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## EXTENDED TO NOVEMBER 15, 2016

Return of Private Foundation

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

OMB No 1545 0052

Form **990-P**F ► 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 Department of the Treasury Internal Revenue Service For calendar year 2015 or tax year beginning , and ending Name of foundation A Employer identification number THE PRIMERICA FOUNDATION. INC 27-4689647 Number and street (or P.O. box number if mall is not delivered to street address) eriua/mooß B Telephone number 1 PRIMERICA PARKWAY 470-564-6245 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending check here DULUTH, GA 30099 G Check all that apply Initial return Initial return of a former public charity D 1 Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test check here and attach computation Address change Name change H Check type of organization X Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust ( Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method X Accrual F. If the foundation is in a 60 month termination (from Part II col (c), line 16) Other (specify) under section 507(b)(1)(B), check here **>**\$ 799,855. (Part I column (d) must be on cash basis) Part, | Analysis of Revenue and Expenses (a) Revenue and (b) Net investment (d) Dispursements (c) Adjusted net (The lotal of amounts in columns (b) (c) and (d) may not necessarily equal the amounts in column (a) ) for charitable purposes (cash basis only) expenses per books income income - 25年1年,二 1,025,000. N/A PER 1 m 1.3° 1.4% Contributions, gifts, grants, etc., received 2 Check > il the foundation is not required to attach Sch. 8 1,45% Tot. 4.5 , ž TOTAL THE Interest on savings and temporary cash investments 81. 3 81. STATEMENT: 1-1 4 Dividends and interest from securities \***%**5 7.4 5a Gross rents Net rental income or (loss) ينواه'. J. Wa 1 2001年 m= - [ ] [ ] [ ] 63 Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 事上 为压出门 ; =<sub>=-</sub>#; P. Bethalis . EE 7 Capital gain net income (from Part IV Iline 2) 0. **光光电影**图 12.5 (表 一人 表面) 8 Net short term capital gain Value III \_الموكدات المعالم 9 Income modifications المحالة وا 10a Gross salas less returns EMERICANA TRANSPORTATION OF THE PROPERTY OF TH · Fifth of the 是哪長, 對亞斯利伊斯特 b Less Cost of goods sold 唐 7 c Gross profit or (loss) - 建筑场。 11 Other income 1,025,081. 81. 12 Total Add lines 1 through 11 --4 Ō. 0. 13 Compensation of officers directors trustees atc 14 Other employee salaries and wages 15 Pension plans, employee benefits Expenses STMT 2 3,619. 0. 16a Legal fees \_\_\_ 3,619. STMT 3 10,000. Ó. b Accounting fees 10,000. c Other professional fees 17 Interest Administrative 18 Taxes 19 Depreciation and depletion 17年12日 20 Occupancy 21 Travel, conferences, and meetings 160.0 22 Printing and publications 160. STMT 4 18,583. 2,814. 23 Other expenses 15,769. Operating 24 Total operating and administrative 32,362. 2,814. expenses Add lines 13 through 23 29,548. 944,602. J. E.S. - 1/2 1 5 7 1 1 1 T' 25 Contributions, gifts, grants paid ·并及1884 929,602. 26 Total expenses and disbursements 976,964. 959,150. 2,814. Add lines 24 and 25 **拉克** 27 Subtract line 26 from line 12 

LHA For Paperwork Reduction Act Notice, see instructions

& Excess of revenue over expenses and disbursements

b Net investment income (it negative enter 0)

c. Adjusted net income (it negative enter -0.)

Form **990-PF** (2015)

بهدي البيالية . محر

48,117.

