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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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2014

Open to Public Inspection

For cale	endar year 2014, or tax year beginning	, 2014,	and ending		,	
DEN	TACKCON FOUNDAMION			Α	Employer identification nun	ıber √
	JACKSON FOUNDATION BOX 8230		ŀ	В	58-2546170 Telephone number (see inst	ructions)
	ASVILLE, GA 31758-8230		į			
	·			C	If exemption application is	nending check here
C Che	ck all that apply   Initial return	Initial return of a form	per public charity		,	
G Che	Final return	Amended return	ter public criainty	D	1 Foreign organizations, chec	k here
	Address change	Name change			2 Foreign organizations meet	
H Che	ck type of organization X Section 501	(c)(3) exempt private for	undation		here and attach computation	n
[	Section 4947(a)(1) nonexempt charitable tr		rivate foundation	Ε	If private foundation status	
		ounting method X C	ash Accrual		under section 507(b)(1)(A)	, check here
(iioi ► \$		Other (specify)  column (d) must be on	·	F	If the foundation is in a 60- under section 507(b)(1)(B)	
Part 1	Analysis of Revenue and			_		
· aici	Expenses (The total of amounts in	(a) Revenue and expenses per books	(b) Net investmen income	ìt	(c) Adjusted net income	(d) Disbursements for charitable
	columns (b), (c), and (d) may not neces- sarily equal the amounts in column (a)					purposes
	(see instructions))					(cash basis only)
	1 Contributions, gifts, grants, etc, received (attach schedule)	10,000.	n.g			
	2 Ck ► if the foundn is not required to attach Sch 8					1
	3 Interest on savings and temporary cash investments	3,390.	3,39	0.	3,390.	1
	4 Dividends and interest from securities 5 a Gross rents.	3,732.	3,73	2.	3,732.	
	<b>b</b> Net rental income	<u> </u>	-			
R	or (loss)  6 a Net gain or (loss) from sale of assets not on line 10					
REVENU	b Gross sales price for all assets on line 6a					
Ě	7 Capital gain net income (from Part IV, line 2).	_				
N U	Net short-term capital gain     Income modifications					1
Ě	10 a Gross sales less returns and					
	allowances				,	
	<b>b</b> Less Cost of goods sold					
	c Gross profit or (loss) (attach schedule)  11 Other income (attach schedule)					
	11 Other income (attach schedule)					1 \$
	12 Total Add lines 1 through 11	17,122.	7,12	22.	7,122.	
	13 Compensation of officers, directors, trustees, etc	0.				
	14 Other employee salaries and wages					<del></del>
	15 Pension plans, employee benefits 16a Legal fees (attach schedule)					
A D	b Accounting fees (attach sch)					
M	c Other prof fees (attach sch)					
O I	17 Interest					
P S T R A T	18 Taxes (attach sun du lesser hun ar D					
A A	19 Depreciation (attach					
ΝΛ	20 Scrupansylig 1 8 2015					
G E	11**\					
A E N X D P	—     — — — —	<del></del>				
E	Other OGDEN, Heart					
SE	24 Total operating and administrative					
Š	expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid STMT 1	21,000.				21,000.
	26 Total expenses and disbursements		-			
	Add lines 24 and 25	21,000.		0.	0.	21,000.
	27 Subtract line 26 from line 12.  a Excess of revenue over expenses	-				1
	and disbursements	-3,878.	<u> </u>			
	b Net investment income (if negative, enter -0 )		7,12	22.	5 100	
	C Adjusted net income (if negative, enter -0)	L <u> </u>	L		7,122.	<u> </u>

