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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.
 ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No 1545-0052 pen to Public Inspection

GO BIG RED FOUNDATION d street (or P O box number if mail is not delivered to street CAROL LANE	address)		A Employer identification 37–6532744	number
d street (or P O box number if mail is not delivered to street B $CAROL$ $LANE$	address)		37-6532744	
d street (or P O box number if mail is not delivered to street B $CAROL$ $LANE$	address)			
CAROL LANE		Room/suite	B Telephone number	
	•		404-253-75	00
wn, state or province, country, and ZIP or foreign p ANTA,GA 30327	ostal code	<u> </u>	C If exemption application is po	
all that apply Initial return	Initial return of a for	mer public charity	D 1. Foreign organizations	check hare
Final return	Amended return	mer public chanty	1. To reign organizations	s, check liefe
Address change	Name change		Foreign organizations me check here and attach co.	eting the 85% test,
type of organization: X Section 501(c)(3) ex			E If private foundation stat	
	Other taxable private foundat	ion	under section 507(b)(1)	
ket value of all assets at end of year J Accounti	ng method X Cash	Accrual	F If the foundation is in a 6	60-month termination
			under section 507(b)(1)	
				(4) 5
(The total of amounts in columns (b), (c), and (d) may not necessanly equal the amounts in column (a))	expenses per books	(b) Net investment income	income	(d) Disbursements for chantable purposes (cash basis only)
Contributions, gifts, grants, etc , received	560,000.		N/A	
Check Interest on savings and temporary				7013 10113 253 2 2 3
				STATEMENT 1
	44,461.	44,461.		STATEMENT 2
` ' 	58 807	100	DECE WE	120
Gross sales price for all // / Q 22Q	30,007.			MA ICI
assets on time oa		58.807	(D) 1121 3 5 704	12 12 1
· · ·		30,007.	16-24 X 14 14 14 14 14 14 14 14 14 14 14 14 14	
. , ,	·		TODEN!	37
Gross sales less returns				
Less Cost of goods sold			Francisco Contraction of the Con	'
Gross profit or (loss)				. ,
Other income				
Total. Add lines 1 through 11				
Compensation of officers, directors, trustees, etc	0.	0.		0.
Other employee salaries and wages				
Pension plans, employee benefits				_
ŭ				
-				
•				
amvm o	794	791		0.
	194.	194.		0.
•				<u> </u>
· · · · · · · · · · · · · · · · · · ·				
Other expenses STMT 4	14,127.	14,127.		0.
Total operating and administrative				
expenses. Add lines 13 through 23	14,921.	14,921.		0. 166,150.
Contributions, gifts, grants paid	166,150.			166,150.
Total expenses and disbursements.				
Add lines 24 and 25	181,071.	14,921.	<u> </u>	166,150.
Subtract line 26 from line 12	400 000		<u> </u>	
Excess of revenue over expenses and disbursements	482,204.	00 051		
Net investment income (if negative, enter -0-)		88,354.	37 / 3	
Adjusted net income (if negative, enter -0-)			N/A	Form 990-PF (2014)
	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in columns (a)) Contributions, gifts, grants, etc., received the columns and temporary cash investments Dividends and interest from securities Gross rents Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 448, 328. Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications Gross profit or (loss) Other income Total. Add lines 1 through 11 Compensation of officers, directors, trustees, etc Other employee salaries and wages Pension plans, employee benefits Legal fees Accounting fees Other professional fees Interest Taxes STMT 3 Depreciation and depletion Occupancy Travel, conferences, and meetings Printing and publications Other expenses STMT 4 Total operating and administrative expenses. Add lines 13 through 23 Contributions, gifts, grants paid Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-)	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) Contributions, gifts, grants, etc., received check (in the foundation is not required to attach Sch B interest on savings and temporary assh investments Overline and interest from securities Gross rents Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 Gross sales pince for all 448, 328. Sapital gain net income (from Part IV, line 2) Net short-term capital gain income modifications Gross profit or (loss) Other income Total. Add lines 1 through 11 Compensation of officers, directors, trustees, etc Other employee salaries and wages Pension plans, employee benefits Legal fees Accounting fees Other professional fees interest Taxes	2 , 172 , 213 . (Part I, column (d) must be on cash basis.) Analysis of Revenue and Expenses (The total of anounts in column (d)) (d), ed, and (d) may not necessarily equal the amounts in column (d)) Contributions, gifts, grants, etc., received check ▶ if the foundation is not required to statish Sch B niterest on savings and temporary Scross rents Ver gain or (loss) Ver gain or (loss) Vet gain or (loss) from sale of assets not on line 10 arcs sales proce for all 448, 328 arcs all an element of a savings and temporary All the foundations from Part IV, line 2) Vet gain or (loss) Vet solid or (loss) Vet gain or (loss) Vet gain or (loss) Vet gain	under section 507(b)(1) 2 , 172 , 213 . (Part I, column (d) must be on cash basis.) Analysis al Revenue and Expenses concessary squal the amounts in column (a) must be on cash basis.) Analysis al Revenue and Expenses (d) (a) Revenue and expenses per books (b) N/A Contributions, grifts, grants, etc., received concessary squal the amounts in column (a) must be on cash basis.) Contributions, grifts, grants, etc., received concessary squal the amounts in column (a) must be on cash basis.) Contributions, grifts, grants, etc., received concessary squal the amounts of the foundation in column (a) must be on cash basis.) Contributions, grifts, grants, etc., received concessary squal the amounts of the foundation in column (a) must be on cash basis.) Contributions, grifts, grants, etc., received concessary squal the amounts of the foundation in column (a) must be on cash basis.) Contributions, grifts, grants, etc., received concessary squal the amounts of the squal squal in concessary squal the amounts of the squal squal in concessary squal the amounts of the squal squal in concessary squal the amounts of the squal squal in concessary squal the squal squal squal in concessary squal the squal squal squal squal squal in concessary squal the squal squal squal squal in concessary squal the squal

