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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

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► 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

2014

Open to Public Inspection

For	cale	ndar year 2014 or tax year beginning		, and ending		
Na	me o	f foundation			A Employer identificatio	n number
_1	IJ	AND J FAMILY FOUNDATION	N INC		46-3703833	3
		and street (or PO box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
		TRAMORE LANE		<u> </u>	804-270-35	
		town, state or province, country, and ZIP or foreign p	oostal code		C If exemption application is	pending, check here
		LES, FL 34108 k all that apply: Initial return	Instal satura of a fe	ermar nublia abasibi		a abaalabana 🕨 🗔
u	J11661	k all that apply: Initial return Final return	Amended return	ormer public charity	D 1. Foreign organization	s, check here
		Address change	Name change		Foreign organizations m check here and attach c	eeting the 85% test,
Н	Checl	k type of organization: X Section 501(c)(3) ex			E If private foundation sta	
	Se		Other taxable private founda	ation	under section 507(b)(1	
l F	aır m	arket value of all assets at end of year J Account	ing method: X Cash	Accrual	F If the foundation is in a	60-month termination
		Part II, col (c), line 16)	ther (specify)		under section 507(b)(1	
	- \$	2 , 187 , 805 . (Part I, colu	ımn (d) must be on cash l	basis)		T 46
	art	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	132,593.		N/A	
	2	Check fitte foundation is not required to attach Sch. B. Interest on savings and temporary	4 156	4 456	· · .	, * ₁ ,
	3	cash investments	4,156. 53,537.	4,156. 53,537.		STATEMENT 1
	4	Dividends and interest from securities Gross rents	33,337.	33,337.		STATEMENT 2
	1	Net rental income or (loss)				· · · · · · · · · · · · · · · · · · ·
ď	l 6a	Net gain or (loss) from sale of assets not on line 10	2,838.	<u> </u>		in the state of
ň	Ь	Gross sales price for all assets on line 6a 287,324.			RECEN	VED I
Revenue	7	Capital gain net income (from Part IV, line 2)		2,838.		
•	8	Net short-term capital gain			MAY 1 5	201
	9	Income modifications Gross sales less returns			4 ",,,, 1 3	185.1
	10a	Less Cost of goods sold			OGDEN	
	1	Gross profit or (loss)			L OGDEN	
	11	Other income				
	12	Total. Add lines 1 through 11	193,124.	60,531.		
	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
	14	Other employee salaries and wages				
es	15	Pension plans, employee benefits				
Sus	IDA	Legal fees Accounting fees STMT 3	3,650.	0.		0.
ă	C	Other professional fees STMT 4	22,749.	22,749.		0.
ķ	17	Interest				
rati	18	Taxes				
inis	19	Depreciation and depletion				
Ē	20	Occupancy				
φ	21	Travel, conferences, and meetings		 		
g	22	Printing and publications Other expenses				
E .	24	Total operating and administrative				
Operating and Administrative Expens	- '	expenses. Add lines 13 through 23	26,399.	22,749.		0.
ō	25	Contributions, gifts, grants paid	182,980.			182,980.
	26	Total expenses and disbursements.				
	<u> </u>	Add lines 24 and 25	209,379.	22,749.		182,980.
	27		16 055			
	Ι.	Excess of revenue over expenses and disbursements Net investment income (if penative enter -0-)	-16,255.	37,782.		
	l	Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-)		31,104.	N/A	