Page 2

Par		Balance Sheets  Attached schedules and amounts in the description column should be for end of year amounts only	Beginning of year	End o	
		(See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash — non-interest-bearing	104 212	76.004	10.627
	2	Savings and temporary cash investments	104,313.	76,024.	12,637.
	3	Accounts receivable			
	١,	Less: allowance for doubtful accounts		<del> </del>	<del> </del>
	4	Pledges receivable			
	5	Less. allowance for doubtful accounts		<del></del>	
	_	Grants receivable		<del></del>	
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach sch)			
A		Less allowance for doubtful accounts			
A S E T	8	Inventories for sale or use			
Ē	9	Prepaid expenses and deferred charges			<u> </u>
Š	104	a Investments — US and state government obligations (attach schedule) STATEMENT 2		<del></del>	
		obligations (attach schedule) STATEMENT 2	95,535.	94,996.	100,650.
	1	b Investments — corporate stock (attach schedule) STATEMENT 3	35,247.	22,278.	25,907.
	۱ ۱	c Investments — corporate bonds (attach schedule) STATEMENT 4	69,163.	104,405.	107,098.
	11	Investments — land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule) STATEMENT 5	76,314.	78,991.	71,026.
	14				
		Less accumulated depreciation (attach schedule)			
	15	,			
	16	Total assets (to be completed by all filers — see the instructions Also, see page 1, item l)	380,572.	376,694.	317,318.
Ţ	17	Accounts payable and accrued expenses			
Å	18	Grants payable			
B	19	Deferred revenue			ļ
Ĺ	20	Loans from officers, directors, trustees, & other disqualified persons.			
H T	21	Mortgages and other notes payable (attach schedule)			
- 1	22	Other liabilities (describe			i
E S	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
N F E U	24	Unrestricted	380,572.	376,694.	
ΤN	25	Temporarily restricted			i
A D	26				i i
A S B S A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			1
E L T A	27	Capital stock, trust principal, or current funds			1
SN	28	Paid-in or capital surplus, or land, bldg , and equipment fund			1
ΟĒ	29	Retained earnings, accumulated income, endowment, or other funds			1
RS	30	Total net assets or fund balances (see instructions)	380,572.	376,694.	į
	31	Total liabilities and net assets/fund balances (see instructions)	380,572.	376,694.	
Par	t III]	Analysis of Changes in Net Assets or Fund Balanc			<del>l </del>
1	Tota	il net assets or fund balances at beginning of year – Part II, colum	nn (a), line 30 (must agr	ee with	
	end-	of-year figure reported on prior year's return)		1	380,572.
2		er amount from Part I, line 27a		2	-3,878.
3		increases not included in line 2 (itemize)		3	
4		lines 1, 2, and 3		4	376,694.
5		pases not included in line 2 (itemize)	- Part II solumn (b) (m)		276 604
	тота	al net assets or fund balances at end of year (line 4 minus line 5) -	- mart II, column (b), line	30 6	376,694.

(a) List and deso 2-story brick wareh	(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shares MLC Company)  (b) How a P — Pure D — Dor			(C) Date acquired (month, day, year)	
la N/A					
b					
С					
d			<u> </u>		
<u>e</u>			<u> </u>		
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba plus expense of sa		<b>(h)</b> Gain or (e) plus (f) m	
а					
b					
<u>c</u>					<u>.</u>
d		<del></del>			
e		· <del></del>			
	nowing gain in column (h) and owned by			(I) Gains (Col	
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a		gain minus column ( nan -0-) <b>or</b> Losses (fi	
<u>a</u>				··	
b					
<u> </u>					
d					
e					
2 Capital gain net income or		enter in Part I, line 7 er -0- in Part I, line 7	- 2		
3 Net short-term capital gain	or (loss) as defined in sections 1222(5)	and (6):			
If gain, also enter in Part I, in Part I, line 8	line 8, column (c) (see instructions). If (	(loss), enter -0-	- 3		
	ider Section 4940(e) for Reduce	d Tay on Not Invest		1	
	vate foundations subject to the section 4			N/A	
f section 4940(d)(2) applies, lea	·		,	14/ 11	•
	section 4942 tax on the distributable am	nount of any year in the ba	se neriod?	∏Yes	
	qualify under section 4940(e) Do not co.	· ·	.50 po.154		L, 1.0
	unt in each column for each year; see th		ng anv entries		
<del> </del>	(b)	(c)	Ing drift ortained	(d)	<del></del>
(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use as	sets (co	Distribution lumn (b) divided	
2013					
2012					
2011		•			
2010					
2009					
2 Total of line 1, column (d)			2		
	or the 5-year base period – divide the to ation has been in existence if less than 5		e <b>3</b>		
4 Enter the net value of nonc	charitable-use assets for 2014 from Part	X, line 5	4		
5 Multiply line 4 by line 3			5		
6 Enter 1% of net investmen	t income (1% of Part I, line 27b)		6		
<b>7</b> Add lines 5 and 6			7		
8 Enter qualifying distribution	ns from Part XII, line 4		8		
, , ,	ter than line 7, check the box in Part VI,	line 1b, and complete that	<u> </u>	% tax rate See	the

