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Form 990-PF

Department of the Treasury

Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public.

2014

OMB No 1545-0052

▶ Information about Form 990-PF and its separate instructions is at www.irs gov/form990pf. Open to Public Inspection Internal Revenue Service For calendar year 2014 or tax year beginning 2014, and ending 20 A Employer identification number J MARIE REYNOLDS CHARITABLE TRUST 62-6379882 Number and street (or P O box number if mail is not delivered to street address) Telephone number (see instructions) Room/suite P O BOX 23810 423-499-8116 If exemption application is pending, check here City or town, state or province, country, and ZIP or foreign postal code CHATTANOOGA TN 37422 G Check all that apply Initial return Initial return of a former public charity Foreign organizations, check here Foreign organizations meeting the 85% test check here and attach computation Final return Amended return If private foundation status was Address change Name change terminated under section Check type of organization X Section 501(c)(3) exempt private foundation 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation J Accounting method X Cash If the foundation is in a 60-month I Fair market value of all assets at end of Accrual 20 termination under section year (from Part II, col (c), line 16) Other (specify) 507(b)(1)(B), check here Ø 220,520. (Part I, column (d) must be on cash basis) ▶ \$ Part I Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), for charitable expenses per 買 and (d) may not necessarily equal the purposes income income amounts in column (a) (see instructions) books (cash basis only) Contributions, gifts, grants, etc., received SCANNED (attach schedule) if the foundation is **not** required to attach Schedule B Check ▶ 1,006. 1,006. Interest on savings and temporary cash investments Dividends and interest from securities 5a Gross rents b (Net rental income or (loss) 6a Net gain/(loss) from sale of assets not on line 10 Revenue Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) Net short-term capital gain . . Income modifications 10a Gross sales less returns and allowance: Less Cost of oods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 1,006. 1,006. 12 Total. Add lines 1 through 11 Compensation of officers, directors, 13 Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) 750. 750. **b** Accounting fees (attach schedule) Administrative c Other professional fees (attach schedule) 17 Interest Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings and 22 Printing and publications 71. 71. 23 Other expenses (attach schedule) 24 Total operating and administrative 898. expenses Add lines 13 through 23 898. 7,000. 7,000. Contributions, gifts, grants paid Total expenses and disbursements Add lines 24 and 25 7,898. 7,898. Subtract line 26 from line 12 Excess of revenue over expenses (6,892.)and disbursements 1,006. b Net investment income (if negative enter -0-) C Adjusted net income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2014)

BCA

Part II	Balance Sheets description column should be for	Beginning of year	End o	of year
	end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	Cash - non-interest-bearing	- 005 116	000 500	
2 5	Savings and temporary cash investments	227,412.	220,520.	220,520.
3 /	Accounts receivable ▶			
l	Less allowance for doubtful accts ▶			
4 6	Pledges receivable ▶			
(Less allowance for doubtful accts ▶		- 100	
5 (Grants receivable	· · · · · ·		-
7	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) Other notes and loans receivable (attach schedule)			
1 -	Less allowance for doubtful accounts			
97.1	Inventories for sale or use			
SS 9 F	Prepaid expenses and deferred charges			
ا 10a ا	Investments - U S and state govt obligations (attach schedule)			
1	Investments - corporate stock (attach schedule)			
I			•	
11 I	Investments - land, buildings, and equipment basis Less accumulated depreciation			
	(attach schedule) Investments - mortgage loans			
1	Investments - other (attach schedule) .	· -		
1	Land, buildings, and equipment basis Less accumulated depreciation (attach schedule)	-		
15 (Other assets (describe)			
- 1	Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I).	227,412.	220,520.	220,520.
17 /	Accounts payable and accrued expenses			
9 19 E	Grants payable Deferred revenue Loans from officers, directors, trustees, and other			
<u>≒</u> _,,	disqualified persons			
	Mortgages and other notes payable (attach schedule) .			
□ 22 (Other liabilities (describe ►)			
	Total liabilities (add lines 17 through 22)			
	Foundations that follow SFAS 117, check here			
Ж	and complete lines 24 through 26 and lines 30 and 31. Unrestricted			
<u>rs</u> 25	Temporarily restricted			
ഥ് 26 F	Permanently restricted [
티	Foundations that do not follow SFAS 117, ck. here ▶ 🔯 📗			
Fund	and complete lines 27 through 31.	:		
5 27 C	Capital stock, trust principal, or current funds	;		
	Paid-in or capital surplus, or land, bldg , and equipment fund			
29 1	Retained earnings, accumulated income, endowment, or other funds	227,412.	220,520.	
Ass				
<u> </u>	Total net assets or fund balances (see instructions)	227,412.	220,520.	
~ 31 1	Total liabilities and net assets/fund balances (see			
	instructions)	227,412.	220,520.	
1 Total n	net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree v	with	
end-of-	-year figure reported on prior year's return)		1	227,412. (6,892.)
2 Enter a	amount from Part I, line 27a		2	(6,892.)
	increases not included in line 2 (itemize)		3	
	nes 1, 2, and 3		4	220,520.
	ases not included in line 2 (itemize)		5	
	net assets or fund balances at end of year (line 4 minus line 5) - P	art II column (b) line 30		220,520.