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)

2 Enter amount from Part I, line 27a

3 Other increases not included in line 2 (itemize)

4 Add lines 1, 2, and 3

5 Decreases not included in line 2 (itemize)

5 O.

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

1 1, 662, 974.

2 482, 204.

3 0.

4 2, 145, 178.

Form 990-PF (2014)

(a) List and des	and Losses for Tax on li cribe the kind(s) of property sold (e g varehouse, or common stock, 200 sh	g , real estate,	income	(b) How acquired P - Purchase D - Donation		ate acquired o , day, yr)	(d) Date sold (mo , day, yr)
1a	0.000						
b SEE ATTACHED	STATEMENTS				 -	<u>-</u> .	
c d					 		
e		<u> </u>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)			
a b							
_C							
d 448,328.		+	200 52	1			FO 007
	ng gain in column (h) and owned by	the foundation	389,52	1.	(I) Core	- /Cal /h)	58,807.
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col (i) col (j), if any		col (k), t	s (Col (h) gain out not less thai ses (from col (n -0-) or
a							
<u>b</u>							
<u>c</u>	<u></u>	<u> </u>					
<u>d</u>		 		_			50 007
<u>e</u>		<u> </u>		<u></u>			58,807.
2 Capital gain net income or (net c	((7) <u>2</u>			58,807.
3 Net short-term capital gain or (lo If gain, also enter in Part I, line 8	oss) as defined in sections 1222(5) ar	nd (6)		١			
If (loss), enter -0- in Part I, line 8				} ₃		N/A	
	Jnder Section 4940(e) for	r Reduced	Tax on Net	Investment	ncome		
If "Yes," the foundation does not qua	this part blank ction 4942 tax on the distributable an alify under section 4940(e). Do not co each column for each year, see the i	omplete this pa	rt				Yes X No
(a)	(b)	motractions be	Tore making any cr	(c)			(d)
Base period years Calendar year (or tax year beginn	مناه مشربه فالمنام المحامل الم	stributions	Net value of nor	ncharitable-use ass	ets	Distrib (col (b) div	oùtión ratio rided by col. (c))
2013		3,987.		913,5	52.	, , , ,	.288968
2012		0.		98,8	00.		.000000
2011							
2010							
2009				· ·-·			
2 Total of line 1, column (d)					2	,	.288968
	5-year base period - divide the total	on line 2 by 5,	or by the number	of years	<u> </u>	<u> </u>	
the foundation has been in existe		·	•	·	_ 3	3	.144484
4 Enter the net value of noncharita	ble-use assets for 2014 from Part X,	line 5			4	1	1,920,000.
5 Multiply line 4 by line 3						j	277,409.
6 Enter 1% of net investment incom	me (1% of Part I, line 27b)					5	884.
7 Add lines 5 and 6					-	,	278,293.
8 Enter qualifying distributions from	m Part XII, line 4					3	166,150.
If line 8 is equal to or greater tha See the Part VI instructions	n line 7, check the box in Part VI, line	e 1b, and comp	lete that part using	a 1% tax rate			