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Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), o	r 4948 – see	instruc	tions)		
1 a Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.	٦				<b></b>
Date of ruling or determination letter (attach copy of letter if necessary — see instrs)					
<b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V,		1			142.
check here. ► and enter 1% of Part I, line 27b	ļ	1 1			
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)	ل	-			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable					
foundations only Other's enter -0 )		2			0.
3 Add lines 1 and 2		3			142.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others e	nter -U-)	4			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5			142.
6 Credits/Payments.					
a 2014 estimated tax pmts and 2013 overpayment credited to 2014  b Exempt foreign organizations — tax withheld at source  6 b		-			
c Tax paid with application for extension of time to file (Form 8868)  6 c	<del></del>	-l			
d Backup withholding erroneously withheld  6d		-			
7 Total credits and payments. Add lines 6a through 6d		+ 7-1			0.
8 Enter any <b>penalty</b> for underpayment of estimated tax. Check here  if Form 2220 is attached		8			
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	,	. 9			142.
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	,	10		-(	142.
11 Enter the amount of line 10 to be Credited to 2015 estimated tax	ided •	11			
Part VII-A   Statements Regarding Activities		1 1			
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation	or did it			Yes	No
participate or intervene in any political campaign?	. OF GIG IL		1.	a	X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes				<del>                                     </del>	
(see Instructions for the definition)?			11	<b>5</b>	X
If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any i	materials pul	blished			
or distributed by the foundation in connection with the activities	,			l	
c Did the foundation file Form 1120-POL for this year?			1 (	3	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	ė				
(1) On the foundation ►\$ 0. (2) On foundation managers. ► e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure to	т	n .	0.		
foundation managers ►\$ 0.					
2 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					
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrur	nent. articles				
of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the	changes		3		X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4 :		X
<b>b</b> If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?			41	<b>o</b> N	I/A
5 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					
<ul> <li>By language in the governing instrument, or</li> </ul>				1	
By state legislation that effectively amends the governing instrument so that no mandatory directively amends the governing instrument so that no mandatory directively amends the governing instrument so that no mandatory directively amends the governing instrument so that no mandatory directively amends the governing instrument so that no mandatory directively amends the governing instrument so that no mandatory directively amends the governing instrument so that no mandatory directively amends the governing instrument so that no mandatory directively amends the governing instrument so that no mandatory directively amends the governing instrument so that no mandatory directively amends the governing instrument so that no mandatory directively amends the governing instrument so that no mandatory directively amends the governing instrument so that no mandatory directively amends the governing instrument so that no mandatory directively amends the governing instrument so that no mandatory directively amendatory direc	tions that co	nflict	٠,		.
with the state law remain in the governing instrument?	VII		7	+	X
<ul> <li>7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part</li> <li>8 a Enter the states to which the foundation reports or with which it is registered (see instructions)</li> </ul>	λV		⊢	X	+
GA	-		-		
<del>  </del>			-		İ
<b>b</b> If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation			81	b X	
	1942(1)(3) 05	4045(1)(	5)	1-	<b>†</b>
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4 for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If 'Ye	s, complete	Part X	1/ 9	-	X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule is				1	
and addresses SEE S	STATEMEN'	T 6	10	<u> </u>	<u> </u>
BAA			Form 9	90-PF	(2014)

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4 b

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b Did the foundation make any investment in a prior year (but after December 31, 1969) that could geopardize its charitable purpose that had not been removed from jeopardy before the first day of

the tax year beginning in 2014?