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Part IV Capital Gains a	nd Losses for Tax on Inv	estment Inco	me			
(a) List and describe the	kınd(s) of property sold (e g , ree, or common stock, 200 shs MI		(b) How acquired P - Purchase D - Donation	P-Purchase (mo day yr.) (m		(d) Date sold (mo , day, yr)
1 a		·				
b						
С						
d						
е						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis ense of sale			n or (loss) f) minus (g)
a						
b						
С						
d						
е						
Complete only for assets show	ring gain in column (h) and owner			4 ' '	-	(h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	, , ,	ess of col (i) ol (j), if any			less than -0-) or from col (h))
а						
b						
С			-			
d						
e	<u> </u>		- _I			
2 Capital gain net income or (net		also enter in Part I , enter -0- in Part I		2		
Net short-term capital gain or (loss) as defined in sections 1222	(5) and (6)	_			
If gain, also enter in Part I, line	8, column (c) (see instructions)		「 」			
If (loss), enter -0- in Part I, line	8			3		
Part V Qualification U	nder Section 4940(e) for	Reduced Tax	on Net Investm	ent Incon	ne	
(For optional use by domestic priva	ate foundations subject to the sec	tion 4940(a) tax o	n net investment inc	come)		
If another 4040/d\/2\ another locus	this part blank					
If section 4940(d)(2) applies, leave	this part blank					
Was the foundation liable for the sift "Yes," the foundation does not q		•	•	iod?		Yes X No
	n each column for each year, see		·	ntries		
(a)	(b)		(c)			(d)
Base period years Calendar year (or tax year beg	in) Adjusted qualifying distribu	itions nonc	Net value of haritable-use assets	s (ribution ratio
2013	4,8		225,88			.021503
2012	9,6		231,33	39.		.041649
2011	11,5		242,18		0	.047505
2010	12,1	53.	254,19	92.	0	.047810
2009	15,7		265,91		0	.059113
		•				
2 Total of line 1, column (d) .				2	0	.217580
3 Average distribution ratio for th	ie 5-year base period - divide the	total on line 2 by	5, or by the number			
of years the foundation has be	en in existence if less than 5 yea	rs		3	0	.043516
4 Enter the net value of nonchar	itable-use assets for 2014 from F	art X, line 5		4		220,607.
Multiply line 4 by line 3				5	}	9,600.
6 Enter 1% of net investment inc	come (1% of Part I, line 27b) .			. 6		10.
	•					
7 Add lines 5 and 6				. 7	1	9,610.
8 Enter qualifying distributions fr	om Part XII, line 4			. 8		7,898.
· · · · ·	han line 7, check the box in Part	VI, line 1b. and coi	mplete that part usin	· —	ate See	
instructions	The second secon	. ,				