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Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a),	4940(b), 4940(e), or	4948	- see i	nstru	ctio	ns)
1ą	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/						
	Date of ruling or determination letter (attach copy of letter if necessary	-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	and enter 1%	1	ļ		1,7	<u>67.</u>
	of Part 1, line 27b						
	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Par						_
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others er	nter - 0-)	2				0.
	Add lines 1 and 2		3			1,7	<u>67.</u>
_	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others e	nter -0-)	4			1 7	0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5	ļ		1,/	67.
6	Credits/Payments	1					
	2014 estimated tax payments and 2013 overpayment credited to 2014 5a		-				
	Exempt foreign organizations - tax withheld at source						
	Tax paid with application for extension of time to file (Form 8868) 6c		-				
	Backup withholding erroneously withheld 6d		4				^
_	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_	ļ		1 7	5.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9	 		1,/	72.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10	<u> </u>			
	Enter the amount of line 10 to be Credited to 2015 estimated tax	Refunded P	11				
	rt VII-A Statements Regarding Activities					V	NI.
14	During the tax year, did the foundation attempt to influence any national, state, or local legislation of	or aid it participate or interve	ne in		L	Yes	
	any political campaign?		\ 0		1a		X
U	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see		•		_1b		
	If the answer is "Yes" to 1aor 1b, attach a detailed description of the activities and copil distributed by the foundation in connection with the activities	es or any materials publis	nea or				
r	Did the foundation file Form 1120-POL for this year?				10	:	Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				10		
u	(1) On the foundation ► \$ 0 • (2) On foundation managers ► \$	0					
٥	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax		<u>•</u>				
·	managers > \$ 0.	imposed on foundation					
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.						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrum	ent, articles of incorporation	or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	,	,		3	•	Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4a		Х
	If "Yes," has it filed a tax return on Form 990-T for this year?		N	/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5		X
	If "Yes," attach the statement required by General Instruction T.						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either						
	By language in the governing instrument, or						
	• By state legislation that effectively amends the governing instrument so that no mandatory direct	ions that conflict with the st	ite law				
	remain in the governing instrument?				6		Х
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete	Part II, col. (c), and Part 2	(V		7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)						
	GA						
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? If "No," attach explanation				8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 45	942(j)(3) or 4942(j)(5) for c	lendar				
	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," comple				9		_X
10	Did any persons become substantial contributors during the tax year? If "Yes" attach a schedule listing	their names and addresses	STMT	6	10	X	

<u>Forr</u>	n 990-PF(2014) THE GO BIG RED FOUNDATION 37-653	32744	Page 5
P	art VII-A Statements Regarding Activities (continued)		
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of		
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	Х
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	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х
	Website address ► N/A	_ 10	,
14	The books are in care of ► SARAH J. WALTON Telephone no ►404-2	53-75	00
	Located at ▶5038 CAROL LANE, ATLANTA, GA ZIP+4 ▶3		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		
	and enter the amount of tax-exempt interest received or accrued during the year	N/	′A
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,	1	res No
	securities, or other financial account in a foreign country?	16	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 1) If "Yes," enter the name of the	10	
	foreign country		
P.	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required		
لستسا	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		res No
1:	During the year did the foundation (either directly or indirectly)	 	163 110
•	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		
	a disqualified person?		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X 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)?		
	(6) Agree to pay money or property to a government official? (Exception. 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)		
	1 If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		
•	/-	4.	
		1b	-
	Organizations relying on a current notice regarding disaster assistance check here		
1	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	4.	х
•	before the first day of the tax year beginning in 2014?	10	^_
Z	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))		
i	a At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning		
	before 2014? Yes X No		
	If "Yes," list the years \(\bigs_{ \text{if the years}} \)		
	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect		
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) N/A		
	,	2b	
(If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		
_	<u></u> ,		
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		
	during the year?		
	o If "Yes," did it have excess business holdings in 2014 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 2014) N/A	3b	
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
l	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 jeonardy before the first day of the tay year beginning in 20142	1.46	Y