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Part VII-B Statements Regarding Activit		n 4720 May Be Red	<b>uired</b> (continued	)	
5 a During the year did the foundation pay or incu	•			_	
(1) Carry on propaganda, or otherwise attemp	it to influence legislation	(section 4945(e))?	Yes	X No	
on, directly or indirectly, any voter registra	(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?  Yes				
(3) Provide a grant to an individual for travel,	X No				
(4) Provide a grant to an organization other the in section 4945(d)(4)(A)? (see instructions)	ian a charitable, etc, orç )	ganization described	Yes	X No	
(5) Provide for any purpose other than religious educational purposes, or for the prevention	us, charitable, scientific, n of cruelty to children o	literary, or or animals?	Yes	X No	
<b>b</b> If any answer is 'Yes' to 5a(1)-(5), did <b>any</b> of t described in Regulations section 53.4945 or in (see instructions)?	he transactions fail to quality a current notice regard	ualify under the exception ing disaster assistance	ons	5b N/A	
Organizations relying on a current notice regar	ding disaster assistance	e check here	▶ [		
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure response	he foundation claim exe sibility for the grant?	mption from the	N/A Yes	No No	
If 'Yes,' attach the statement required by Regu	ılatıons section 53 4945	-5(d)		_	
6 a Did the foundation, during the year, receive ar on a personal benefit contract?	ny funds, directly or indir	rectly, to pay premiums	Yes	X No	
<b>b</b> Did the foundation, during the year, pay premi	ums, directly or indirect	ly, on a personal benefi	t contract?	6 b X	
If 'Yes' to 6b, file Form 8870  7 a At any time during the tax year, was the found	lation a party to a probit	nited tay shelter transac	tion? Yes	X No	
<b>b</b> If 'Yes,' did the foundation receive any procee	, , ,			N/A 7b	
Part VIII Information About Officers, Dir					
and Contractors					
1 List all officers, directors, trustees, foundation	T				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances	
HEROLD JACKSON	PRESIDENT	0.	0.	0.	
P.O. BOX 8230	0				
THOMASVILLE, GA 31758-8230	4.				
PATSY JACKSON	SECRETARY/TR	0.	0.	0.	
P.O. BOX 8230 THOMASVILLE, GA 31758-8230	0				
	<u> </u>				
2 Compensation of five highest-paid employees	Y		<del>, </del>		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation		
NONE			CON PONDANON.	<u> </u>	
		!			
	1				
				<del> </del>	
				<del>                                     </del>	
	]				
Total number of other employees paid over \$50,000		L	<u> </u>	<b>•</b> 0	
			<del></del>		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Em and Contractors (continued)	ployees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services	<u> </u>
Part IX-A Summary of Direct Charitable Activities	
	<u> </u>
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	
· M/A	
2	-
	- –
3	<del></del>
`	- –
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
N/A	· <b>-</b>
	• =
2	
	· –
All other program-related investments See instructions.	<del> </del>
3	
×	· <b>-</b>
	- –
Total Add lines 1 through 2	<u> </u>
Total. Add lines 1 through 3	0.
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Part X   Minimum'Investment Return (All domestic foundations must complete this part. F see instructions.)		
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes:  a Average monthly fair market value of securities	1 a	
<b>b</b> Average of monthly cash balances	1 b	
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	0.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c	7.4	
(attach detailed explanation)		
2 Acquisition indebtedness applicable to line 1 assets	2	
3 Subtract line 2 from line 1d	3	
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0.
6 Minimum investment return. Enter 5% of line 5	6	0.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private ope and certain foreign organizations check here ☐ and do not complete this part.)  1 Minimum investment return from Part X, line 6	T 1	
2 a Tax on investment income for 2014 from Part VI, line 5 2a 142	14/0-1	
b Income tax for 2014 (This does not include the tax from Part VI)	<del> </del>	
c Add lines 2a and 2b	- 2°c	142.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	-142.
4 Recoveries of amounts treated as qualifying distributions	4	112.
5 Add lines 3 and 4	5	-142.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	0.
Part XII Qualifying Distributions (see instructions)		
Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes:     a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	21,000.
<b>b</b> Program-related investments – total from Part IX-B	1 b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the: <ul> <li>a Suitability test (prior IRS approval required)</li> </ul>	3 a	
<b>b</b> Cash distribution test (attach the required schedule)	3 b	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	21,000.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)

6 Adjusted qualifying distributions. Subtract line 5 from line 4

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5

6

21,000.

## Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	<b>(c)</b> 2013	<b>(d)</b> 2014
1 Distributable amount for 2014 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2014				0.
a Enter amount for 2013 only			0.	
<b>b</b> Total for prior years 20 , 20 , 20		0.		-
3 Excess distributions carryover, if any, to 2014				1
<b>a</b> From 2009 37,500.				
<b>b</b> From 2010 50,000.				
<b>c</b> From 2011 63, 200.				1
<b>d</b> From 2012 33,840.				İ
e From 2013 19,000.				1
f Total of lines 3a through e	203,540.			
4 Qualifying distributions for 2014 from Part				
XII, line 4 \( \bar{\bar{\bar{\bar{\bar{\bar{\bar{			0	
•			0.	
<b>b</b> Applied to undistributed income of prior years (Election required — see instructions)		0.		<u> </u>
c Treated as distributions out of corpus (Election required – see instructions)	0.			
<b>d</b> Applied to 2014 distributable amount				0.
e Remaining amount distributed out of corpus	21,000.	,, -		
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) )		, .		
(2)				
6 Enter the net total of each column as				
indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	224,540.			
<b>b</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 instructions			0	1
and the reading amount of the motions			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				i
may be required – see instructions)	0.			
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions)	27 500			t I
	37,500.		·	
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	187,040.			
10 Analysis of line 9	20,7010.			
a Excess from 2010 50,000.				
<b>b</b> Excess from 2011 63, 200.				
<b>c</b> Excess from 2012 33,840.				
d Excess from 2013 19,000.				
e Excess from 2014 21,000.	<u> </u>			Form 990 PF (2014)