For	m 990-PF (2014) J MARIE REYNOLDS CHARITABLE TRUST 62-637	988	2 Pa	ge 4
P	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructi	ons)		
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary - see instr.)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ 1		2	0.
	and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter			
	4% of Part I, line 12, col (b)			r
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		0	
3	Add lines 1 and 2		2	0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		0	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		2	0.
6	Credits/Payments			
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a			
b	Exempt foreign organizations - tax withheld at source 6b			
С	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached.			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	•	2	0.
10	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 ▶ Refunded ▶ 11			
	art VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or		Yes	No
	intervene in any political campaign?	1a		X
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for			
	the definition)?	1b		Х
	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			
С	Did the foundation file Form 1120-POL for this year?	1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
_	(1) On the foundation \blacktriangleright \$ (2) On foundation managers \blacktriangleright \$:
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
Ŭ	on foundation managers • \$			
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 instrument, articles of		,	
·	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	4a 4b		
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			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions			
	that conflict with the state law remain in the governing instrument?	6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	
	Enter the states to which the foundation reports or with which it is registered (see instructions)▶	 ' 		
	TN			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or			
	designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 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,"			
	complete Part XIV	9		_X_
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		X

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b If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014)

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014? . . .

X

3b

4a

Par	t VII-B	Statements Regarding Acti	vities for Which F	orm 4720 May Be R	equired (continued	d)	
5a	During ti	he year did the foundation pay or incu	r any amount to	- -			
	(1) Carr	y on propaganda, or otherwise attemp	ot to influence legislation	n (section 4945(e))?	. Tyes X N	0	
	(2) Influ	ence the outcome of any specific pub	lic election (see section	4955), or to carry			.
	on, o	directly or indirectly, any voter registra	tion drive? .		. Yes X N	0	,
	(3) Prov	ride a grant to an individual for travel,	study, or other similar p	ourposes?	Yes X N	0	
	(4) Prov	ride a grant to an organization other th	nan a charitable, etc , oi	rganization described	- -		
	ın se	ection 4945(d)(4)(A)? (see instructions)		Yes X N	0	
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or						
	educ	cational purposes, or for the preventio	n of cruelty to children o	or animals? .	. Yes X N	o	1 '
b	If any ar	iswer is "Yes" to 5a(1)-(5), did any of t	the transactions fail to d	qualify under the exception	s described in		
	Regulati	ons section 53 4945 or in a current no	tice regarding disaster	assistance (see instruction	ns)?	5b	
	Organiza	ations relying on a current notice rega	rding disaster assistanc	e check here .	. ▶□		1 1 .
C	If the an	swer is "Yes" to question 5a(4), does	the foundation claim ex	emption from the			
	tax beca	iuse it maintained expenditure respon	sibility for the grant?		🗌 Yes 🗌 N	0	,
	If "Yes,"	attach the statement required by Reg	ulations section 53 494	5-5(d)		į ,	
6a	Did the f	foundation, during the year, receive ar	ny funds, directly or indi	rectly, to pay		j	1
	premium	ns on a personal benefit contract?			Yes X N	o '	- -
b	Did the f	foundation, during the year, pay premi	ums, directly or indirect	tly, on a personal benefit c	ontract?	6b	X
	If "Yes"	to 6b, file Form 8870				ŀ	
7a	At any ti	me during the tax year, was the found	ation a party to a prohit	bited tax shelter transactio	n? ☐ Yes 🏻 N	0	
		did the foundation receive any proces				7b	<u> </u>
Par	t VIII	Information About Officers	, Directors, Truste	ees, Foundation Ma	nagers, Highly Paid	d Emplo	yees,
		and Contractors					
<u> </u>	ist all of	ficers, directors, trustees, foundation				r	
		(a) Name and address	(b) Title, and average hours per week	(4) Componication	(d) Contributions to employee benefit plans		nse account,
	707575	N A SCRUGGS	devoted to position	(If not paid, enter -0-)	and deferred comp	otner a	allowances
	30X 2		TRUSTEE 1	750.			
1	30A Z	3010	<u> </u>	730.			
		, , , , , , , , , , , , , , , , , , ,					
						 	