Form 990-PF (2014) THE GO BIG RED FOUNDATION			37-65327	44	Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to					
, (1) Carry on propaganda, or otherwise attempt to influence legislation (section	on 4945(e))?	Y	es X No		
(2) Influence the outcome of any specific public election (see section 4955),	or to carry on, directly or indire	ectly,			
any voter registration drive?		Yo	es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	§?	Yı	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section				
4945(d)(4)(A)? (see instructions)		Y ₁	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary	r, or educational purposes, or t	for			
the prevention of cruelty to children or animals?		Y	es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	ider the exceptions described i	ın Regulatıons			
section 53 4945 or in a current notice regarding disaster assistance (see instr	uctions)?		N/A	5b	
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 mainta	ıned			
expenditure responsibility for the grant?	I/A 🔲 Y	es 🔲 No			
If "Yes," attach the statement required by Regulations section 53.494	15-5(d).				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Y	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?			6b	<u> </u>
If "Yes" to 6b, file Form 8870.			Γ		
7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?	Y	es X No		
b If "Yes," did the foundation receive any proceeds or have any net income attrib	utable to the transaction?		N/A	7b	
Part VIII Information About Officers, Directors, Trust	tees, Foundation Ma	nagers, Highly	y		
Paid Employees, and Contractors					
List all officers, directors, trustees, foundation managers and their		TT. 0	(2A -	1	
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	(e)	Expense ount, other
	to position	enter -0-)	and deferred compensation	all	owances
JAMES K. WALTON	TRUSTEE				
5038 CAROL LANE		_			
ATLANTA, GA 30327	0.00	0.	0.		0.
SARAH J. WALTON	MANAGING TRUS	TEE			
5038 CAROL LANE			_		_
ATLANTA, GA 30327	5.00	0.	0.		0.
				<u> </u>	
· · · · · · · · · · · · · · · · · · ·			,		
				<u> </u>	
2 Compensation of five highest-paid employees (other than those in		enter "NONE."	(d) Contributions to	1 .	F
(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	(e)	Expense ount, other
	devoted to position	(0)	compensation		owances
NONE					
			,	<u> </u>	
	1				
				<u> </u>	
	_			1	
	1				
				ļ	
	1				
]	
Total number of other employees paid over \$50,000			▶		0

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	ation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	er "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	\dashv	
	_	
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis	stical information such as the	Expenses
number of organizations and other beneficiaries served, conferences convened, research papers pro	duced, etc	Expenses
1 N/A		
0		
2		
3		
4		
D. +DV D		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year or	-110	r·
1 N/A	illnes 1 and 2	Amount
I N/A		
2		
All other program-related investments See instructions		
3		

Total. Add lines 1 through 3

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P	Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а	Average monthly fair market value of securities	1a	1,753,600.
b	Average of monthly cash balances	1b	195,639.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	1,949,239.
е	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	0.
3	Subtract line 2 from line 1d	3	1,949,239.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	29,239.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	1,920,000.
6	Minimum investment return. Enter 5% of line 5	6	96,000.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a foreign organizations check here and do not complete this part)	nd certain	
1	Minimum investment return from Part X, line 6	1	96,000.
2a	Tax on investment income for 2014 from Part VI, line 5 2a 2, 767.		
b	Income tax for 2014 (This does not include the tax from Part VI) 2b	1	
C	Add lines 2a and 2b	_2c	1,767.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,767. 94,233.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	94,233.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	94,233.
P	Qualifying Distributions (see instructions)		-
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	166,150.
þ	Program-related investments - total from Part IX-B	1b	0.
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		
а	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	166,150.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	Income Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	166,150.
	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

Form **990-PF** (2014)

4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI,		, , , , , , , , , , , , , , , , , , ,		
line 7				94,233.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			0.	,, · · · · · · · · · · · · · · · · · ·
b Total for prior years		0		
3 Excess distributions carryover, if any, to 2014		0.	·····	
a From 2009				
b From 2010				
¢ From 2011				
d From 2012				
e From 2013 218, 129.				
f Total of lines 3a through e	218,129.			
4 Qualifying distributions for 2014 from	210/125			······································
Part XII, line 4 ▶\$ 166, 150.				
a Applied to 2013, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus		,		
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount		· · · · · · · · · · · · · · · · · · ·		94,233.
e Remaining amount distributed out of corpus	71,917.			••••••••••••••••••••••••••••••••••••••
5 Excess distributions carryover applied to 2014	0.	- 		0.
(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:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	290,046.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2013 Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2014 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2015		,		0.
7 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)	0.	_1 ₁ 11111	,	[;\tau_M(t);
8 Excess distributions carryover from 2009	_			
not applied on line 5 or line 7	0.	· · · · · · · · · · · · · · · · · · ·	1	,
9 Excess distributions carryover to 2015.	222			
Subtract lines 7 and 8 from line 6a	290,046.	,		-+
10 Analysis of line 9				
a Excess from 2010				
b Excess from 2011				
c Excess from 2012				
d Excess from 2013 218, 129. e Excess from 2014 71, 917.				
e Excess from 2014 /1,91/•[423581 11-24-14				50m 000 DE (0011)
11-24-14		9		Form 990-PF (2014)

