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Form 990-PF

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

OMB No 1545-0052

2014

Department of the Treasury

► 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.

Coan to Public Inspection

For	caland	25 year 2014 or tay year beginning	and ending	uctions is	at www.iis	ngovnomiaaopi.	Fabrus ra s Adulo suchadiodis
	ne of four		and ending	······································	A Emplo	yer identification number	
		M AND ARNOLD S JONES FAMILY				,	
		DATION			62-	-1839619	
		street (or P O box number if mail is not delivered to street address)	Roo	om/suite		one number (see instructions)	
		SERRAL DRIVE	,		423	3-638-4181	
		state or province, country, and ZIP or foreign postal code			C If exen	nption application is pending, o	hack hare
G	REEN	NEVILLE TN 37745			••	priori apprioritorito portorigi	
G	Check a	ll that apply Initial return Initial retur	n of a former public cha	rity	D 1. For	reign organizations, check her	e ▶ <u></u>
		Final return Amended	return		2. Fo	reign organizations meeting th	6 (
		Address change Name cha	nge		85	% test, check here and attach	computation
H	heck ty	/pe of organization. X Section 501(c)(3) exempt private	foundation		E if priva	te foundation status was term	inated under
	Section	4947(a)(1) nonexempt charitable trust Other taxable	e private foundation		section	1 507(b)(1)(A), check here	▶ ∐
l F	air mark	ket value of all assets at J Accounting method	X Cash Accr	ual	F If the f	oundation is in a 60-month ten	mination
e	nd of ye	ear (from Part II, col (c), Other (specify)			under	section 507(b)(1)(B), check he	ere 🕨 🔝
lir	ne 16) 🕨	\$ 668,908 (Part I, column (d) must b	pe on cash basis.)				
P	art l	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Net inv	restment	(c) Adjusted net	(d) Disbursements for chantable
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	incor		income	purposes
	4						(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule) Check ► If the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments	131		131		
Revenue	4	Dividends and interest from securities	14,491		14,491		
	1 _	Gross rents	14,491		14,431	· · · · · ·	
	5a b	Net rental income or (loss)					<u> </u>
	6a	Net gain or (loss) from sale of assets not on line 10 STMT 1	38,971				
	Ь	Gross sales price for all assets on line 6a 64,849		·····			
	7	Capital gain net income (from Part IV, line 2)			0		·····
	8	Net short-term capital gain				0	
	9	Income modifications					
	10a	Gross sales less returns and allowances	· · · · · · · · · · · · · · · · · · ·				
Reve	Ь	Less Cost of goods sold		***************************************	***************************************		
	c	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	53,593		14,622	0	
	13	Compensation of officers, directors, trustees, etc.	0				
es	14	Other employee salaries and wades EVED					
Š	15	Pension plans, employee benefits					
	16a	Legal fees (attach schedule) UL 0 6 2015					
Û	ь	Accounting fees (attach schedule) Other professional fees (attach schedule) STMT					
<u>ĕ</u> .	C	Other professional fees (attach-schedule) STMT 2	5,046		5,046		
SCANNET	17	Interest OGDEN, UT					
햜	18	Taxes (attach schedule) (see instructions) STMT 3	383		383		
뛼	19	Depreciation (attach schedule) and depletion					
튱	20	Occupancy					
-₹	21	Travel, conferences, and meetings					
<u></u>	22	Printing and publications					<u> </u>
=	23	Other expenses (att sch)					<u> </u>
Ē	24	Total operating and administrative expenses.					
Ties Figure		Add lines 13 through 23	5,429	************	5,429	0	
30	25	Contributions, gifts, grants paid SEE STATEMENT 4	70,070				70,070
	26	Total expenses and disbursements. Add lines 24 and 25	75,499		5,429	0	70,070
Ch	27	Subtract line 26 from line 12:		ŧ.			
W)#	l a	Excess of revenue over expenses and disbursements	-21,906		0.155		<u> </u>
	ь	Net investment income (if negative, enter -0-)			9,193		<u> </u>
	С	Adjusted net income (if negative, enter -0-)	I	<u> </u>		C)

Fo	rm 990	-PF (2014) JOHN M AND ARNOLD S JONES FAMILY	62-18396	L9	Page 2
	art i	Ralance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
_'	"सरद र	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing			
	2	Savings and temporary cash investments	14,958	21,940	21,940
- 1	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶			
ı	4	Pledges receivable ▶			
-		Less. allowance for doubtful accounts ▶			
ŀ	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other	İ		
		disqualified persons (attach schedule) (see			
		instructions)			
	7	Other notes and loans receivable (att schedule) SEE WRK 6,000			
ŀ		Less allowance for doubtful accounts ▶ 0	11,000	6,000	6,000
इ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
¥	10a	Investments – U S. and state government obligations (attach schedule)			
1	b	Investments – corporate stock (attach schedule) SEE STMT 5	347,923	322,046	640,968
	С	Investments – corporate bonds (attach schedule)			
	11	Investments – land, buildings, and equipment basis			
- [Less: accumulated depreciation (attach sch.)			
- 1	12	Investments – mortgage loans		·	
	13	Investments – other (attach schedule)		·····	
l	14	Land, buildings, and equipment basis ▶			
- 1		Less accumulated depreciation (attach sch.)			
	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers – see the			
4		instructions Also, see page 1, item I)	373,881	349,986	668,908
	17	Accounts payable and accrued expenses			
	18	Grants payable		 	
ië	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			-
<u> </u>	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe ►)			
	23	Total liabilities (add lines 17 through 22)	0	0	Į
		Foundations that follow SFAS 117, check here			
es		and complete lines 24 through 26 and lines 30 and 31.			
Š	24	Unrestricted	373,881	349,986	
ala	25	Temporarily restricted	·		•
8	26	Permanently restricted			<u> </u>
Net Assets or Fund Balances		Foundations that do not follow SFAS 117, check here			
F		and complete lines 27 through 31.			
8	27	Capital stock, trust principal, or current funds			
set	28	Paid-in or capital surplus, or land, bldg, and equipment fund			•
As	29	Retained earnings, accumulated income, endowment, or other funds			1
let	30	Total net assets or fund balances (see instructions)	373,881	349,986	1
~	31	Total liabilities and net assets/fund balances (see	272 221	242 226	
		instructions)	373,881	349,986	<u> </u>
_	Part				T
1		I net assets or fund balances at beginning of year - Part II, column (a), line 30 (must	agree with		272 001
_		of-year figure reported on prior year's return)		1	373,881
_		er amount from Part I, line 27a		2	-21,906
		7. morecost not mediated in initial 2 (normal), p		3	150
_		lines 1, 2, and 3 reases not included in line 2 (itemize) ► SEE STATEMENT 7		5	352,125 2,139
5			line 30	6	349,986
_5	1018	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b),	IIIIE SV		349,300