		- 100	- 11.1.2				
2 0	Compens	ation of five highest-paid employee	s (other than those in	cluded on line 1 - see in	structions)	1	
		nter "NONE."	- (- tilali tiloo iii		ou douonoj.		
			(b) Title, and average		(d) Contributions to	F	
(a) Name a	nd address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred		nse account,
		more than \$50,000	devoted to position	, , ,	compensation	other	allowances
1	IONE						
				···			
			<u> </u>			1.	
							-
otal	number	of other employees paid over \$50,000		-	>		

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Part VIII Information About Officers, Directors, Trustees, Fo. and Contractors (continued)	oundation Managers, Highly	Paid Employees,
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 NONE	(b) Type of service	(c) Compensation
Total number of others receiving over \$50,000 for professional services .		>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Inc.		Expenses
as the number of organizations and other beneficiaries served, conferences convents	ened, research papers produced, etc	
		_
2		_
		_
3		-
		_
4		-
Post IV D. Summary of Program Polated Investments (see in		_
Part IX-B Summary of Program-Related Investments (see instance) Describe the two largest program-related investments made by the foundation of	,	Amount
1		_
		-
2		_
		-
All other program-related investments See instructions 3		
		-
Total. Add lines 1 through 3		>

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

Adjusted qualifying distributions. Subtract line 5 from line 4

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

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Amounts set aside for specific charitable projects that satisfy the

a Suitability test (prior IRS approval required)

b Cash distribution test (attach the required schedule)

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7,898.

7,898.

За

3b

4

				 	
1	Distributable amount for 2014 from Part XI, line 7	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014 11,010.
_					11,010:
2 a	Undistributed income, if any, as of the end of 2014 Enter amount for 2013 only			996.	
	Total for prior years 20, 20, 20				-
3	Excess distributions carryover, if any, to 2014				
	From 2009				
	From 2010				
	_				
	From 2012				
	From 2013				
	Total of lines 3a through e				
4	Qualifying distributions for 2014 from Part XII,				
	line 4 ▶ \$ 7,898.			006	
	Applied to 2013, but not more than line 2a			996.	
b	Applied to undistributed income of prior				
	years (Election required - see instructions)				
C	Treated as distributions out of corpus				
	(Election required - see instructions)				6 000
	Applied to 2014 distributable amount				6,902.
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2014				
	(If an amount appears in column (d), the				
	same amount must be shown in column (a))				ı
6	Enter the net total of each column as				
	indicated below:				
	Corpus Add lines 3f, 4c, & 4e Subtract line 5				
þ	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	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 .				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
d	Subtract line 6c from line 6b Taxable				
	amount - see instructions .				
е	Undistributed income for 2013 Subtract				
	line 4a from line 2a Taxable amount -				
	see instructions				
f	Undistributed income for 2014 Subtract				
	lines 4d and 5 from line 1. This amount				
	must be distributed in 2015				4,108.
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (Election				
	may be required - see instructions)	- <u>-</u>			
8	Excess distributions carryover from 2009				,
	not applied on line 5 or line 7 (see				1
	ınstructions)				
9	Excess distributions carryover to 2015.				
	Subtract lines 7 and 8 from line 6a				
0	Analysis of line 9				
а	Excess from 2010 .				
	Excess from 2011 .				
C	Excess from 2012 .				
d	Excess from 2013 .				
е	Excess from 2014	_		_	