THE GO BIG RED FOUNDATION

37-6532744

Page 10

3 Grants and Contributions Paid During the Ye		rayment		-
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		
The same same same same same same same sam				
HOLY INNOCENTS' EPISCOPAL SCHOOL 805 MT. VERNON HIGHWAY NW		PC	SUPPORT	
ATLANTA, GA 30327				66,000
				00,000
CREATE YOUR DREAMS 887 WEAT MARIETTA ST. STUDIO T-108		PC	SUPPORT	
ATLANTA, GA 30318				68,500
				00,500
SYNCHRONICITY THEATRE		PC	SUPPORT	
1389 PEACHTREE STREET NE, SUITE 350 ATLANTA, GA 30309				1,000
				1,000
PHILIP'S EDUCATION PARTNERS		PC	SUPPORT	
342 CENTRAL AVENUE NEWARK, NJ 07103				18,500
				10,500
UNIVERSITY OF NEBRASKA FOUNDATION 1010 LINCOLN MALL, SUITE 300		PC	SUPPORT	
LINCOLN, NE 68506				2,000
	TINUATION SHEE	T(S)	▶ 3a	166,150
b Approved for future payment				
		į		
NONE		ļ		
NONE				
		1		

Part XVI-A Analysis of Income-Producing Activities

Form 990-PF (2014)

Enter gross amounts unless otherwise indicated	Unrelated	Unrelated business income		y section 512, 513, or 514	(e)	
•	(a)	(b)	(C) Exclu-	(d)	Related or exempt	
1 Program service revenue	Business code	Amount	sion	Amount	function income	
a	- 3,33		 			
b						
C		-	-			
d	1					
e						
1		-				
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash						
investments			14	7.		
4 Dividends and interest from securities			14	44,461.		
5 Net rental income or (loss) from real estate						
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal						
property						
7 Other investment income						
8 Gain or (loss) from sales of assets other					-	
than inventory			18	58,807.		
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue						
a						
b	_					
C	f I					
d						
e		_				
12 Subtotal Add columns (b), (d), and (e)		().	103,275.	0	
13 Total. Add line 12, columns (b), (d), and (e)				13	103,275	
(See worksheet in line 13 instructions to verify calculations)					

Part XVI-B	Relationship	of Activities to	the Accomplishme	ent of Exempt	Purnoses
I CHILIAN ITEM	relationsinp	OI MONAINES IO	THE MODULIDIES HER	SIIL OI EVEIIIDL	r ui buses

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes)
-	
	

Part	XVII	Information Re Exempt Organ		sfers To a	and Transactions	and Relations	nips With Noncha	ritable	•	
1 Die	the oro			of the following	g with any other organizati	on described in section	on 501(c) of	Т	Yes	No
					7, relating to political orga) 1 30 1(0 <i>)</i> 01			
	•	rom the reporting founda				inzadono:				İ
								1a(1)		Х
• •	Cash						•	1a(2)	-	X
		assets				•		10(2)		
		sactions:		v				45/45		х
• •	•	of assets to a noncharital				-	•	1b(1)	-	X
		ases of assets from a nor		organization				1b(2)	\vdash	
		of facilities, equipment,		•			•	1b(3)	\vdash	X
		ursement arrangements						1b(4)	\vdash	X
•						•		1b(5)	\vdash	X
• •		mance of services or me						1b(6)	<u> </u>	X
	_	facilities, equipment, ma	-					1c		X
					dule. Column (b) should al				ets,	
					ed less than fair market val	ue in any transaction	or sharing arrangement, s	how in		
		the value of the goods,								
(a)Line i	10.	(b) Amount involved	(c) Name of		exempt organization	(0) Description	of transfers, transactions, and s	sharing ar	rangeme	nts
				N/A						
		·								
					·					
								·		
,										
			Ī							
		· ····					···			
2a Is	the foun	dation directly or indirect	tly affiliated with, or i	related to, one	or more tax-exempt organ	izations described				
		501(c) of the Code (other	•		· ·			☐ Yes	X] No
		mplete the following sch	•			••••	• • •			
	,	(a) Name of org			(b) Type of organization		c) Description of relations	hip		
		N/A								
					.		.,,			
										
			· · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·						
	Under	penalties of perjury, I declare	that I have examined th	ıs return, ıncludın	ig accompanying schedules and	d statements, and to the	best of my knowledge	y the IRS	diecues	thic
Sign	and he	lief, it is true, correct, and cor	aplete Declaration of pr	eparer (other than	n taxpayer) is based on all infor	mation of which preparer	has any knowledge retu	irn with th	e prepar	rer
Here					106.01.15	TRUS		wn below] No
	Sian	ature of officer or trustee			Date	Trtle				
	1 - 3	Print/Type preparer's na		Preparer's s		[Date]	Check if PTIN			
			· · ·				self- employed			
Paid		TERRI E. L	AWSON.	Hui	Jawan CPA	16/11/15		0038	630	ı
Prep		Firm's name ► FRA			L.L.C.	<u> </u>	Firm's EIN ► 58-1			~
-	Only	Tamoname P LICE	LILL G DE							
	,	Firm's address 12	30 PEACHT	יוים אואוי	REET, NE, SU	JITE 1500	 			
			LANTA, GA				Phone no. (404)	253	-75	0.0
			, UF				1 (7			<u></u>