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

70,070

Part VI instructions

Enter qualifying distributions from Part XII, line 4

1a b c 2 3 4 5 6 a b c d 7 8 9 10 11	Excise Tax Based on Investment Income (Section 4940(a), 4940(e), or 4948 – see instructions) 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) Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1% of Part I, line 27b All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b) Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0- Credits/Payments: 2014 estimated tax payments and 2013 overpayment credited to 2014 Exempt foreign organizations – tax withheld at source Tax paid with application for extension of time to file (Form 8868) Backup withholding erroneously withheld Total credits and payments Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be: Credited to 2015 estimated tax for local legislation or did it				92 0 92 0 92 706
b c 2 3 4 5 6 a b c d 7 8 9 10 111 Pa	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions) Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ X and enter 1% of Part I, line 27b All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b) Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0- Credits/Payments: 2014 estimated tax payments and 2013 overpayment credited to 2014 Exempt foreign organizations — tax withheld at source Tax paid with application for extension of time to file (Form 8868) Backup withholding erroneously withheld Total credits and payments Add lines 6a through 6d Total credits and payments Add lines 6a through 6d Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ 61.4 Refunded ▶ 11 **Total Credits Refunded ▶ 12 **Total Credits amount of line 10 to be: Credited to 2015 estimated tax ▶ 61.4 Refunded ▶ 11 **Total Credits amount of line 10 to be: Credited to 2015 estimated tax ▶ 61.4 Refunded ▶ 11 **Total Credits amount of line 10 to be: Credited to 2015 estimated tax ▶ 61.4 Refunded ▶ 11				0 92 0 92
c 2 3 4 5 6 a b c d 7 8 9 110	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► X and enter 1% of Part I, line 27b All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b) Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax based on investment Income. Subtract line 4 from line 3 if zero or less, enter -0- Credits/Payments: 2014 estimated tax payments and 2013 overpayment credited to 2014 Exempt foreign organizations – tax withheld at source Tax paid with application for extension of time to file (Form 8868) Backup withholding erroneously withheld Total credits and payments Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be: Credited to 2015 estimated tax ► 614 Refunded ► 11 12 13 14 15 15 16 17 16 17 17 18 18 19 19 10 11 11 11 11 11 11 11				0 92 0 92
c 2 3 4 5 6 a b c d 7 8 9 110	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b) Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0- Credits/Payments: 2014 estimated tax payments and 2013 overpayment credited to 2014 Exempt foreign organizations – tax withheld at source Tax paid with application for extension of time to file (Form 8868) Backup withholding erroneously withheld Total credits and payments Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be: Credited to 2015 estimated tax **Tax** Statements Regarding Activities**				0 92 0 92
2 3 4 5 6 a b c d 7 8 9 10 11	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b) Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax based on investment Income. Subtract line 4 from line 3 If zero or less, enter -0- Credits/Payments: 2014 estimated tax payments and 2013 overpayment credited to 2014 Exempt foreign organizations – tax withheld at source Tax paid with application for extension of time to file (Form 8868) Backup withholding erroneously withheld Total credits and payments Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be: Credited to 2015 estimated tax Statements Regarding Activities				92 0 92 706
2 3 4 5 6 a b c d 7 8 9 10 11	Part I, line 12, col. (b) Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- Credits/Payments: 2014 estimated tax payments and 2013 overpayment credited to 2014 Exempt foreign organizations – tax withheld at source Tax paid with application for extension of time to file (Form 8868) Backup withholding erroneously withheld Total credits and payments Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be: Credited to 2015 estimated tax 614 Refunded 11 **YII-A Statements Regarding Activities*				92 0 92 706
3 4 5 6 a b c d 7 8 9 10 11	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- Credits/Payments: 2014 estimated tax payments and 2013 overpayment credited to 2014 Exempt foreign organizations – tax withheld at source Tax paid with application for extension of time to file (Form 8868) Backup withholding erroneously withheld Total credits and payments Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be: Credited to 2015 estimated tax Statements Regarding Activities				92 0 92 706
3 4 5 6 a b c d 7 8 9 10 11	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- Credits/Payments: 2014 estimated tax payments and 2013 overpayment credited to 2014 Exempt foreign organizations – tax withheld at source Tax paid with application for extension of time to file (Form 8868) Backup withholding erroneously withheld Total credits and payments Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ 614 Refunded ▶ 11 It VII-A Statements Regarding Activities				92 0 92 706
4 5 6 a b c d 7 8 9 10 11 Pa	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- Credits/Payments: 2014 estimated tax payments and 2013 overpayment credited to 2014 Exempt foreign organizations – tax withheld at source Tax paid with application for extension of time to file (Form 8868) Backup withholding erroneously withheld Total credits and payments Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be: Credited to 2015 estimated tax Statements Regarding Activities				0 92 706
5 6 a b c d 7 8 9 10 11 Pa	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- Credits/Payments: 2014 estimated tax payments and 2013 overpayment credited to 2014 Exempt foreign organizations – tax withheld at source Tax paid with application for extension of time to file (Form 8868) Backup withholding erroneously withheld Total credits and payments Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ 614 Refunded ▶ 11 It VII-A Statements Regarding Activities				706
6 a b c d 7 8 9 10 11 Pa	Credits/Payments: 2014 estimated tax payments and 2013 overpayment credited to 2014 Exempt foreign organizations – tax withheld at source Tax paid with application for extension of time to file (Form 8868) Backup withholding erroneously withheld Total credits and payments Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ 614 Refunded ▶ 11 It VII-A Statements Regarding Activities				706
a b c d 7 8 9 10 11 Pa	2014 estimated tax payments and 2013 overpayment credited to 2014 Exempt foreign organizations – tax withheld at source Tax paid with application for extension of time to file (Form 8868) Backup withholding erroneously withheld Total credits and payments Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ 614 Refunded ▶ 11 It VII-A Statements Regarding Activities				
b c d 7 8 9 10 11	Exempt foreign organizations – tax withheld at source Tax paid with application for extension of time to file (Form 8868) Backup withholding erroneously withheld Total credits and payments Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be: Credited to 2015 estimated tax Statements Regarding Activities				
c d 7 8 9 10 11	Tax paid with application for extension of time to file (Form 8868) Backup withholding erroneously withheld Total credits and payments Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ 614 Refunded ▶ 11 It VII-A Statements Regarding Activities				
d 7 8 9 10 11 Pa	Backup withholding erroneously withheld Total credits and payments Add lines 6a through 6d Total credits and payments Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be: Credited to 2015 estimated tax 614 Refunded 11 Tt VII-A Statements Regarding Activities				
7 8 9 10 11 Pa	Total credits and payments Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ 614 Refunded ▶ 11 It VII-A Statements Regarding Activities				
8 9 10 11 Pa	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be: Credited to 2015 estimated tax 614 Refunded 11 TVII-A Statements Regarding Activities				
9 10 11 Pa	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ 614 Refunded ▶ 11 It VII-A Statements Regarding Activities		, , , , , , , , , , , , , , , , , , , ,		<u>514</u>
10 11 Pa	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ 614 Refunded ▶ 11 It VII-A Statements Regarding Activities				614
11 Pa	Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ 614 Refunded ▶ 11 It VII-A Statements Regarding Activities				<u>614</u>
Pa	rt VII-A Statements Regarding Activities	F			
		E			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it				
		ŀ		Yes	_No
	participate or intervene in any political campaign?	- 1	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see				
	Instructions for the definition)?	Ļ	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
	published or distributed by the foundation in connection with the activities.				
C	Did the foundation file Form 1120-POL for this year?	ļ	1c		X
d	, , , , , , , , , , , , , , , , , , ,				
	(1) On the foundation. ▶ \$ (2) On foundation managers ▶ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers. > \$				į
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	Ļ	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 instrument, articles of			1	Ė
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	ļ	3	\vdash	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	'A	4b	\longrightarrow	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	ļ	5	<u></u>	X
	If "Yes," attach the statement required by General Instruction T.				į
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				į
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that				Í
	conflict with the state law 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	Į	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) NONE				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				Ė
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	[8b	x	Ĺ
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or				
	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"	ſ		l I	
	complete Part XIV	į	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	ſ			
	names and addresses		10		X