Ľ	Private Operating Found	lations (see ins	structions and Pa	irt VII-A, questioi	<u>n 9) </u>	
1a	If the foundation has received a ruling or d	etermination letter t	hat it is a private ope	rating		
	foundation, and the ruling is effective for 26	014, enter the date	of the ruling	. •		
b	Check box to indicate whether the foundat	ion is a private oper	ating foundation des	cribed in section	4942(J)	(3) or 4942(j)(5)
	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	`-	1 ''	, , ,	 	
h	85% of line 2a					
	Qualifying distributions from Part XII,		1		 	
·	line 4 for each year listed .					
d	Amounts included in line 2c not used				 	
	directly for active conduct of exempt activities					
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	ĺ				
	(1) Value of all assets					
	(2) Value of assets qualifying					
	under section 4942(j)(3)(B)(j)					
b	"Endowment" alternative test - enter				·	
	2/3 of minimum investment return shown					
_	in Part X, line 6 for each year listed "Support" alternative test - enter		-	 		
٠	(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			<u> </u>
۲	art XV Supplementary Informat			the foundation	had \$5,000 or i	more in
_	assets at any time during	 -	instructions.)			
	Information Regarding Foundation Man	•				
а	List any managers of the foundation who h				ived by the foundation	on before the close
	of any tax year (but only if they have contri	buted more than \$5	o,000) (See section 5	507(d)(2))		
						
þ	List any managers of the foundation who o			ration (or an equally	large portion of the o	ownership of a
	partnership or other entity) of which the fou	indation has a 10%	or greater interest			
_			<u></u>			
2	Information Regarding Contribution, Gr					
	Check here ► X if the foundation only	y makes contributio	ns to preselected cha	aritable organizations	s and does not accep	ot unsolicited
	requests for funds If the foundation makes	s gifts, grants, etc (see instructions) to in	idividuals or organiz	ations under other co	onditions,
_	complete items 2a, b, c, and d					
а	The name, address, and telephone number	r or e-mail address	of the person to who	m applications shou	ld be addressed	
b	The form in which applications should be s	ubmitted and inforn	nation and materials	they should include		
С	Any submission deadlines					
d	Any restrictions or limitations on awards, s	uch as by geograph	ical areas, charitable	fields, kinds of instit	tutions, or other factor	ors

Total

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient show any relationship to Purpose of grant or status of Amount contribution any foundation manager recipient or substantial contributor Name and address (home or business) a Paid during the year SCHEDULE 7,000. 7,000. Total 3a **b** Approved for future payment

3b

Part XVI-A Analysis of Income-Producing Activities Enter gross amounts unless otherwise indicated Unrelated business income Excluded by section 512, 513, or 514 (e) Related or exempt (c) (a) (b) (d) Exclufunction income **Business Amount Amount** sion (See instructions) Program service revenue code 1 code g Fees and contracts from government agencies Membership dues and assessments 1,006. 14 3 Interest on savings and temporary cash investments Dividends and interest from securities Net rental income or (loss) from real estate Debt-financed property . Not debt-financed property Net rental income or (loss) from personal property 6 7 Other investment income 8 Gain or (loss) from sales of assets other than inventory Net income or (loss) from special events 9 10 Gross profit or (loss) from sales of inventory Other revenue a __ 11 b 1,006. 12 Subtotal Add columns (b), (d), and (e) 1,006. . . 13 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the \blacksquare accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions) INVESTMENT INCOME