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

OMB No 1545-0047

2014

Name of the organization

Employer identification number

	THE GO BIG RED FOUNDATION	37-6532744
Organization type (chec	:k 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 foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	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 instructions
	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions tota any one contributor. Complete Parts I and II. See instructions for determining a contribu	
Special Rules		
sections 509(a) any one contrib	ution described in section 501(c)(3) filing Form 990 or 990·EZ that met the 33 1/3% supp (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990·EZ), Part II, line 13, 1 butor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the am ·EZ, line 1. Complete Parts I and II.	6a, or 16b, and that received from
year, total conti	ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from the first received from the first scientific, literary, or expectable to children or animals. Complete Parts I, II, and III.	
year, contribution is checked, ento purpose. Do no	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from sections exclusively for religious, charitable, etc., purposes, but no such contributions totaled er here the total contributions that were received during the year for an exclusively religion to the complete any of the parts unless the General Rule applies to this organization becaus able, etc., contributions totaling \$5,000 or more during the year	d more than \$1,000. If this box ous, charitable, etc.,
but it must answer "No"	in that is not covered by the General Rule and/or the Special Rules does not file Schedu on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its eet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	•

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization

Employer identification number

THE GO BIG RED FOUNDATION

37-6532744

Part I	Contributors (see instructions). Use duplicate copies of Part I	ıf addıtıonal space ıs needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JAMES K. WALTON 5038 CAROL LANE ATLANTA, GA 30327	\$\$	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
2	SARAH J. WALTON 5038 CAROL LANE ATLANTA, GA 30327	\$\$	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 Omniant II for noncash contributions.)

Name of organization

Employer identification number

THE GO BIG RED FOUNDATION

37-6532744

No. from Part I (a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.			
(a) No.		(see instructions)	
No. rom			
No. rom			
No. rom		\$	
rom		(c)	
	(b)	FMV (or estimate)	(d)
	Description of noncash property given	(see instructions)	Date received
.			
		\$	
(a)	4.5	(c)	
No. rom Part I	(b) Description of noncash property given	FMV (or estimate) (see instructions)	(d) Date received
— ·			
(a) No.	(b)	(c)	(d)
rom Part I	Description of noncash property given	FMV (or estimate) (see instructions)	Date received
-			
-		\$	
(a)		(c)	
No. from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
art I	besomption of noncestriptoperty given	(see instructions)	Date received
-			
		\$	<u></u>
(a) No.	/61	(c)	1.0
rom	(b)	FMV (or estimate)	(d)
art I	Description of noncash property given	(see instructions)	Date received
-			
-			

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Page 4 Name of organization Employer identification number THE GO BIG RED FOUNDATION 37-6532744 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry For organizations completing Part III, enter the total of exclusively religious, chantable, etc., contributions of \$1,000 or less for the year (Enter this info once.) Part III Use duplicate copies of Part III if additional space is needed (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (d) Description of how gift is held (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF INTERE	ST ON SAVI	NGS AND TEM	1PORARY	CASH IN	VESTMENTS	STATEMENT	1
SOURCE	REVE	(A) REVENUE PER BOOKS		(B) IVESTMENT ICOME	(C) ADJUSTED NET INCOME		
SUNTRUST INVESTMENT #G1F-165460	rs		7.		7.		_
TOTAL TO PART I, LI	INE 3		7.		7.		_ _
FORM 990-PF	DIVIDENDS	S AND INTER	REST FR	OM SECUR	RITIES	STATEMENT	 2
SOURCE	GROSS AMOUNT	CAPITAI GAINS DIVIDENI	R	(A) EVENUE R BOOKS	(B) NET INVES MENT INCO		
SUNTRUST INVESTMENTS #G1F-165460 SUNTRUST	88,317	. 45,52	29.	42,788.	42,78	8.	_
INVESTMENTS #G1F-165460	1,673	•	0.	1,673.	1,67	3.	
TO PART I, LINE 4	89,990	45,52	29.	44,461.	44,46	1.	_ =
FORM 990-PF		TAX	KES			STATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS	NET I	B) NVEST- INCOME	(C) ADJUSTED NET INCOM		
FOREIGN TAXES - SUN INVESTMENTS FEDERAL INCOME TAX	TRUST	581. 213.		581. 213.			0.
TO FORM 990-PF, PG	1, LN 18	794.	<u> </u>	794.		(0.
			= ===			== ==================================	=