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Pa	rt 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		X
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	X	
	Website address ► N/A					
14		hone no. 🕨	423-6	38-	814	4
	185 SERRAL DRIVE					
	Located at ► GREENEVILLE TN	ZIP+4 ▶	37745			
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	▶ _	15			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority				Yes	No
	over a bank, securities, or other financial account in a foreign country?			16		<u> </u>
	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 foreign country	-				<u> </u>
<u> Pa</u>	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required					
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.				Yes	No
1a	During the year did the foundation (either directly or indirectly):					
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	С	चि क्			
	disqualified person?	Yes	X No			
	(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	□ v	₹			
	the benefit or use of a disqualified person)?	Yes	X No			
	(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	□ vee	X No			
h	termination of government service, if terminating within 90 days.)	∐ Yes	X No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulation	5	N/A	1b		Ī
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here		▶ □	10		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that					
٠	were not corrected before the first day of the tax year beginning in 2014?		N/A	1c	1	Ī
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		-1/	-'-		
-	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):					
а	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 ▶ 20 , 20 , 20					
b	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		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here					
	▶ 20 , 20 , 20					
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise					
	at any time during the year?	Yes	X No			
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		!-			ŧ
	foundation had excess business holdings in 2014)		N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its					
_	chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014	7		_ 4b	20.5	<u> </u>
				om 3	7U-1	F (2014)