Fo	rm_99	00-PF (2014) N J AND J FAMILY FOUNDA			3703833 Page 2
F	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
<u>:</u>		column should be for end-ol-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing	219,274.	16,057.	16,057.
		Savings and temporary cash investments			
	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	···-		_
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
Assets		Inventories for sale or use	···-		
SS		Prepaid expenses and deferred charges			
•		Investments - U.S. and state government obligations	. 		
		Investments - corporate stock			
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 5	1,844,234.	2,030,331.	2,171,748.
	14	Land, buildings, and equipment: basis	·		
		Less accumulated depreciation			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers - see the			
_		instructions. Also, see page 1, item I)	2,063,508.	2,046,388.	2,187,805.
	1	Accounts payable and accrued expenses			•
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ië		Mortgages and other notes payable		<u> </u>	
_	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
S		and complete lines 24 through 26 and lines 30 and 31.			1
ဥ	24	Unrestricted			į
alar	25	Temporarily restricted			-
ä	26	Permanently restricted			;
or Fund Balances		Foundations that do not follow SFAS 117, check here			
Ĕ		and complete lines 27 through 31			1
ţ	27	Capital stock, trust principal, or current funds	0.	0.	ŧ
Net Assets	1	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	<u> </u>
it A	1	Retained earnings, accumulated income, endowment, or other funds	2,063,508.	2,046,388.	
ž	30	Total net assets or fund balances	2,063,508.	2,046,388.	
	31	Total liabilities and net assets/fund balances	2,063,508.	2,046,388.	
P	art	Analysis of Changes in Net Assets or Fund Ba	alances		
=			•	· · · · · · · · · · · · · · · · · · ·	
		net assets or fund balances at beginning of year - Part II, column (a), line 3	30		0 060 500
	•	t agree with end-of-year figure reported on prior year's return)		1	2,063,508.
		amount from Part I, line 27a		2	<u>-16,255.</u>
		increases not included in line 2 (itemize)		3	0.
		ines 1, 2, and 3	n	4	2,047,253.
		eases not included in line 2 (itemize) INVESTMENT COST		5	865.
6	rotal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	iumn (b), line 30	6	2,046,388.
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182,980.

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.

8 Enter qualifying distributions from Part XII, line 4

	990-PF (2014) N J AND J FAMILY FOUNDATION INC ort VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4		3703 - see i			Page 4 ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					i
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1			3	78.
	of Part I, line 27b					
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).		*****			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3			3	78.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			3	78.
	Credits/Payments:	河流	#h 24		. ^	1
	2014 estimated tax payments and 2013 overpayment credited to 2014		J. 1	,	•	. '
	Exempt foreign organizations - tax withheld at source			· .		•
	Tax paid with application for extension of time to file (Form 8868)	粉磨		.		. ;
	Backup withholding erroneously withheld 6d	Delia	避之			لــــــا
	Total credits and payments. Add lines 6a through 6d	7				0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8	<u> </u>			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	<u></u>		3	<u>78.</u>
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
	Enter the amount of line 10 to be: Credited to 2015 estimated tax	11	L			
	rt VII*A Statements Regarding Activities				Vaa	No
12	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın		11.21.3	res	No
	any political campaign?	^		1a		X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	a or			10,30	1. 1
	distributed by the foundation in connection with the activities.			م شدند. م		v
	Did the foundation file Form 1120-POL for this year?			1c	150	X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			37	1.7	
	(1) On the foundation. ▶ \$ O . (2) On foundation managers. ▶ \$ O . Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			8 19	1917	, ' ;
Ę	managers. > \$ 0.			,	23%	1
,	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities				ļ	
	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	r		- 1	١,,	1
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	•		3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b		<u> </u>
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		,	5		X
	If "Yes," attach the statement required by General Instruction T.					
	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			İ	ŀ
	remain in the governing instrument?			-6	-	X
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 XV			7	Х	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) NONE					1
						1
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	Х	L
9	Is the foundation claiming status as a private operating foundation within the meaning of section $4942(j)(3)$ or $4942(j)(5)$ for cale	ndar				
	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV			9	ļ	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10	Х	
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Pa	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		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ► NANCY WHITE Telephone no. ►804-	270 - 3	500	
		34108		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in fieu 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,		Yes	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	ļ		·
Pá	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			L
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1.	During the year did the foundation (either directly or indirectly);		163	140
10	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			'
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			, 1
				t
				1
	(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.)			
ì	of fany answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			4
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	, 1b		
	Organizations relying on a current notice regarding disaster assistance check here	J		,
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 2014?	1c		X
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 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2014?			
	If "Yes," list the years \blacktriangleright ,,,,,,,			
t	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		
C	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	b,,,,,,,,,			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	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	3ь		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	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 2014?	4b		х