FORM 990-PF	OTHER E	XPENSES		STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM			
INVESTMENT MANAGEMENT FEES - SUNTRUST INVESTMENTS	14,127.	14,127	•	0		
TO FORM 990-PF, PG 1, LN 23	14,127.	14,127		0		
FORM 990-PF	CORPORAT	E STOCK		STATEMENT		
DESCRIPTION		В	OOK VALUE	FAIR MARKET VALUE		
AMERICAN EUROPACIFIC GROWTH F AMERICAN GROWTH FUND INVESCO SELECT COMPANIES OPPENHEIMER DEVELOPING MARKET OPPENHEIMER EQUITY INC PRINCIPAL MID CAP FUND CL A PRUDENTIAL GLOBAL REAL ESTATE CALVERT SHORT DURATION FUND OPPENHEIMER INTL BOND FUND PIMCO TOTAL RETURN FUND PRINCIPAL HIGH YIELD FUND PRINCIPAL MIDCAP FUND CL P PRUDENTIAL GLOBAL REAL ESTATE OPPENHEIMER SENIOR FLOATING R OPPENHEIMER EQUITY INCOME FUN LOOMIS SAYLES BOND INSTL FUND NUVEEN NWQ SMALL CAP VALUE FU		227,842. 184,895. 65,375. 64,633. 48,160. 22,636. 20,161. 345,639. 67,006. 0. 65,937. 98,591. 94,217. 151,749. 191,198. 269,597. 20,379.	236,810 193,576 67,395 62,309 55,780 29,096 22,090 339,905 63,770 0 62,365 108,855 99,960 146,905 195,966 259,213 21,055			
TOTAL TO FORM 990-PF, PART II		1,938,015.	1,965,050			

LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT	
ADDRESS		
5038 CAROL LANE ATLANTA, GA 30327		
5038 CAROL LANE ATLANTA, GA 30327		
PART XV - LINE 1A	STATEMENT	7
	ADDRESS 5038 CAROL LANE ATLANTA, GA 30327 5038 CAROL LANE ATLANTA, GA 30327	ADDRESS 5038 CAROL LANE ATLANTA, GA 30327 5038 CAROL LANE ATLANTA, GA 30327

NAME OF MANAGER

JAMES K. WALTON SARAH J. WALTON

Form **8868** (Rev. January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

► Information about Form 8868 and its instructions is at www.irs.gov/form8868

OMB No 1545-1709

 If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box ightharpoons X• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www irs.gov/efile and click on e-file for Chanties & Nonprofits. Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number Name of exempt organization or other filer, see instructions Employer identification number (EIN) or print THE GO BIG RED FOUNDATION 37-6532744 File by the Number, street, and room or suite no. If a P.O. box, see instructions Social security number (SSN) due date for filing your 5038 CAROL LANE instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions ATLANTA, GA 0 4 Enter the Return code for the return that this application is for (file a separate application for each return) **Application** Return **Application** Return Is For Code Is For Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) Form 990-BL 02 Form 1041-A 08 Form 4720 (individual) 03 Form 4720 (other than individual) Form 990-PF Form 5227 04 10 Form 990-T (sec. 401(a) or 408(a) trust) Form 6069 11 Form 990-T (trust other than above) Form 8870 12 SARAH J. WALTON The books are in the care of ▶ 5038 CAROL LANE - ATLANTA, GA 30327 Telephone No. ► 404-253-7500 Fax No. ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box

If it is for part of the group, check this box

and attach a list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2015 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2014 or 」 tax year beginning If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Change in accounting period If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 0. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment

instructions.