Pa	990-PF (2014) JOHN M AND ARNOLD S JONES FAMI † VII-B Statements Regarding Activities for Which Form			nued)		Page
	During the year did the foundation pay or incur any amount to:	1 47 20 May Bo INC	danea (conti	ilucu)		
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4	1945(e))?		Yes X No		
	(2) Influence the outcome of any specific public election (see section 4955); or t	to carry on,	_	_		1
	directly or indirectly, any voter registration drive?	• .	□,	Yes X No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?		Π,	Yes 🗓 No		I
	(4) Provide a grant to an organization other than a charitable, etc., organization	described in		_		1
	section 4945(d)(4)(A)? (see instructions)		П,	Yes X No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or	r educational		_		
	purposes, or for the prevention of cruelty to children or animals?		\Box	Yes X No		
•	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under	er the exceptions desc	ribed in			
	Regulations section 53 4945 or in a current notice regarding disaster assistance	(see instructions)?		N/A	5b	
	Organizations relying on a current notice regarding disaster assistance check he			▶ 🗀		
;	If the answer is "Yes" to question 5a(4), does the foundation claim exemption fro	om the tax				
	because it maintained expenditure responsibility for the grant?		N/A 🗍 ,	Yes No		I
	If "Yes," attach the statement required by Regulations section 53.4945–5(d).			_		
a	Did the foundation, during the year, receive any funds, directly or indirectly, to pa	y premiums				1
	on a personal benefit contract?	• .	Π,	Yes X No		I
)	Did the foundation, during the year, pay premiums, directly or indirectly, on a per	rsonal benefit contract?	?		6b	x
	If "Yes" to 6b, file Form 8870.					
а	At any time during the tax year, was the foundation a party to a prohibited tax sh	elter transaction?		Yes X No		
	If "Yes," did the foundation receive any proceeds or have any net income attribu		1?	N/A	7ь	Ī
	t VIII Information About Officers, Directors, Trustees, F			Paid Employe	es.	•
	and Contractors				·	
L	st all officers, directors, trustees, foundation managers and their compen	sation (see instruction	ons).			
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (if not paid,	(d) Contributions to employee benefit		pense account
	•	devoted to position	`enter -0-)´	plans and deferred compensation	otne	r allowances
SE	STATEMENT 8					
						-
2	Compensation of five highest-paid employees (other than those included "NONE."	on line 1 – see instru	uctions). If none,	, enter		
	(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		pense account er allowances
NO	TE.					
						*
_					 	
		<u> </u>				

orm 990-PF (2	614) JOHN M AND ARNOLD S JONES FAMILY	62-1839619	Page 7
Part VIII	Information About Officers, Directors, Trustees, Foun and Contractors (continued)	dation Managers, Highly Paid En	
3 Five high	est-paid independent contractors for professional services (see instr	ructions). If none, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
			
		1	
	The second secon		
otal number o	f others receiving over \$50,000 for professional services		•
Part IX-A	Summary of Direct Charitable Activities		30 3003
	n's four largest direct chantable activities during the tax year. Include relevant statistical information si other beneficianes served, conferences convened, research papers produced, etc.	uch as the number of	Expenses
1 N/A		**************************************	
			
2			
3	and the same of th	· · · · · · · · · · · · · · · · · · ·	
J			
4			
*****			<u></u>
Part IX-B	Summary of Program-Related Investments (see insti	ructions)	T
1 N/A	largest program-related investments made by the foundation during the tax year on lines 1 and 2	 	Amount
1 21/22			
2			
All other program	-related investments. See instructions		
3			
Total. Add line	s 1 through 3		1

Forr	m 990-PF (2014) JOHN M AND ARNOLD S JONES FAMILY 62-1839619		Page 8
P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	foundations,	-
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	1 _a	657,428
b		1b	18,613
С	Fair market value of all other assets (see instructions)	1c	0
d		1d	676,041
е			
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	1 2]	0
3	Subtract line 2 from line 1d	3	676,041
4	Cash deemed held for charitable activities. Enter 1½% of line 3 (for greater amount, see		
	instructions)	4	10,141
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	665,900
6	Minimum investment return. Enter 5% of line 5	6	33,295
p	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f	oundations	
	and certain foreign organizations check here ▶ ☐ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	33,295
2a			
b		1 1	
С	· · · · · · · · · · · · · · · · · · ·	1 2c]	92
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	33,203
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	33,203
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	33,203
10		· · · · · · · · · · · · · · · · · · ·	
		1	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		50 050
а		1a	70,070
b		1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	1	
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
ь	,	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	70,070
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	92
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	69,978
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	n	
	qualifies for the section 4940(e) reduction of tax in those years.		

Pa	rt XIII Undistributed Income	(see instructions)				
			(a)	(b)	(c)	(d)
1	Distributable amount for 2014 from Part XI,		Corpus	Years pnor to 2013	2013	2014
	line 7			***************		33,203
2	Undistributed income, if any, as of the end	of 2014.	I			
	Enter amount for 2013 only					
	Total for prior years 20 , 20				,	
3	Excess distributions carryover, if any, to 20	1	1			
	From 2009	10,937	1			
b	From 2010	20,115				
C	From 2011	12,944				
d	From 2012	16,142				
8	From 2013	24,095				
f	Total of lines 3a through e	ļ.	84,233			
4	Qualifying distributions for 2014 from Part	KII,	I			
	line 4: ▶ \$		1			
	Applied to 2013, but not more than line 2a			- No N N N N N N N.		
b	Applied to undistributed income of prior year	ars	1			
	(Election required – see instructions)		·····			
С	Treated as distributions out of corpus (Elec	ction				
	required – see instructions)	ļ				
d	Applied to 2014 distributable amount		26.067			33,203
- e	Remaining amount distributed out of corpu	ř	36,867			
5	Excess distributions carryover applied to 2					
	(If an amount appears in column (d), the sa	ame				
	amount must be shown in column (a))					
6	Enter the net total of each column as					
_	indicated below:		121,100	;		
a	Corpus. Add lines 3f, 4c, and 4e. Subtract	F	121,100	4-01 / .01 / 1		
D	Prior years' undistributed income Subtract line 4b from line 2b					
_		lo d				
C	Enter the amount of prior years' undistribut					
	income for which a notice of deficiency has been issued, or on which the section 4942	•				
	tax has been previously assessed	(a)				
d				 		
u	amount – see instructions					
e		ne .			4 - 11 - 1 - 1	
Ŭ	4a from line 2a Taxable amount – see					
	instructions					
f	Undistributed income for 2014. Subtract lin	nes	11 11 11 11			
-	4d and 5 from line 1. This amount must be					
	distributed in 2015					o
7	Amounts treated as distributions out of cor	pus			···	
	to satisfy requirements imposed by section	1				
	170(b)(1)(F) or 4942(g)(3) (Election may b	е				
	required—see instructions)			,,		
8	Excess distributions carryover from 2009 r	not				
	applied on line 5 or line 7 (see instructions		10,937			
9	Excess distributions carryover to 2015					
	Subtract lines 7 and 8 from line 6a		110,163			
10	Analysis of line 9			-		
а	Excess from 2010	20,115				
b	Excess from 2011	12,944				
С	Excess from 2012	16,142				
d	Excess from 2013	24,095				
e	Excess from 2014	36,867				