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service	,	(c) Compensation
NONE		
	i	
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 statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 N/A	_	
	_	
	ㅋ	
2		
	_	
	_	
3		
	7	
4		
	7	
	7	
Part IX-B Summary of Program-Related Investments		
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		0.
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a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	182,980.
b	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:		
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	182,980.
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	378.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	_6	182,602.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	tion qualifies for the	section

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

1 Distributable amount for 2014 from Part XI, Intra 7 2 Lineal Studies of Lineal Studies and of 2014 a Entire amount for 2013 only a Encess distributions carryover, if alay, to 2014; 4 From 2009 5 From 2010 6 From 2010 6 From 2011 7 Total of Jines Studies of 2014 from Part XI, Intra 7 1 Total of Jines Studies of 2014 from Part XI, Intra 6 From 2014 7 From 2013 7 Total of Jines Studies of 2014 from Part XI, Intra 6 From 2014 8 Applied to 2014 from 1000 9 Part XII, Intra 6 From 2014 9 Total of Jines Studies of 1000 9 Part XI, Intra 6 From 2014 9 Total of Jines Studies of 1000 9 Part XI, Intra 6 From 2014 9 Total of Jines Studies of 1000 9 Part XI, Intra 6 From 2014 9 Total of Jines Studies of 1000 9 Part XI, Intra 6 From 2014 9 Total of Jines Studies of 1000 9 Part XI, Intra 6 From 2014 9 Total of Jines Studies of 1000 9 Part XI, Intra 6 From 2014 9 Total of Jines Studies of 1000 9 Part XI, Intra 6 From 2014 9 Total of Jines Studies of 1000 9 Part XI, Intra 6 From 2014 9 Total of Jines Studies of 1000 9 Part XI, Intra 6 From 2014 9 Total of Jines Studies of 1000 9 Part XI, Intra 6 From 2014 9 Total of Jines Studies of 1000 9 Part XI, Intra 6 From 2014 9 Total of Jines Studies of 1000 9 Part XI, Intra 6 From 2014 9 Total of Jines Studies of 1000 9 Part XI, Intra 6 From 1000 9 Part XI, Intra 6 From 1000 9 Part XI, Intra 6 From 1000 9 Part XI, Intra 7 From 2014 9 Part XI, Intra 7 From 1000 9 Part XI, Intra 7 From 100		(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
Ine 7	Distributable amount for 2014 from Part XI	00.000	Tours prior to 2010	2010	2017
2. Understructed recover, a large, see of the ene of 9214 a Enter amount of 20 20 only b Total for pror years: 2. Eaccess disk dutions carryover, if any, to 2014; a From 2009 b From 2010 c From 2010 c From 2013 52, 849. 4. Outsifying distributions for 2014 from Part XII, line 4; b S 182, 980. 4. Opplied to 2013, but not more than line 2a happed to 2015, but not more than line 2a happed to 2015, but not more than line 2a happed to 2015, but not more than line 2a happed to 2015, but not more than line 2a happed to 2015, but not or more than line 2a happed to 2015, but not or more than line 2a happed to 2015, but not or more than line 2a happed to 2015, but not or more than line 2a happed to 2014 distributed so and or Corpus (Election required - see instructions) 6. From 2010 c From 10 c From 2010	•				113 393
a Enter amount for 2013 only b Total for prior years: 2	·				113,333.
\$ Excess distributions curryover, if any, to 2014; \$ a From 2009 \$ b From 2010 \$ c From 2011 \$ 1 Total of lines 3s through a \$ Dualying distribution for 2014 from Part XII, line 4; \$ \$ \$ 182,980, \$ Applied to 2013, but not more than line 28 \$ Applied to undistributed income of prior years (Election required -see instructions) \$ 1 Tested as distributions out of corpus (Election required -see instructions) \$ 4 Applied to 2014 distributible amount \$ 6 Ports and the service of the se				0.	
S Excess diskributions carryover, if any, to 2014; a From 2009 b From 2010 c From 2011 d From 2012 c From 2013 52, 849. 1 Total of lines 3 through e 1 Ouallying distributions for 2014 from Part XII, line 4: ▶ \$ 182, 980. 4 Applied to 2015, but not none than line 2: b Applied to undistributed mome of prior years (Election required - see instructions) 1 Triads a distributions out of corpus (Election required - see instructions) 0. 1 related as distributions out of corpus (Election required - see instructions) 0. 4 Applied to 2014 distributible amount 8 Remaining amount distributed out of corpus 1 fines sensor appears in reclaim foll, the wares encore 1 fines sensor appears in reclaim foll, the wares encore 1 fines are appears and 4 cannot 4 applied to 2014 1 first in sensor appears in reclaim foll, the wares encore 1 fines de from line 20. 2 fines the around of prior years' 1 fines around of years' 1 fines around years' 1 fines around years' 1 fines around years' 1 fines	-				
3 Excess distributions carryover, if any, to 2014: a from 2010 e from 2011 from 2012 from 2012 from 2012 from 2012 from 2013 52 , 849 . 1 Total of lines 3a through e 4 Ouslying distributions for 2014 from Part XII, line 4 № \$ 182 , 980 . a Applied to 2013, but not more than line 2a b Applied to undistributed income of pror years (Reticon required - see instructions) fracated as distributions out of corpus (Reticon required - see instructions) d Applied to 2014 distributibation amount e fernaming amount distributed out of corpus from the fernaming amount distributed out of corpus for the fernaming a			0.		'