orm 990-PF (2014) BEN JACKSON FOUN		1 1 5	73 (71) A	58-25461/(	
Part XIV Private Operating Founda  1 a If the foundation has received a ruling or of					N/A
is effective for 2014, enter the date of the	ruling	that it is a private t	perating loundation,	and the ruling	
<b>b</b> Check box to indicate whether the foundat	ion is a private ope	rating foundation de	escribed in section	4942(j)(3) or	4942(J)(5)
2 a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		<del></del>
investment return from Part X for	(a) 2014	<b>(b)</b> 2013	(c) 2012	(d) 2011	(e) Total
each year listed <b>b</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					
Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test - enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test enter·					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information assets at any time during t	ı (Complete thi: ne year — see il	s part only if th nstructions.)	e foundation ha	d \$5,000 or mor	e in
Information Regarding Foundation Manage     List any managers of the foundation who is close of any tax year (but only if they have NONE	have contributed mo	ore than 2% of the t than \$5,000) (See	total contributions resection 507(d)(2).)	ceived by the founda	tion before the
<b>b</b> List any managers of the foundation who ca partnership or other entity) of which the NONE	own 10% or more o foundation has a 10	f the stock of a corp 0% or greater intere	poration (or an equal est.	ly large portion of th	e ownership of
2 Information Regarding Contribution, Gran Check here ► X if the foundation only requests for funds If the foundation make complete items 2a, b, c, and d	nakes contributions	to preselected cha	ritable organizations		
a The name, address, and telephone number	er or e-mail address	s of the person to w	hom applications sh	ould be addressed	
<b>b</b> The form in which applications should be	submitted and infor	mation and materia	Is they should includ	e	
c Any submission deadlines.					
<b>d</b> Any restrictions or limitations on awards,	such as by geograp	hical areas, charita	ble fields, kinds of in	stitutions, or other fa	actors
	,				

3 Grants and Contributions Paid During the Ye	ar or Approved for Futur	e Payment		· · · · · · · · · · · · · · · · · · ·
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient	Contribution	
Name and address (home or business)  a Paid during the year	substantial contributor	recipient		
Total		_	► 3a	
<b>b</b> Approved for future payment				
Total			► 3b	1

Inter gross amounts unless otherwise	indicated Unrelat	ed business income	Excluded b	y section 512, 513, or 514	(e)	
Program service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	<b>(d)</b> Amount	Related or exempt function income (See instructions)	
a						
b						
С						
d						
e						
f						
g Fees and contracts from government	nent agencies					
2 Membership dues and assessmen	nts					
3 Interest on savings and temporary cash in	vestments				3,390	
4 Dividends and interest from secu	rities				3,732	
5 Net rental income or (loss) from i	real estate			* * *	, The Type 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
a Debt-financed property						
<b>b</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 to	han inventory				-	
9 Net income or (loss) from special	events					
10 Gross profit or (loss) from sales of	of inventory					
11 Other revenue:		BAST STATE OF THE	2 4 5		र रेज्योदी अर्थि	
a b			+-+			
c						
d						
е						
12 Subtotal Add columns (b), (d), a	nd (e)	-			7,122	
13 Total. Add line 12, columns (b),	(d), and (e)			13	7,122	
(See worksheet in line 13 instructions t	to verify calculations)			•		
Part XVI-B Relationship of A	stivities to the Assemb	lichment of Ever	nt Durnoc			
rait Avi-D Relationship of A	cuviues to the Accomp	isilinent of Exem	ibi Lutbos	) C 5		