37-6532744

Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (d) Date sold P - Purchase D - Donation 2-story brick warehouse, or common stock, 200 shs MLC Co (mo, day, yr) (mo, day, yr) 1a 1,001.192 SHS OPPENHEIMER SENIOR FLOATING RATE P 07/01/1304/09/14 ь 1,329.640 SHS PIMCO TOTAL RETURN FUND P 07/01/1304/09/14 c 7,197.930 SHS PIMCO TOTAL RETURN FUND P VARIOUS 11/05/14 d 47.558 SHS PRINCIPAL HIGH YIELD FUND P 07/01/1301/27/14 e 456.274 SHS PRINCIPAL HIGH YIELD FUND 07/01/1304/09/14 P 251.686 SHS AMERICAN EUROPACIFIC GROWTH FUND P VARIOUS 01/27/ g 290.850 SHS AMERICAN EUROPACIFIC GROWTH FUND P 01/16/1304/09/14 h 276.231 SHS AMERICAN GROWTH FUND P VARIOUS 01/27/ 249.423 SHS AMERICAN GROWTH FUND P VARIOUS 04/09/14 1,174.312 SHS CALVERT SHORT DURATION 04/09/14 $\overline{\mathbf{P}}$ VARIOUS k 69.614 SHS INVESCO SELECT CO P |11/30/12|01/27/14 195.599 SHS INVESCO SELECT CO P VARIOUS 04/09/14 m 95.238 SHS OPPENHEIMER DEV MARKETS P VARIOUS 04/09/14 n 128.312 SHS OPPENHEIMER EQUITY INC P 11/30/1201/27/14 ₀ 415.356 SHS OPPENHEIMER EQUITY P VARIOUS 04/09/14 (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 8,400. 8,352. 48. a 14,400. 14,260. 140. b 78,745. 77,606. 1,139. C 370. 370. 0. d $3,\overline{600}$. 3,550. **50.** е 11,867. 864. 11,003. f 14,400. 12,715. 1,685. g 11,552 10,868. 684. h 10,800. 9,814. 986. 19,200. 29. 19,171. 1,622. 1,559. 63. 4,381. 4,800. 419. 3,353.3,600. $\overline{2}47.$ m 373. 3,884. 3,511. n 13,200. 11,379. 1,821. 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col (h)) Gains (excess of col (h) gain over col (k), (j) Adjusted basis (k) Excess of col (i) (i) F M V as of 12/31/69 but not less than "-0-") as of 12/31/69 over col (j), if any 48. a 140. b 1,139. C Ō. d 50. 6 864. 1,685. 684. h 986. 29. 63. 419. 247. m 373. n 1,821. $\{\begin{array}{l} \mbox{If gain, also enter in Part I, line 7} \mbox{If (loss), enter "-0-" in Part I, line 7} \end{array}\}$ 2 Capital gain net income or (net capital loss) 2 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) If (loss), enter "-0-" in Part I, line 8

Part IV | Capital Gains and Losses for Tax on Investment Income (b) How acquired (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (d) Date sold P - Purchase D - Donation 2-story brick warehouse, or common stock, 200 shs MLC Co (mo , day, yr) (mo, day, yr) 1a 587.276 SHS OPPENHEIMER BOND FUND 04/09/14 P VARIOUS b 16,585.185 SHS PIMCO TOTAL RETURN FUND $\overline{\mathbf{p}}$ VARIOUS 11/05/14 c 211.128 SHS PRINCIPAL MID CAP FUND P VARIOUS 01/27/14 d 354.156 SHS PRINCIPAL MID CAP FUND P 01/16/13|04/09/14 e 261.097 SHS PRUDENTIAL GLOBAL REAL ESTATE $\overline{\mathtt{P}}$ VARIOUS 04/09/14 f CAPITAL GAINS DIVIDENDS g h 1 k ı m n 0 (g) Cost or other basis (f) Depreciation allowed (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 3,600. 3,632. <32. a 181,442. 178,816. 2,626. b 4,117. 3,505. 612. C 7,200. 5,880. 1,320. d 6,000 5,796. 204. е 45,529. 45,529. g h m η 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col (h)) Gains (excess of col (h) gain over col (k), (j) Adjusted basis (k) Excess of col (i) (i) FMV as of 12/31/69 but not less than "-0-") as of 12/31/69 over col (j), if any 2,626. b 612. С 1,320. d 204. 45,529. m η 0 { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } 2 Capital gain net income or (net capital loss) 58,807. 2 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) If (loss), enter "-0-" in Part I, line 8 N/A

Part XV **Supplementary Information** 3 Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Purpose of grant or contribution Foundation Amount status of Name and address (home or business) recipient ELIM ROMANIAN PENTECOSTAL CHURCH РC SUPPORT 142 SCENIC HIGHWAY LAWRENCEVILLE, GA 30046 6,000. CHASTAIN PARK CONSERVANCY PC SUPPORT 4001 POWERS FERRY ROAD ATLANTA, GA 30342 2,000. GEORGIA VIETNAM VETERANS ALLIANCE PC SUPPORT 5879 NEW PEACHTREE ROAD DORAVILLE, GA 30340 150. DULUTH YOUTH FOOTBALL ASSOCIATION ÞС SUPPORT PO BOX 134 DULUTH, GA 30096 1,000. CREATING CONNECTED COMMUNITIES ÞС SUPPORT PO BOX 500247 ATLANTA, GA 31150 1,000. Total from continuation sheets 10,150.