Form 990-PF (2014) JOHN M AND ARNOLD S JONES FAMILY 62-1839619

Page 9

		RNOLD S JO	NES FAMILY	62-18396	519	Page 1
********	rt XIV Private Operating Fou					rage i
1a	If the foundation has received a ruling or d					
	foundation, and the ruling is effective for 2			` ▶		
ь	Check box to indicate whether the foundat			d in section 4	942(j)(3) or 4942	(ı)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
	investment return from Part X for					
	each year listed					
b	85% of line 2a					
C	Qualifying distributions from Part XII,					
	line 4 for each year listed					
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities				<u></u>	
е	Qualifying distributions made directly					
	for active conduct of exempt activities.					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon:					
а	"Assets" alternative test – enter:					
	(1) Value of all assets			<u> </u>		
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
þ	"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				1	
P	ert XV Supplementary Inform			the foundation ha	ad \$5,000 or more i	in assets at
	any time during the ye		ctions.)	 .		
1	Information Regarding Foundation Ma	-				
а	List any managers of the foundation who			·	the foundation	
	before the close of any tax year (but only	if they have contribut	ed more than \$5,000). (\$	See section 507(d)(2))		
	JOHN M JONES					
Ь	List any managers of the foundation who		•		ortion of the	
	ownership of a partnership or other entity	of which the foundar	tion has a 10% or greate	r interest.		
	NONE			 		
2	Information Regarding Contribution, C					
			to preselected charitable	=		
	unsolicited requests for funds If the found		ants, etc. (see instruction	ns) to individuals or org	anizations under	
	other conditions, complete items 2a, b, c,					· · · · · · · · · · · · · · · · · · ·
а	The name, address, and telephone numb		of the person to whom a	pplications should be a	ddressed	
	GREGG K. JONES 423-6		TTT III 1 2774	•		
_	100 OLD ORCHARD DRIV					
b	The form in which applications should be	submitted and inform	nation and materials they	should include:		
	BY LETTER					
C	Any submission deadlines.					
_	DECEMBER 15TH			de la		
d	Any restrictions or limitations on awards,	such as by geograph	ical areas, charitable fiel	ds, kinds of institutions,	, or other	
	factors					
_	NONE					- 000 DE

Total			▶ 3b	200 27
	1	<u> </u>	1	
			1	
N/A				
b Approved for future payment			- Ja	,0,07
Total		<u> </u>	▶ 3a	70,07
		1		
				70,070
SEE STATEMENT 9				
a Paid during the year				
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
Recipient	if recipient is an individual, show any relationship to	Foundation	Purpose of grant or	A
Part XV Supplementary Information (co 3 Grants and Contributions Paid During the	Year or Approved for Fu	ture Payment		
Part XV Supplementary Information (co	entinued)			

Enter gross amo	Analysis of Income-Producing Analysis of Inco		business income	Excluded by s	ection 512, 513, or 514	(e)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
1 Program ser						(888 1184 2848118)
а b		_		+ +		
		-				
d		_		+ +		
е		-	·			
f		-		- 		
g Fees an	d contracts from government agencies		· · · · · · · · · · · · · · · · · · ·			
	dues and assessments					
	savings and temporary cash investments			14	131	
	nd interest from securities			14	14,491	
5 Net rental in	come or (loss) from real estate:					
	anced property					
	t-financed property					
	come or (loss) from personal property					
7 Other invest						
8 Gain or (loss	s) from sales of assets other than inventory					38,971
9 Net income	or (loss) from special events					
0 Gross profit	or (loss) from sales of inventory					
11 Other reven	ue: a	_				
		_				
		_				
d		_				
e				_		
12 Subtotal. Ad	ld columns (b), (d), and (e)		··	0	14,622	38,971
	ine 12, columns (b), (d), and (e)				13	53,593
	In line 13 instructions to verify calculations)	A = = = = = !:= != = = =	-4 -4 F	D		
Part XVI-B	· · · · · · · · · · · · · · · · · · ·					
Line No. ▼	Explain below how each activity for which incom accomplishment of the foundation's exempt purp					
N/A	accomplishment of the realization of exempt par	podeo (other triali by	providing fands to	- sacri parposec	by: (Occ manacions)	
						
			•			
-				· · · · · · · · · · · · · · · · · · ·		
					•	
						
· · ·						
		-				
					· · · · · · · · · · · · · · · · · · ·	

Part XVII		Irding Transfers To and		nd Relationships With	Noncharitable	Page 13
TO PERSON TO BE	Exempt Organiza	_				
1 Did the orga		ectly engage in any of the follow	ing with any other or	anization described		Yes No
		than section 501(c)(3) organiza				3 3 3 3 A
organization	ns?					
a Transfers fr	rom the reporting founda	tion to a noncharitable exempt o	organization of:			
(1) Cash	,			,		1a(1) X
(2) Other a						1a(2) X
b Other trans						
(1) Sales o	of assets to a noncharital	ble exempt organization	. ,			16(1)
(2) Purcha	ses of assets from a nor	ncharitable exempt organization				1b(2) X
(3) Rental	of facilities, equipment, o	or other assets				1b(3) X
	ursement arrangements				- , ,	1b(4) X
(5) Loans	or loan guarantees		•			1b(5) X 1b(6) X
		mbership or fundraising solicitat			, ,	
		iling lists, other assets, or paid a				1c X
		"Yes," complete the following so				
	- .	r services given by the reporting				
(a) Line no.	(b) Amount involved	arrangement, show in column (c) (c) Name of noncharitable examp		ods, Other Basets, or services r (d) Description of transfers, tra		Engaments
A/R	Tol Annual Street	(c) realist or resident trains trains		(4)		
3/ A		 		· · · · · · · · · · · · · · · · · · ·	 	
·		<u> </u>				
						