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). (See instructions.)
N/A	

# Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

			£ 11						Yes	No
de	d the organization directly escribed in section 501(c) lating to political organiza	of the Code (ot	ngage in any of the her than section	he following with 501(c)(3) organi	any other of zations) or in	rganization section 527,		i		
	ansfers from the reportin		a noncharitable e	exempt organiza	tion of					
	) Cash	5		- Nop. 0. gaa				1 a (1)	~ -	X
•	Other assets							1 a (2)		X
. •	ther transactions.							1 4 (2)		
	(1) Sales of assets to a noncharitable exempt organization							1 h /1\		- •'
•	(2) Purchases of assets from a noncharitable exempt organization							1 b (1)		X
•	``_						1 b (2)		X	
•	•	•	dssels					1 b (3)		X
• •	Reimbursement arrang							1 b (4)		X
•	Loans or loan guarante							1 b (5)		X
•	Performance of service							1 b (6)		X
c Si	naring of facilities, equipn	nent, mailing lis	ts, other assets,	or paid employe	es			1 c		<u>X</u>
dif	the answer to any of the	ahove is 'Yes '	complete the follo	owing schedule	Column (h)	should always	show the fair ma	arket value	of	
th	the answer to any of the e goods, other assets, or	services given	by the reporting	foundation If the	foundation	received less	than fair market	value in	, 0,	
	ny transaction or sharing									
(a) Line	no (b) Amount involved	(c) Name o	of noncharitable exem	ipt organization	(d) Desc	ription of transfe	rs, transactions, and s	sharing arran	gement	S
N/A										
			<del></del>							
	_									
	·									
			* .							
							-			
-										
						-				
		1		•						
							· ·			
<b>2 a</b> IS de	the foundation directly or escribed in section 501(c)	r indirectly affilia of the Code (of	ated with, or relat ther than section	tea to, one or mo 501(c)(3)) or in s	ore tax-exem section 527?	ipt organizatio	ns	Yes	x x	No
	'Yes,' complete the follow								- 11	
	(a) Name of organiza		(b) Type	of organization		(c) [	Description of rela	tionship		—
N/A	(4) 1 (4)		(2) 1) [ 1							
N/A			<u> </u>							
				<del>-</del>		<u></u>				
			<del>                                     </del>							
	Linder condition of parting. I declar	re that I have examine	d thus return, uncluding a	occompanying schodule	s and statements	and to the best of	my knowledge and belie	f it is true		
	Under penalties of perjury, I declar correct, and complete Declaration	on of preparer (other	than taxpayer) is bas	sed on all information	of which prepare	r has any knowle	ige	i, it is true,		
Sign	<i>√</i> • • • • • • • • • • • • • • • • • • •							May the this retur	IRS disc	uss he
Here	Hande	sock	سىد		P 8	-11-15		preparer (see inst	shown	below
	Signature of officer or trustee	7		Date	Title				Yes	No
	Print/Type preparer's r	name	Preparers	sugnature	Da	te	Check If	PTIN	1.	
Paid	EDWIN A. SI	IMMONS	FINALM	A SIMMON	s l		self-employed	P00120	1445	
	<del></del>		MILLS & SYN	MONS PC	<u>-                                      </u>	E.	<del></del>	021225	, , , ,	
Prepa			1098	THOMS IC			3 Em 30-21	021223		
Use O	riiiy riiiis audress	THOMASVILI		10			none no (229	1 226	2515	:
BAA	1	THORWSATPI	LE, GA 3179	, ,			10110 (229			
BAA								Form <b>99</b>	ツーアト	(2014)