	•	Exempt Orga	anizations									
Дıd	the orga	nization directly or	ındırectly engag	e in any of the follow	ving with any	other orga	nızatıon de	scribed in se	ction		Yes	No
501	(c) of the	Code (other than	section 501(c)(3) organizations) or ii	n section 527	, relating to	political or	ganizations?	7			
a Tra	nsfers fro	om the reporting fo	undation to a no	ncharitable exempt	organızatıon	of						1
(1	l) Cash									1a(1)		X
(2	2) Other	assets								1a(2)		X
b Oth	er transa	actions										
(1	I) Sales	of assets to a non-	charitable exemp	ot organization						1b(1)		X
	•		•	e exempt organization	on					1b(2)		X
•	•	I of facilities, equip		• •						1b(3)		Х
•	•	oursement arrange	*				• •			1b(4)		X
•	•	or loan guarantee							•	1b(5)		X
		=		or fundraising solicit	ations	•		•		1b(6)		X
•	•		•	her assets, or paid e						1c		X
	•			plete the following s		umn (h) ch	 Suld always	chow the fa	Ir markot		tho	
				· ·								
-			= =	porting foundation					value III a	any nans	300011	
or s	inaring a	rrangement, snow	in column (a) the	e value of the goods	, other asset	s, or service	es received					
-1.	453		1/2/2/			(d) D						
a) Line r	10 (D)	Amount involved	(c) Name of nor	ncharitable exempt o	organization	(a)Desc (of transfers,	transactions	s, and sn	aring arra	ngeme	ents
												_
	**		·			•						
		• • • • • • • • • • • • • • • • • • • •										
		•										
2a Is	the four	adation directly or i	indirectly affiliated	d with, or related to,	one or more	tax-exemp	t organizati	ons describe	ed in			
		•	•	n 501(c)(3)) or in se		tax exemp	t organizati				es X	No
		omplete the follow		11 30 1(0)(3)) 01 111 30	CHOII 527				٠	Ш.,	.3 [1 110
<u> </u>		Name of organizat		(b) Type	of organizati	20		(c) Descript	ion of rel	ationshin		
	(4)	Traine or organization		(b) Type	or organizati	1		(O) Descript	1011 01 101	ationsinp		
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Here		/ L V	(///)	- A	6.70	212			May the	IRS discuss	this retu	rn
		1 Thise	<u> - は//</u>	avnz 3	0 3 6	<u>"/7</u> 💆	TRUST	EE	with the	preparer sho	wn belo	w
	. Sı	gnature of officer or tr	rustee	U	Date		Title		1 7	ructions)?	X Yes	No
Paid		Print/Type preparer		Preparer's signature	א ל	Date		Check	1J	PTIN		
Prepa	rer	STEVEN A		1) two	Den	06/	/29/20			20082		7
Jse C		Firm's name		A SCRUGGS	CPA _	//				15856		
J35 C	· · · · · y	Firm's address	▶P O BOX	23810				Phone no	423-	199-8	116	
				OOGA TN 37	422-							

•	Accountin	xpenses	Net investment	Adjusted net	Charitable
Description	p	er books	ıncome	ıncome	purposes
EVEN A. SCRUGGS, CPA		750. 750.			750
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S 990	Taxes Expenses	Net investment	Adjusted net	2014 Charitable
Description	per books	income	income	purposes
CISE TAXES ON 990-PF FOR 201	14 77 77			77
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S 990.	Other Expenses) 		201
, Description	Expenses	Net investment	Adjusted net	Charitable
Description WSPAPER AD	per books	income	income	purposes 7
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			Та	TaxWise 2014				6/3/2015 2:57:56PM
NIF	Name	Refund or Balance Due	Package	Status	e-file ST	Sig Doc	ACH Debit	Efile ID Number
IRS								
/ EFIN: 625616	5616							
62-1729043	62-1729043 GOLD MEDAL MARKETING I		CC - 7004 ext Accepted	Accepted 5/12	1	EX		6256162015132e000309
62-6379882	52-6379882 JMARIE REYNOLDS CHARIT	A STATE OF THE STA	XX	Rejected 5/12	A STATE OF THE STA	EXT	Single State of the State of th	62561620151326000311
J								
NIL	Name	Refund or Balance Due	Package	Status	e-file ST	Sig Doc	ACH Debit	Efile ID Number

6256162015104e000273	6256162015105e000308	
EXT		
4/16 TN	4/20 TN	
Accepted	Accepted	
US - TN ext	NS	
/410-45-8256 TINSLEY, SEAN	/410-58-7650 TACKETT, ARNOLD	. !
	US - TN ext Accepted 4/16 TN EXT	/410-45-8256 TINSLEY, SEAN US - TN ext Accepted 4/16 TN EXT 6256162015105e000273 Accepted 4/20 TN EXT 6256162015105e000308

Grand Totals:

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Return(s) Accepted Return(s) Rejected: Total:
Return(s) Acceptec Return(s) Rejected Total:
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Return Return Fotal:
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Sig Doc/Date of Birth Validity Code Legend "0" = DOB Validation Not Required