						
7.11.2						
				·		
 					-··-	
	1					
					•	
		1				
described				?	tion of relationship	Yes X No
N/A						
					haranda	10.4-10
Under	penalties of perjuty, I declare to I, and complete. Declaration of	het I have exemined this return, including preparer (other then texpayer) is based	paccompanying achedules on all information of which	and siztements, and to the best of my preparer has any knowledge.		
1	14	\sim			May the IRS dis- with the prepare	
Sign	(24)		_		(see instructions	
Here	J- who	Mu	16/2	9/2015 SECR	ETARY	<u> </u>
 	Vie di		-	Title	GETAIKI	
	Signature of officer or trustee		Date			<u> </u>
Prin	s/Type preparer's name		Preparer's signature	M. Whigh	Certe	Check if
Paid	NOT M VOC		1 / Sarry	No Wrigh	ا م	elf-amployed
Preparer	RY M. WRIGHT	FER MOSS & CO,	PT.T.C		PTIN 100/2	.0/ 13]
Use Only	105	SERRAL DRIVE			Firm's EIN	· · · · · · · · · · · · · · · · · · ·
Flex			745			3-638-8144
	GREE			 	T LIMINATURE A GR	Form 990-PF (2014
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Federal Statements 927446 JOHN M AND ARNOLD S JONES FAMILY

Page 1

62-1839619 FYE: 12/31/2014

Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets

			How					
Dei	Description		Received					
Whom Sold	Date Acquired	Date Sold	Sale Price	Cost	Expense	Depreciation	ඊ	Net Gain / Loss
90 SH VNGD CONSUMER	4/20/09	4/17/14 \$	PURCHASE 10,063 \$	4,816 \$		S	٠	5,247
105 SH VNGD TOTAL US	S 4/20/09	4/28/14	PURCHASE	4,392				5,723
90 SH VNGD CONSUMER			PURCHASE	910				F 633
100 SH VNGD MID CAP ET		6/09/14	10,449 PURCHASE	4,610				CC0 1C
GKO TIKMO GOINT HO OR	4/20/09	9/08/14	12,122 PIIRCHASE	4,244				7,878
SO SH VNGD SHALL CAF	4/20/09	9/08/14	5,820	2,007				3,813
55 SH VNGD SMALL CAP	4/20/09		PURCHASE 6.402	2.208				4,194
80 SH VNGD MID CAP ET		1	PURCHASE					
	4/20/09	4/20/09 12/01/14	9,878	3,395				6,483
TOTAL		ۍ ^ا	64,849 \$	25,878 \$	0	\$	ς, I	38,971

Charitable Purpose	φ.	0 \$
Adjusted Net	w	0
Net Investment	3,296 1,750	5,046
<u>[</u>	ς	တ
Total	3,296 1,750	5,046
	ᡐ	က က
Description	MANAGEMENT FEES - SCHWAB ACCOUNTING	TOTAL

Statement 2 - Form 990-PF, Part I, Line 16c - Other Professional Fees

927446 JOHN M AND ARNOLD S JONES FAMILY 62-1839619 FYE: 12/31/2014	D ARNOLD S JONE	1.	Federal Statements		6/26/2015 2:00 PM Page 2
	31	Statement 3 - Form 990-	Form 990-PF, Part I, Line 18 - Taxes	axes	•
Description	tion	Total	Net Investment	Adjusted Net	Charitable Purpose
TN TAXES FOREIGN TAXES TOTAL		\$ 20 363 \$ 383	\$ 20	\$ \$	\$
	Statement 4 - Fo	Statement 4 - Form 990-PF, Part I, Line 25 - Noncash Contributions, Gifts, Grants	25 - Noncash Contril	outions, Gifts, Grants	
Amount	Noncash Description	FMV Explanation	Book Value Amount	Book Value Explanation	Date
1,000 1,000 100 175 500					9/11/14 5/11/14 5/08/14 11/03/14
465 75 100					12/17/14 9/02/14 8/19/14
6,230 2,000 1,000 300					12/01/14 12/01/14 3/05/14 5/11/14
125 1,000 1,600					10/13/14 9/29/14 3/13/14 6/24/14
2,500 100 100					6/17/14 7/29/14 7/29/14
10,000 100 100 100 1,000					0/23/14 4/25/14 7/29/14 9/01/14 11/03/14
180 100					//14/14 7/07/14
					3-4

٠.