## 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, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Name of the organization		Employer Identification number
BEN JACKSON FOUNDATION		58-2546170
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) of	rganization
	4947(a)(1) nonexempt charitable	trust <b>not</b> treated as a private foundation
	527 political organization	
	and any horning or Sammanon.	
Form 990-PF	X 501(c)(3) exempt private foundat	ion
		trust treated as a private foundation
	501(c)(3) taxable private foundati	·
	301(c)(3) taxable private foundati	
Check if your organization is covered by the	ne General Rule or a Special Rule	
Note. Only a section 501(c)(7), (8), or (10)	organization can check boxes for both the	General Rule and a Special Rule See instructions.
General Rule		
X For an organization filing Form 990, 99	0.EZ, or 990-PF that received, during the y	rear, contributions totaling \$5,000 or more (in money or
property) from any one contributor. Co	implete Parts I and II. See instructions for c	determining a contributor's total contributions.
Special Rules		
For an organization described in section	on 501(c)(3) filing Form 990 or 990-EZ that r	met the 33-1/3% support test of the regulations 0 or 990-EZ), Part II, line 13, 16a, or 16b, and that
received from any one contributor, dur	ing the year, total contributions of the great	ter of (1) \$5,000 or (2) 2% of the amount on (i)
Form 990, Part VIII, line 1h, or (ii) Forr	m 990-EZ, line 1 Complete Parts I and II	
For an organization described in section	on 501(c)(7), (8), or (10) filing Form 990 or 9	990-EZ that received from any one contributor.
during the year, total contributions of r	nore than \$1,000 exclusively for religious, of	990-EZ that received from any one contributor, charitable, scientific, literary, or educational
purposes, or for the prevention of crue	elty to children or animals. Complete Parts I	, II, and III.
	== F01(a)(7) (8) as (10) filing Form 000 as (	200 E7 that recovered from any and contributor
during the year contributions exclusive	on 501(c)(/), (8), or (10) filing Form 990 or s elv for religious, charitable, etc., purposes,	990-EZ that received from any one contributor, but no such contributions totaled more than
\$1,000 If this box is checked, enter he	ere the total contributions that were receive	d during the year for an <i>exclusively</i> religious,
charitable, etc., purpose. Do not comp	plete any of the parts unless the <b>General Ru</b>	ile applies to this organization because
it received <i>nonexclusively</i> religious, chi	aritable, etc , contributions totaling \$5,000 (	or more during the year
Caution: An organization that is not covere	ed by the General Rule and/or the Special F	Rules does not file Schedule B (Form 990, 990-EZ, or
990 PF), but it must answer 'No' on Part I'	V, line 2, of its Form 990, or check the box et the filing requirements of Schedule B (Fo	on line H of its Form 990-EZ or on its Form 990-PF.
BAA For Paperwork Reduction Act Notice or 990-PF.	e, see the Instructions for Form 990, 990EZ	, Schedule <b>B</b> (Form 990, 990-EZ, or 990-PF) (2014)

Name of org	anization •	I Empl	oyer identification number
•	CKSON FOUNDATION	1	-2546170
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional sp	ace is needed.	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	PHYLLIS JONES P.O. BOX 1955 THOMASVILLE, GA 31799	\$10,00	Person X Payroll  Noncash  (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		  \$	Person Payroll Complete Part II for noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
BAA	TEEA0702L 07/17/14	Schedule <b>B</b> (Form	990, 990-EZ, or 990-PF) (2014)

Page

1 to 1 of Part II

BEN JACKSON FOUNDATION

Employer identification number

58-2546170

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed					
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
	N/A	\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
		\$	<del>_</del>			
(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			
<b>-</b>		\$ - -				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
		\$				
BAA	Sche	dule <b>B</b> (Form 990, 990-EZ				

Page

1 of Part III

Name of organization
BEN JACKSON FOUNDATION

Employer identification number
58-2546170

Part III	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, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions)					
(a)	Use duplicate copies of Part III if additional s	pace is needed.				
(a) No. from Part I	Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	N/A					
				·		
	Transferee's name, address	(e) Transfer of gift s, and ZIP + 4	Rela	ationship 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, 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, and ZIP + 4		Rela	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, and ZIP + 4		Rela	ationship of transferor to transferee		

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**BEN JACKSON FOUNDATION** 

58-2546170

1,000.

4,000.

3,000.

2,000.

1,000.

1,000.

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STATEMENT 1
FORM 990-PF, PART I, LINE 25
CONTRIBUTIONS, GIFTS, AND GRANTS

CASH GRANTS AND ALLOCATIONS

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

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

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

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

MERCER UNIVERSITY

MACON, GA

FUNDS TO SUPPORT ORG

VALDOSTA STATE UNIVERSITY

VALDOSTA, GA

501 (C) (3)

FUNDS TO SUPPORT ORG UNIVERSITY OF GEORGIA

ATHENS, GA

501 (C) (3)

FUNDS TO SUPPORT ORG GEORGIA SOUTHERN UNIVERSITY

501 (C) (3)

FUNDS TO SUPPORT ORG

KENNESAW STATE COLLEGE

KENNESAW, GA

501 (C) (3)

FUNDS TO SUPPORT ORG CLEMSON UNIVERSITY

CLEMSON, AL

501 (C) (3)

FUNDS TO SUPPORT ORG. THOMAS UNIVERSITY 1501 MILLPOND ROAD

THOMASVILLE, GA 31792

501 (C) (3)

1,000.

PAGE 2

#### BEN JACKSON FOUNDATION

58-2546170

1,000.