a From 2010 b From 2011 d From 2012 e From 2013	3 Excess distributions carryover, if any, to 2014:				
E From 2011 d From 2012 d From 2012 52.849. 1 Total of lines 3a through e 1 Total of lines 3a through e 1 Cousting distributions for 2014 from Part XII, line 4: ▶ \$ 182.980. A Applied 10 undistributed income of pror years (Election required - see instructions) 1 Freated as distributions out of corpus (Election required - see instructions) 0. d Applied 10 10 4 distributible amount e Remaining amount distributied out of corpus (Election required - see instructions) 0. d Applied 10 10 4 distributible amount e Remaining amount distributied out of corpus (for an amount appears in existing to 2014 of an amount appears in existing to 2014 of an amount spears in existing the 2014 of and 5 from line 1. This amount must be distributed income for 2014. Subtract lines 4 d and 5 from line 2 amount spears in 2014 of an amount spears in	a From 2009				
From 2012 52,849.	b From 2010				
From 2013	c From 2011				
## Total of lines 3a through e 4. Qualifying distributions for 2014 from Part XII, inv 4 № 5 182, 980. a Appled to 2013, but not more than line 2a b Appled to 2013, but not more than line 2a b Appled to 2013, but not more than line 2a Clication required - see instructions) of Treated as distributions out of corpus (Clication required - see instructions) of Appled to 2014 distributiable amount e Remaning amount distributed out or corpus E access destributions carryover applied to 2014 ### an immort apple are incolure (it) is exame amount must be around not column as indicated below. 2. Corpus Ad at less 34 4, and 4e Subtract line 5 b Priory years' undistributed income. Subtract line 4b from line 2b c Enter the anount of priory years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been privously assessed d Subtract line 6b from line 6b. Taxable amount - see instructions e Undistributed income for 2014. Subtract line 4 from line 62. at 7 conditions are sensified in the 4 from line 6b. Taxable amount - see instructions e Undistributed income for 2014. Subtract line 4 from line 6b. Taxable amount - see instructions e Undistributed income for 2014. Subtract lines 4 d into from line 1. This amount must be destributed in 2015. Amounts treated as distributions out of corpus to salely requirements imposed by section (70(b)(1)(F) or 4942(b)(3) (Election may be required - see instructions) 8. Excess distributions carryover from 2009 not appled on line 5 or line 7 9. Excess distributions carryover to 2015. Subtract line 5 7 and 8 from line 6a 1. Analysis of line 9: a Excess from 2014 d Excess from 2	d From 2012				
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c Excess from 2012 d Excess from 2013	· - ·				
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e Excess from 2014 69,587.					
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Part XIV Private Operating F	oundations (see ins			N/A	-3/U3833 rage it
1 a If the foundation has received a ruling o				N/A	
foundation, and the ruling is effective for					
b Check box to indicate whether the found	•	•	In section	4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	g louridation described	Prior 3 years	1 4342())(0) UI	
income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
investment return from Part X for	\ <u>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u>	(0) 00 10	(4)	(4) 23 11	(4) (5)
each year listed					
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			<u> </u>		
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	į				
shown in Part X, line 6 for each year listed	,				
c "Support" alternative test - enter:			<u> </u>		
(1) Total support other than gross	ļ				
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)			ŀ		
(3) Largest amount of support from					
an exempt organization	,				
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	on had \$5,000 c	or more in assets
at any time during the				. ,	
1 Information Regarding Foundatio	n Managers:				
a List any managers of the foundation who		han 2% of the total cor	tributions received by t	the foundation before t	the close of any tax
year (but only if they have contributed m	ore than \$5,000). (See se	ection 507(d)(2).)			
NONE					
b List any managers of the foundation who			(or an equally large po	rtion of the ownership	of a partnership or
other entity) of which the foundation has	a 10% or greater interes	t.			
NONE				· · · · · · · · · · · · · · · · · · ·	
2 Information Regarding Contribution		• • • •	•		
	nly makes contributions to				
the foundation makes gifts, grants, etc. (• • • • • • • • • • • • • • • • • • • •				c, and d.
a The name, address, and telephone numb	er or e-mail address of th	ne person to whom app	lications should be add	ressed:	
NANCY WHITE					
784 TRAMORE LANE, NA					
b The form in which applications should be	e submitted and informati	ion and materials they s	hould include:		
WRITTEN FORM					
c Any submission deadlines:					
NO DEADLINES		1			
d Any restrictions or limitations on awards	, such as by geographica	i areas, charitable fields	, kinds of institutions, o	or other factors:	
NO RESTRICTIONS.					
423601 11-24-14				<u> </u>	Form 990-DE (2014)