(世代) 記述でき

N/A

0

FP -- - - 1

Part II Balance Sheets

3 Accounts receivable ▶

4 Pledges receivable

disqualified persons 7 Other notes and loans receivable

8 Inventories for sale or use

b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other

5 Grants receivable

Cash - non-interest-bearing

2 Savings and temporary cash investments

Less: allowance for doubtful accounts

Less: allowance for doubtful accounts

Less; allowance for doubtful accounts

9 Prepaid expenses and deferred charges

14 Land, buildings, and equipment: basis

instructions. Also, see page 1, item I) 17 Accounts payable and accrued expenses

21 Mortgages and other notes payable 22 Other liabilities (describe

23 Total liabilities (add lines 17 through 22)

and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds

Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here

Retained earnings, accumulated income, endowment, or other funds

16 Total assets (to be completed by all filers - see the

20 Loans from officers, directors, trustees, and other disqualified persons

Less accumulated depreciation 15 Other assets (describe ▶

18 Grants payable 19 Deferred revenue

24 Unrestricted

25 Temporarily restricted 26 Permanently restricted

10a Investments - U.S. and state government obligations

6 Receivables due from officers, directors, trustees, and other

Attached schedules and amounts in the description

column should be for end-of-year amounts only

Beginning of year

(a) Book Value

751,738.

751,738.

0.

751,738.

751,738.

751,738.

ÿ.	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
Net Assets	30	Total net assets or fund balances
	31	Total liabilities and net assets/fund balances
Р	art	III Analysis of Changes in Net Assets or
		net assets or fund balances at beginning of year - Part II, colu

Balances

Fund

Part III Analysis of Changes in Net Assets or Fund Balances		
1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
(must agree with end-of-year figure reported on prior year's return)	1	751,738.
2 Enter amount from Part I, line 27a	2	48,117.
3 Other increases not included in line 2 (itemize)	3	0.
4 Add lines 1, 2, and 3	4	799,855.
5 Decreases not included in line 2 (itemize)	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	799,855.
5 Decreases not included in line 2 (itemize)	5 6	

► X

799,855

Part IV Capital Gains (a) List and desc 2-story brick wa	t Income	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)		
<u>1a</u>	NI					
b NO	NE	<del></del>				
<u>d</u>						
<u>e</u>						
(e) Gross sales price	(f) Depreciatio (or allowa		st or other basis expense of sale		(h) Gain or (loss (e) plus (f) minus	
<u>a</u>						
<u>b</u>			<u></u>			
d d	· · · · · · · · · · · · · · · · · · ·					
e			10101100			
Complete only for assets showing	,				(I) Gains (Col. (h) gain ol. (k), but not less tha	
(i) F.M.V. as of 12/31/69	(j) Adjusted as of 12/3		col. (j), if any		Losses (from col.	(h)) !
<u>a</u> b			<del></del>			<del></del>
c d						
8						
2 Capital gain net income or (net ca		gain, also enter in Part I, line (loss), enter -0- in Part I, line		} 2		
3 Net short-term capital gain or (los	•	ons 1222(5) and (6):				
If gain, also enter in Part I, line 8,				<b>}</b>		
If (loss), enter -0- in Part I, line 8 Part V   Qualification U	Inder Section	4940(e) for Reduced	Tax on Net	Investment In	come	,
If section 4940(d)(2) applies, leave to Was the foundation liable for the sec If "Yes," the foundation does not qua Tenter the appropriate amount in	tion 4942 tax on the lify under section 494	O(e). Do not complete this pa	art.			Yes X No
(a) Base period years Calendar year (or tax year beginni	na in) Adjuste	(b) d qualifying distributions	Net value of nor	(c) ncharitable-use asset	s Distri	(d) bution ratio vided by col. (c))
2014		980,496.		775,37	2.	1.26454
2013		1,017,379.		756,73	8.	1.34442
2012		717,241. 603,126.		659,30 709,78		1.08787
2011		003,120.		703,76	<u> </u>	.049/3
			<del> </del>			
2 Total of line 1, column (d)	£	dunda sha sasat an Pan Ohio F	h th		2	4.54658
3 Average distribution ratio for the the foundation has been in existe			or by the number	ot years	3	1.13664
4 Enter the net value of noncharitat	ole-use assets for 20	15 from Part X, line 5			4	734,042
5 Multiply line 4 by line 3		•			5	834,345
· mamphy mile vely mile e					1 1	
	ne (1% of Part I, line	27b)			6	0
6 Enter 1% of net investment incon	ne (1% of Part I, line	27b)			7	
<ul> <li>6 Enter 1% of net investment incon</li> <li>7 Add lines 5 and 6</li> <li>8 Enter qualifying distributions from If line 8 is equal to or greater than</li> </ul>	n Part XII, line 4	•				834,345 959,150