1,000.

2,000.

\$

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

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

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

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

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE: DONEE IS SUPPORTED ORG ORGANIZATIONAL STATUS OF DONEE: 501(C)(3)

AMOUNT GIVEN:

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

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

RELATIONSHIP OF DONEE: DONEE IS SUPPORTED ORG ORGANIZATIONAL STATUS OF DONEE: 501(C)(3)

AMOUNT GIVEN:

FUNDS TO SUPPORT ORG.

GEORGIA TECH

ATLANTA, GA

501 (C) (3)

FUNDS TO SUPPORT ORG

SOUTHWEST GEORGIA TECHNICAL COLLEGE

501 (C) (3)

FUNDS TO SUPPORT ORG SOUTH GA ST COLLEGE

501 (C) (3)

TRANSFER TO SUPPORT ORG

SNEED ST COLLEGE

1,000.

FUNDS TO SUPPORT ORG.

GA COLLEGE & STATE UNIVERSITY

ORGANIZATIONAL STATUS OF DONEE: DONEE IS SUPPORTED ORG 501(C)(3)

1,000.

FUNDS TO SUPPORT ORG FLORIDA STATE UNIVERSITY

TALLAHASSEE

DONEE IS SUPPORTED ORG

501 (C) (3)

1,000.

FUNDS TO SUPPORT ORG ABAC

TIFTON, GA

1,000.

TOTAL \$ 21,000.

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Z	u		4

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#### **BEN JACKSON FOUNDATION**

58-2546170

#### STATEMENT 2 FORM 990-PF, PART II, LINE 10A INVESTMENTS - U.S. AND STATE GOVERNMENT OBLIGATIONS

STATE/MUNICIPAL OBLIGATIONS	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
THOMASVILLE GA HOSP AUTH MARIETTA GA DEV AUTH THOMASVILLE GA HSP AUTH MARIETTA GA DEV AUTH	COST	\$ 0.	\$ 0.
	COST	0.	0.
	COST	50,173.	50,992.
	COST	44,823.	49,658.
	TOTAL	\$ 94,996.	\$ 100,650.

#### STATEMENT 3 FORM 990-PF, PART II, LINE 10B INVESTMENTS - CORPORATE STOCKS

CORPORATE STOCKS	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
FLOWERS FOODS INCORPORATED PROCTOR & GAMBLE REYNOLDS AMERICAN INCORPORATED FERRELLGAS PARTNERS FERRELL GAS PROPERTIES FLOWERS FOODS 450 SHARES TIME WARNER - 125 SHARES	COST COST COST COST COST COST COST	\$ 0. 0. 0. 0. 6,605. 5,894. 9,779. \$ 22,278.	\$ 0. 0. 0. 6,594. 8,636. 10,677. \$ 25,907.

#### STATEMENT 4 FORM 990-PF, PART II, LINE 10C INVESTMENTS - CORPORATE BONDS

CORPORATE BONDS	VALUATION	BOOK	FAIR MARKET
	METHOD	VALUE	VALUE
GENERAL ELECTRIC CAPITAL CORP CITIGROUP INC NTS ISIN GENERAL ELECTRIC GOLDMAN SACHS GROUP MOTOROLA SOLUTIONS CITIGROUP INC	COST	\$ 0.	\$ 0.
	COST	0.	0.
	COST	19,660.	20,253.
	COST	10,040.	9,994.
	COST	25,202.	24,967.
	COST	49,503.	51,884.
	TOTAL	\$ 104,405.	\$ 107,098.

2	n	1	4

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**BEN JACKSON FOUNDATION** 

58-2546170

STATEMENT 5 FORM 990-PF, PART II, LINE 13 INVESTMENTS - OTHER

	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
OTHER PUBLICLY TRADED SECURITIES	_		
HARTFORD MUTUAL FDS	COST	\$ 78,991.	\$ 71,026.
HARTFORD FLOATING RATE FUND CLASS A	COST TOTAL	0. \$ 78,991.	<u>\$</u> 71,026.

STATEMENT 6 FORM 990-PF, PART VII-A, LINE 10 SUBSTANTIAL CONTRIBUTORS DURING THE TAX YEAR

NAME OF SUBSTANTIAL CONTRIBUTOR ADDRESS OF SUBSTANTIAL CONTRIBUTOR

PHYLLIS JONES

P.O. BOX 1955 THOMASVILLE, GA 31799