FORM 990-PF (2014) IN U AIND U FAM	TLI FOUNDAT	TON THE		40	-3/0		
Part XVI-A Analysis of Income-Producing Activities							
Enter gross amounts unless otherwise indicated.	Unrelated busi	ness income	Excluded by s	section 512, 513, or 514			
Enter group amount amount of more managed.	(a)	(b)	(C) Exclu-	(d)	R		

Enter gross amounts unless otherwise indicated.	Unrelated	business income		section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
·					
a b	-	· · · · · · · · · · · · · · · · · · ·			
·	-				
		 			
				·····	· · · · · · · · · · · · · · · · · · ·
e	-				
g Fees and contracts from government agencies	_		- -		
Membership dues and assessments					
3 Interest on savings and temporary cash			 		
investments			14	1 156	
4 Dividends and interest from securities	<u> </u>		14	4,156. 53,537.	
5 Net rental income or (loss) from real estate:	建 网络	Walter St.	<u> </u>	33,337.	11 元 · · · · · · · · · · · · · · · · · ·
a Debt-financed property		M YOUNG A KING			************************************
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	2,838.	
9 Net income or (loss) from special events			1.20	2,050.	
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:			 		
a b	-				
c			· · · · ·		
d			1 "		
Α					
12 Subtotal. Add columns (b), (d), and (e)	- , ,		0.	60,531.	0.
13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>		<u> </u>	13	
See worksheet in line 13 instructions to verify calculations.)	,				0070011
					· · · · · · · · · · · · · · · · · · ·
Part XVI-B Relationship of Activities	to the Accor	npusnment o	Exempt Pu	irposes	
Line No. Explain below how each activity for which in	come is reported in	column (e) of Part X	VI-A contributed	importantly to the accomp	olishment of
▼ the foundation's exempt purposes (other than the foundation) is exempt purposes.					
				•	
::					

423621 11-24-14

Form **990-PF** (2014)

