts from government agencies			<u> </u>		
2	Membership	dues and assessments					
3		savings and temporary cash investments					
4		nd interest from securities			autodi b. r		1
5		come or (loss) from real estate:					
	a Debt-fin	anced property	<u> </u>	<u> </u>			
_	b Not deb	t-financed property			ļ		
		come or (loss) from personal property	 	 	 		,
′	Other invest	ment income					
8		s) from sales of assets other than inventory			 		
	Gross profit	or (loss) from special events or (loss) from sales of inventory			 	· · · · · · · · · · · · · · · · · · ·	
11	Other reven	ue: a			 		
••					╁		
	c				 		
	d				1		
	Δ						
12	Subtotal. Ac	Id columns (b), (d), and (e)		0	2011	0	1
13	Total. Add i	ine 12, columns (b), (d), and (e)				13 _	1
(5)	e worksheet	in line 13 instructions to verify calculations.)					
	Part XVI-B	Relationship of Activities to the A	ccomplish	ment of Exempt	Purp	oses	
	Line No.	Explain below how each activity for which income					
	V	accomplishment of the foundation's exempt purp					
	4	Investment income and in					
_	8 1a	to recoup the various co					ng
_	ıa	the foundations monies, are spent in accordance	so tha	bo foundate	100	COPI	
_	-	are spent in accordance	WICH C	HE LOUNGAL	rons	yoar.	
—				· · · · · · · · · · · · · · · · · · ·			
_			· · · · · · · · · · · · · · · · · ·	····			
							
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					······································		······································
		1					

Page 13

Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described No in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(2 (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements 16(4 1b(5) (5) Loans or loan guarantees (6) Performance of services or membership or fundralsing solicitations c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements (a) Line no. (b) Amount involved N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes 🗓 Yes b If "Yes," complete the following schedule. (a) Name of organization (c) Description of relationship (b) Type of organization N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge May the IRS discuss this return with the preparer shown below Sign (see instructions)? Yes Here Grantor Signature of Preparer's signature Date Check X if self-employed Paid Jesse Waldman, CPA D5/06/15 Preparer P01209686 Jesse Waldman, PTIN Firm's name Use Onh 779 McMurry Blvd E Firm's address ▶ Firm's EIN ▶

37074-2041

Hartsville, TN

931-239-9245

Phone no.

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047

Employer Identification number

2014

The Ebeneze	er Acres Foundation	20-8876292
Organization type (chec	eck one):	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private found	dation
	527 political organization	
Form 990-PF	☒ 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	on
	501(c)(3) taxable private foundation	
	on is covered by the General Rule or a Special Rule . 1(c)(7), (8), or (10) organization can check boxes for both the General Rule and	a Special Rule. See
General Rule		
	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributi ey or property) from any one contributor. Complete Parts I and II. See instructional contributions.	
Special Rules		
regulations unde 13, 16a, or 16b, a	tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ /3 for sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or and that received from any one contributor, during the year, total contributions of 6 of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Co	or 990-EZ), Part II, line of the greater of (1)
contributor, durin	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that reng the year, total contributions of more than \$1,000 exclusively for religious, chational purposes, or for the prevention of cruelty to children or animals. Complet	aritable, scientific,
	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that re	
	ng the year, contributions exclusively for religious, charitable, etc., purposes, but taled more than \$1,000. If this box is checked, enter here the total contributions	
	for an exclusively religious, charitable, etc., purpose. Do not complete any of the	
	pplies to this organization because it received nonexclusively religious, charitab	
totaling \$5,000 o	or more during the year	▶ \$
990-EZ, or 990-PF), but	on that is not covered by the General Rule and/or the Special Rules does not file tit must answer "No" on Part IV, line 2, of its Form 990; or check the box on line e 2, to certify that it does not meet the filing requirements of Schedule B (Form 9	e H of its Form 990-EZ or on its

The Ebenezer Acres Foundation

Employer Identification number 20-8876292

Part I	Contributors (see instructions). Use duplicate copies of	Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
.1	Kevin Bowling 1340 Chattsworth Blvd Cookeville TN 38501	\$ 21,775	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

EBEN The Ebenezer Acres Foundation 20-8876292 FYE: 12/31/2014

Federal Statements

	Charitable Purpose	\$
essional Fees	Adjusted Net	\$ \$
P.P. Part I, Line 16c - Other Professional Fee	Net Investment	\$
orm 990	Total	\$ 134 \$ 134
Statement 1 - Fc	Description	Management Fees Total

	Date	710/10	8/19/14	1/26/14	6/23/14	7/29/14	2/20/14
utions, Gifts, Grants	Book Value Explanation						
990-PF, Part I, Line 25 - Noncash Contributions, Gifts, Grants	Book Value						
	FMV						
Statement 2 - Form	Noncash						
	Δ to:om to:		2 , 000	2,500	200	5,200	2,000