"1" = All DOB(s) Valid

"2" = Primary DOB Mismatch
"3" = Spouse DOB Mismatch
"4" = Both DOB(s) Mismatch

TaxWise 2014

6/3/2015 2:57:57PM

TIN. 408-30-6671

Form reference

Missing Financial Transaction Error code: T.N25.1-008

Sequence number: 0 Submission ID 6256162015104e000279 Copy number: 0 ノリロ

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IN: 62-6379882

Form reference Error code: R0000-029

Copy number: 0

Sequence number: 0

If the Signature Option "PIN Number" is selected (the element "SignatureOption" in the Return Header has a value of "PIN Number") then the following fields must have a value in the Return Header "PractitionerPIN", "TaxpayerPIN", "Name" of the "Officer", "Title" of the "Officer", "DateSigned" and "PINEnteredBy" Indicator.

XML Path. /efile Return/efile.ReturnHeader

Entry Value:

TIN. 62-6379882

Form reference:

Copy number: 0

Sequence number: 0

Filer's EIN and Name Control in the Return Header must match data in the e-File database. Error code: R0000-901-01

XML Path: /efile:Return/efile:ReturnHeader/efile:Filer/efile.EIN

Entry Value, 626379882

JEANE MARIE REYNOLDS CHARITABLE TRUST PART XV – CONTRIBUTIONS PAID FOR THE YEAR ENDING DECEMBER 31, 2014

Recipient Name and Address	Relationship	Status	Purpose	Amt.
American Lung Association Albert Lea, MN 56007	-	Public	Operating Expenses	800
North Shore Animal League Americ P.O. Box 1631 Port Washington, NY 11050-1631	a -	Public	Care of Animals	750
Make A Wish 510 S. Willow Street Chattanooga, TN 37404	-	Public	Care of Children	500
Chattanooga Community Kitchen P.O. Box 11203 Chattanooga, TN 37401	-	Public	Operating Expenses	500
Best Friends 5001 Angel Canyon Road Kanab, Utah 84741	-	Public	Care of Animals	1,250
Salvation Army Chattanooga, TN 37404	-	Public	Operating Expenses	750
American Cancer Society 6221 Shallowford Road Chattanooga, TN 37421	-	Public	Operating Expenses	700
Fund for Animals P.O. Box 367 Murchison, TX 75778	-	Public	Care of Animals	1,250
St. Jude Research Hospital Memphis, TN 38101	-	Public	Care of Children	500
	Total		- \$	7,000

Form 8868

(Rev January 2014)

Department of the Treasury

Application for Extension of Time To File an **Exempt Organization Return**

File a separate application for each return.

OMB No 1545-1709

Information about Form 8868 and its instructions is at www.irs.gov/form8868. Internal Revenue Service If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Chanties & Nonprofits Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Enter filer's identifying number, see instructions Employer identification number (EIN) or Type or Name of exempt organization or other filer, see instructions nrint J MARIE REYNOLDS CHARITABLE TRUST 62-6379882 File by the Number, street, and room or suite no. If a P O box, see instructions Social security number (SSN) due date for P O BOX 23810 filing your return See City, town or post office, state, and ZIP code. For a foreign address, see instructions instructions CHATTANOOGA TN 37422 Enter the Return code for the return that this application is for (file a separate application for each return) **Application** Return Application Return Is For Code Is For Code Form 990 or Form 990-EZ Form 990-T (corporation) 01 07 Form 990-BL 02 Form 1041-A Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) Form 8870 12 The books are in the care of ▶ STEVEN A SCRUGGS CPA Telephone No ► 423-499-8116 Fax No If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ▶ If it is for part of the group, check this box ▶ If and attach a list with the names and EINs of all members the extension is for I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUG 15 , 20 15 , to file the exempt organization return for the organization named above. The extension is for the organization's return for calendar year 2014 or tax year beginning , 20 , and ending 2 If the tax year entered in line 1 is for less than 12 months, check reason Initial return Final return Change in accounting period 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable 3a | \$ b If this application is for Form 990-PF or 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments

Caution. If you are going to make an electronic fund withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

by using EFTPS (Electronic Federal Tax Payment System) See instructions

made include any prior year overpayment allowed as a credit

c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required,

Form 8868 (Rev 1-2014)

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instructions