N J AND J FAMILY FOUNDATION 46-3703833 Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: Х (1) Cash 1a(1 (2) Other assets 1a(2) Х b Other transactions: X (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5) Х (6) Performance of services or membership or fundraising solicitations 1b(6) Sharing of facilities, equipment, mailing lists, other assets, or paid employees 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. (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements (a) Line no N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described Yes X No in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge May the IRS discuss this return with the preparer 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 Sign shown below (see instr.)? Here X Yes Signature of officer or trustee Date Title Print/Type preparer's name Preparer's Sgnature Date Check [self- employed Paid PAUL HECKMAN **Preparer** Firm's name ► KEITER, STEPHENS & SHREAVES, P Firm's EIN ▶ 54-1631262 **Use Only**

(804)747-0000

Firm's address ▶ P.O. BOX 32066

RICHMOND, VA 23294-2066

Schedule B (Form 990, 990-EZ,

Department of the Treasury Internal Revenue Service

or 990-PF)

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

Name of the organization

Employer identification number

	N J AND J FAMILY FOUNDATION INC	46-3703833					
Organization type (cl	neck 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						
	ation is covered by the General Rule or a Special Rule. 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ile. See instructions.					
deller ar Nule							
	ization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling m any one contributor. Complete Parts I and II. See instructions for determining a contributor						
Special Rules							
sections 509 any one conf	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II						
year, total co	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III						
year, contrib is checked, e purpose Do	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 if this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
out it must answer "N	tion that is not covered by the General Rule and/or the Special Rules does not file Schedule E to on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 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

N	J	AND	J	FAMILY	FOUNDATION	INC

46-3703833

TA O W	ND 0 FAMILI FOUNDATION INC	40	-3/03033			
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	HARRY AND HARRIET GRANDIS FAMILY FOUNDATION P.O.BOX 3029 GLEN ALLEN, VA 23058	\$132,593. 	Person X Payroll			
(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 Oncash Occash (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 Oncash Occash (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)			
		O-b-4.1. D (F (100 000 FT 000 DEL (004 IL			

Name of organization

Employer identification number

N J AND J FAMILY FOUNDATION INC

46-3703833

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No.	(b)	(c) FMV (or estimate)	(d)
rom Part I	Description of noncash property given	(see instructions)	Date received

Name of or	ganization	Employer identification number					
N T A	ND J FAMILY FOUNDATION	INC	46-3703833				
Part III	Exclusively religious, charitable, etc., contribe year from any one contributor. Complete completing Part III, enter the total of exclusively religious. Use duplicate copies of Part III if additional	ibutions to organizations described plumns (a) through (e) and the follo , chantable, etc., contributions of \$1,000 o	I in section 501(c)(7), (8), or (10) that total more than \$1,000 for owing line entry. For organizations				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(e) Transfer of git	ft				
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	(e) Transfer of gift						
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(e) Transfer of git	ft				
ļ	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	(e) Transfer of gift						
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee				
ł							