6/26/2015 2:00 PM Page 3	, , , , , , , , , , , , , , , , , , ,	Date 6/30/14 1/21/14 2/13/14 11/13/14 6/12/14 9/11/14 4/21/14		Fair Market Value \$ 640,968 \$ 640,968	4-5
	t I, Line 25 - Noncash Contributions, Gifts, Grants (continued)	Book Value Explanation	Stock Investments	Basis of Valuation 046 046 COST	
deral Statements	5 - Noncash Contril nued)	Book Value Amount	Part II, Line 10b - Corporate Stock Investments	End of Year \$ 322,046 \$ 322,046 \$ 322,046	
Fe	- Form 990-PF, Part I, Line 2	FMV Explanation	- Form 990-PF, Part II, Li	r wolli	
927446 JOHN M AND ARNOLD S JONES FAMILY 62-1839619 FYE: 12/31/2014	Statement 4 - Form	Noncash Description	Statement 5 - Fo	ion	
927446 JOHN M AN 62-1839619 FYE: 12/31/2014		Amount 1,000 12,000 2,000 1,000 10,100 5,000 4,000 5,000		STOCK HELD AT SCHWAB TOTAL	

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	Description	An	nount
STOP PAYMENT		\$\$	150
TOTAL		\$	150

Statement 7 - Form 990-PF, Part III, Line 5 - Other Decreases

Description	Amount
FEDERAL INCOME TAXES PAID	\$ 2,139
TOTAL	\$ 2,139

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Statement 8 - Form 990-PF, Par	-PF, Part VIII, Line	1 - List of Of	t VIII, Line 1 - List of Officers, Directors, Trustees, Etc.	ustees, Etc.	٠
Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
JOHN M JONES 185 SERRAL DRIVE GREENEVILLE TN 37745	PRES, CHM, MGR	00.00	0	0	0
ARNOLD S JONES 185 SERRAL DRIVE GREENEVILLE TN 37745	DIRECTOR	0.00	0	0	0
JOHN M JONES IV 441 WEST MAIN STREET GREENEVILLE TN 37743	TREASURER	0.00	0	0	0
ALEX S JONES ONE WATERHOUSE ST, APT 61 CAMBRIDGE MA 02138	DIRECTOR	00.00	0	0	0
GREGG K JONES 100 OLD ORCHARD DRIVE GREENEVILLE IN 37743	SECRETARY	0.00	0	0	0
EDITH S JONES 4380 BROOKHAVEN DRIVE ATLANTA GA 30319	DIRECTOR	0.00	0	0	0
SARAH J HARBISON 1516 CRESTWOOD DRIVE GREENEVILLE TN 37745	DIRECTOR	0.00	0		0
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Form 990-PF, Part XV, Line 1a - M	anagers Who Contributed Over 2% or \$5,000
Name of Manager	Amount
JOHN M JONES	\$
TOTAL	\$0
Form 990-PF, Part XV, Line 1b	- Managers Who Own 10% or More Stock
Name of Manager	Amount
NONE	\$
TOTAL	\$0
Form 990-PF, Part XV, Line 2b -	Application Format and Required Contents
Description	
BY LETTER	
Form 990-PF, Part XV	, Line 2c - Submission Deadlines
Description	
Description DECEMBER 15TH	
DECEMBER 15TH	2d - Award Restrictions or Limitations
DECEMBER 15TH	2d - Award Restrictions or Limitations

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Statement 9 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

Name		Address	1			
Address	Relationship	Status		Purpose	Amount	1
AMERICAN HEART ASSOCIATION OMAHA NE 68127	10100 J ST	STREET #A PUBLIC	GENERAL		100	00
BOYS & GIRLS CLUB OF GREE	PO BOX 1977	71			,	-
GREENEVILLE TN 37744		PUBLIC CHARI	GENERAL	PUBLIC CHARI GENERAL CHARITABLE WORK	1,000	0
FUND	3375 OLD 3	JONESBOROUGH RD	D General		100	00
CHUCKEI IN 3/041 CENTRAL RALLET THEATRE	120 WEST	SUMMER STREET)
743		PUBLIC CHARI	GENERAL	GENERAL CHARITABLE	175	75
7	625 MARKET	r ST, SUITE 1400	00		CCu	-
KNOXVILLE TN 37902 NO	NONE PUE	PUBLIC 630	GENERAL		006	2
EAST IN SOCIETI OF FROE SOUNMELSTS GREENEVILLE IN 37744 NONE		PUBLIC	GENERAL		465	65
	408 SOUTH	щ				
	NONE	PUBLIC	GENERAL		100	00
S	P.O. BOX 1630	1630			C	Ü
		PUBLIC	GENERAL			رد <i>ا</i>
SSNIX	BOOST 130 WILDWOOD COURT	OD COURT				-
1	NONE	PUBLIC	GENERAL		707	2
CTR	P.O. BOX 1630	[630 Purit C Curret	Tedana) H 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0169	2
GREENEVILLE TN 3//44 GREENE CO COMMINITY MINISTRIES CC	NONE COAL P.O. BOX	PUBLIC CHAKI 1630	GENEKAL CHAKIII	CHAKIII	707.0	2
37744		PUBLIC CHARI	GENERAL	GENERAL CHARITABLE	2,000	00
GREENEVILLE CITY SCHOOLS EDUCATION	P.O. BOX	1420			,	(
GREENEVILLE IN 37744 NO		PUBLIC CHARI	GENERAL		1,000	00
GREENEVILLE LIONS CLUB (FAMILY KIDS GREENEVILLE IN 37744-0776 NONE	. P.O. BOX	776 PUBLIC	GENERAL		300	00
	433 EAST	VANN ROAD				
37743		PUBLIC CHARI	GENERAL	GENERAL CHARITABLE	125	25
FOR CHILDREN	P.O. BOX	188	TEGUENE	G LA WHEN THE	700 1	
GREENEVILLE IN 3//44 NO	NONE 330 BROAD	STREET SUITE	GENERAL #1	GENEKAL CAAKIIABLE #1	000 17	>
)	PUBLIC CHARI	GENERAL	GENERAL CHARITABLE	1,600	00
LIVING HERITAGE MUSEUM ATHENS IN 37371 NO	PO BOX 889 NONE	PUBLIC CHARI	GENERAL	GENERAL CHARITABLE	200	00

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Statement 9 - Form	990-PF, Part XV, Lin Yea	Line 3a - Grants Year (continued)	nts and C	Statement 9 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)	
Name	Address	SS	ļ		
Address	Relationship	Status		Purpose	Amount
	310 SOUTH N	MAIN STREET	CENERAL.	GENERAI. CHARITARI.F.	2,500
GREENEVILLE IN 37743 NONE WEDDIII'S MARAIIDERS ASSOC INC	111 KRAMER		מבאות אותים		
11757	1	IC	GENERAL		100
MULTIPLE SCLEROSIS ASSOC OF AMERICA	A 706 HADDONFIELD RD.	S RD.	GENERAL		100
SEUM	101 WEST	NCKEE STREET			,
		IC	GENERAL		100
NISWONGER PERFORMING ARTS CIR GREENEVILLE IN 37744 NONE	F.U. BUA /2/	IC	GENERAL		10,000
	2780 HOLLEN	SEK RD			1
GREENEVILLE TN	PUBLIC 1070 NOPTH PANCHO	IC CHARI GE	GENERAL	GENERAL CONTRIBUTION	100
SAIN BERNADING CAVE RESCUE LEAT ORANGE CA 92869	TO NOW I		GENERAL		100
	PO BOX 3010 CRS	70			,
JOHNSON CITY IN 37602 NONE		PUBLIC CHARI	GENERAL	GENERAL CHARITABLE	1,000
	P.O. BOX 26	, t	TAGGINGO	ה זמאחד מאווס	180
	נתמתאווי כוג	PUBLIC CHAKI	GENEKAL	GENERAL CHARLIABLE	707
ST JOHN'S CATHEDRAL ALTAR GULLD KNOXVILLE IN 37902 NONE	413 CUMBERLAND AVE PUBLIC	AVE IC	GENERAL		100
CHURCH	717 SAGE RO				
HOUSTON TX 77056 NONE		IC	GENERAL		100
	PO BOX 163		CENTEDAT	CENEDAL COMBDIBITON	1 000
GREENEVILLE IN 37/44 NONE TENNESSEE DEESS ASSOCIATION	435 MONTER	DALLON ANE	denamana 1		222/1
TENNESSEE FRESS ASSOCIATION NONE KNOXVILLE IN 37919		IC	GENERAL		12,000
S OPEN G	P.O. BOX 22	į			c
NASHVILLE TN 37202 NONE	PUBLIC 435 MONTEROOK LANE	IC	GENERAL		000,7
TENNESSEE FRESS ASSOCIATION NONE KNOXVILLE IN 37919		PUBLIC CHARI	GENERAL	GENERAL CHARITABLE	1,000
TENNESSEE PRESS ASSOCIATION	435 MONTBROOK LANE	ANE	GENERAT.		10,100
21616	P.O. BOX 5() 1			
GREENEVILLE TN 37743 NONE		PUBLIC CHARI	GENERAL	GENERAL CHARITY	5,000

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Statement 9 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

	Amount	,	4,000		100				2,000		100	70,070
	Purpose		NION				3LE		3LE			
ļ			PUBLIC CHARI GENERAL CONTRIBUTION		GENERAL		GENERAL CHARITABLE		PUBLIC CHARI GENERAL CHARITABLE		GENERAL	
Address	Status	115 ACADEMY STREET	PUBLIC CHARI	8TH AVE S.	PUBLIC	2061 KENTUCKY AVE	PUBLIC CHAR	MAIN ST	PUBLIC CHARI	1520 MCKITTRICK ST	PUBLIC	
	Relationship	115 ACADE	F-3	1207 18TF	r1	2061 KENT	r-3	615 WEST MAIN ST	r1	1520 MCK	6-3	
	R		NONE	MENT CTR	NONE		16 NONE		NONE	OD OD	NONE	
Name	Address	UNITED WAY OF GREENE COUNTY	GREENEVILLE TN 37743	VANDERBILT UNIV-1ST AMENDMENT	NASHVILLE TN 37212	VESTAVIA HILLS UMC	VESTAVIA HILLS AL 35216	VOLUNTEER CENTER OF GREEN	GREENEVILLE TN 37743	WENATCHEE FIRST ASSY OF GOD	WENATCHEE WA 98801	TOTAL

(9) (10) Totals

Form 990-PF	Oth	er Notes and	Loans Receiva	ans Receivable			
	For calendar year 2014, or	r tax year beginning		and ending	2014		
Name	RNOLD S JONES FI			Emp	loyer Identification Number		
FOUNDATION	MOLD S JUNES FI			-1839619			
FORM 990-PF,	PART II, LINE	7 - ADDITIC	ONAL INFORMA	TION	. 9/ #W		
	Name of borrower			Relationship to disqualifie	d person		
1) LOAN RECEI							
(2)	, 			 	· · · · · · · · · · · · · · · · · · ·		
(3)	 						
(4) (5)					· · · · · · · · · · · · · · · · · · ·		
(6)				·			
(7)							
(8)							
(9)							
(10)		······································		······································			
Original amour borrowed	nt Date of loan	Maturity date		Repayment terms	Interest rate		
(1)	Date of loan	date	· · · · ·	vepayment terms	Tate		
(2)							
(3)							
(4)							
(5)		<u> </u>					
(6)			_				
(7)				·			
(8) (9)							
(10)							
Se	ecurity provided by borrower			Purpose of loan			
(1)							
(2)							
(3)	 		<u> </u>		·		
(4) (5)		 					
(6)				 			
(7)							
(8)							
(9)		·					
(10)							
			Balance due at	Balance due at	Fair market value		
(1) Conside	ration furnished by lender		beginning of year 11,000	end of year 6,000	6,000		
(2)				3,300	5,000		
(3)		_ ~					
(4)							
(5)							
(6)				-			
(7)					 		
(8)		1		1	1		

11,000

6,000

6,000