Part IV | Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (c) Date acquired (mo., day, yr.) (a) List and describe the kind(s) of property sold, e.g., real estate, (d) Date sold 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo., day, yr.) 1a 500 SHARES COACH INC. 02/18/14 b 600 SHARES BRISTOL MYERS SQUIBB Р 05/20/14 P 05/21/14 c 600 SHARES FASTENAL CO P d 400 SHARES TARGET CORP 05/21/14 e 2,090.209 SHARES EATON VANCE P 09/09/14 P 1 600 SHARES ABBVIE INC. 09/29/14 g 600 SHARES SOUTHERN CO P 11/14/14 h BHP BILLITON FIN US LTD P 11/21/14 k ı m П 0 (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) 23,428 26,764. -3,336. a <u>30,2</u>50. -1,049. 29,201. b 28,513. 28,566. -53. C 23,314 25,348 -2,034. d 19,000 19,230 -230. 35,436. 28,678. 6.758. 24,775. 3,657. 28,432. g 100,875. -875.h 100,000 1 n 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 -3,336. a -1,049. b -5<u>3.</u> C -2,034. d -230.е 6,758. 3,657. -875. h k m n 0 If gain, also enter in Part I, line 7 2 Capital gain net income or (net capital loss) 2,838. If (loss), enter "-0-" in Part I, line 7 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 Y	ear (Continuation)				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount	
	or substantial contributor	recipient			
NAPLES COMMUNITY HOSPITAL					
350 7TH STREET NORTH, PO BOX 234				5 000	
NAPLES, FL 34106				5,000,	
N=1-0-1-0-1-0-1-0-1-0-1-0-1-0-1-0-1-0-1-0					
NEIGHBORHOOD HEALTH CLINIC 121 GOODLETTE ROAD					
NAPLES, FL 34102				5,000.	
NORTHWESTERN UNIVERSITY					
1201 DAVIS STREET					
EVANSTON, IL 60208				5,000.	
PLANNED PARENTHOOD - COLLIER COUNTY 1425 CREECH ROAD					
NAPLES FL 34103				1,500.	
RIGHT ANGLE FOUNDATION					
1 N. STATE STREET, 7 - LOWER					
CHICAGO, IL 60602				5,000,	
SHELTER FOR ABUSED WOMEN & CHILDREN PO BOX 10102					
NAPLES, FL 34101				107,500.	
THE HOLOGONA MICEON A PROPERTY					
THE HOLOCAUST MUSEUM & EDUCATION CENTER OF SOUTHWEST FLORIDA					
4760 TAMIAMI TRAIL NORTH, SUITE 7					
NAPLES, FL 34103				1,500.	
				:	
THE SALVATION ARMY 3180 ESTEY AVENUE, PO BOX 8209					
NAPLES, FL 34101				10,000.	
UNIVERSITY OF RICHMOND					
28 WESTHAMPTON WAY, MARYLAND HALL					
UNIVERSITY OF RICHMOND, VA 23173				5,000,	
YOUTH HAVEN					
5867 WHITAKER ROAD NAPLES, FL 34112				3,500,	
Total from continuation sheets				159,500.	

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager or substantial contributor Foundation Purpose of grant or **Amount** status of contribution Name and address (home or business) recipient ARTS NAPLES 9696 BONITA BEACH ROAD STE 102 2,000. BONITA SPRINGS FL 34135 ARTIS NAPLES 5833 PELICAN BAY BOULEVARD NAPLES FL 34108 5,000, TEMPLE SHOLOM 132 SE 11TH AVE POMPANO BEACH, FL 33060 2,500. COMMUNITY FOUNDATION OF COLLIER COUNTY 2400 TAMIAMI TRAIL N STE 300 NAPLES FL 34103 1,000. Total from continuation sheets

FORM 990-PF INTERES	ST ON SAVII	NGS AND TEM	PORARY	CASH IN	IVESTMENTS	STATEMENT	1
SOURCE	REVE			(B) IVESTMENT ICOME	(C) ADJUSTED NET INCOME		
INTEREST INCOME - US				4,156.			
TOTAL TO PART I, LIN				4,156.			
FORM 990-PF	DIVIDENDS	S AND INTER	EST FRO	OM SECUR	ITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	RI	(A) EVENUE R BOOKS	(B) NET INVES MENT INCO		
DIVIDEND INCOME - US TRUST	53,537.	•	0.	53,537.	53,53	7.	
TO PART I, LINE 4	53,537.	•	0.	53,537.	53,53	7.	
FORM 990-PF		ACCOUNTI	NG FEES			STATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS	(I NET II MENT I		(C) ADJUSTED NET INCOM		
ACCOUNTING FEES		3,650.		0.			0.
TO FORM 990-PF, PG 1	_, LN 16B	3,650.		0.			0.
FORM 990-PF	ro	THER PROFES	SIONAL	FEES		STATEMENT	4
DESCRIPTION		(A) EXPENSES PER BOOKS	(I NET IN MENT I	WEST-	(C) ADJUSTED NET INCOM		
MANAGEMENT FEES - US	TRUST	22,749.		22,749.	· , , , , ,		0.
TO FORM 990-PF, PG 1	., LN 16C	22,749.		22,749.			0.

FORM 990-PF OTHER	INVESTMENTS		STATEMENT 5
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
INVESTMENTS - US TRUST	COST	2,030,331.	2,171,748.
TOTAL TO FORM 990-PF, PART II, LINE 1	3	2,030,331.	2,171,748.