Forn	1 990-PF (2015) THE PRIMERICA FOUNDATION, INC			-468			Page 4
Pa	irt VI Excise Tax Based on Investment Income (Section 494)	0(a), 4940(b), 4940(e)	, or 494	8 - see	instru	ctio	ns)
18	Exempt operating foundations described in section 4940(d)(2), check here and each	nter "N/A" on line 1.				1	
	Date of ruling or determination letter: (attach copy of letter if nec	cessary-see instructions)	İ			l ,	. 1
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	► X and enter 1%	)   1	-		-	0.
	of Part I, line 27b						
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	of Part I, line 12, col. (b).					ļ
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Ot		2				~ O .
	Add lines 1 and 2	•	3				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. O	thers enter -0-)	4	1			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5				0.
6	Credits/Payments:						
а	2015 estimated tax payments and 2014 overpayment credited to 2015	6a		·			
b	Exempt foreign organizations - tax withheld at source	6b			*		
C	Tax paid with application for extension of time to file (Form 8868)	6c	,	`		*	1
d	Backup withholding erroneously withheld	6d	,	***			!
7	Total credits and payments. Add lines 6a through 6d		7	, "   "			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attack.	ched					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		▶ 9	,			0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10	0			
11	Enter the amount of line 10 to be: Credited to 2016 estimated tax	Refund	ed 🕨 📘	1			<u> </u>
Pa	rt VII-A Statements Regarding Activities						
1a	During the tax year, did the foundation attempt to influence any national, state, or local legisl	lation or did it participate or in	ervene in		[	Yes	No
	any political campaign?				1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos	ses (see instructions for the de	finition)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	d copies of any materials p	ublished o	r		1	
	distributed by the foundation in connection with the activities						!
C	Did the foundation file Form 1120-POL for this year?				1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	-					
	(1) On the foundation. > \$ (2) On foundation managers.	.▶ \$	0.			,	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expendi	ture tax imposed on foundatio	n			,	
	managers. ► \$0.						<u></u> ;
2	Has the foundation engaged in any activities that have not previously been reported to the IF	RS?			2	. 1	Х
_	If "Yes," attach a detailed description of the activities						1
3	Has the foundation made any changes, not previously reported to the IRS, in its governing in	·	ation, or			mmens s	
4.	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change				3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year	r?		NT / N	4a	•	X
	If "Yes," has it filed a tax return on Form 990-T for this year?			N/A	4b		10
J	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5		X
£	If "Yes," attach the statement required by General Instruction $T$ . Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied en	than				•	
Ü	By language in the governing instrument, or	mer.				3	!
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory</li> </ul>	i disantiana that anafiliatth it					i
	remain in the governing instrument?	y directions that conflict with ti	ie state iaw		J		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," com	onlote Dant II and (-) and 5	VIV		6	Х	X
•	bid the foundation have at least \$5,000 in assets at any time during the year? It 198, CON	ipiete Part II, coi (c), and F	an xv		7	^	<del></del> ,
8a	Enter the states to which the foundation reports or with which it is registered (see instruction	ne) 🕨					
	GA						i
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the At	torney General (or designate)				'	
	of each state as required by General Instruction G? If "No," attach explanation				8b	- <u></u> :	
9	Is the foundation claiming status as a private operating foundation within the meaning of sec	ction 4942(1)(3) or 4942(1)(5) (	or calendar	•	30		<del></del> .
	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," co	omplete Part XIV			9		$\mathbf{x}^{-1}$
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedul	le listing their names and addresses			10		X
			· · · · · · ·	F	orm <b>990</b>	-PF	

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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 2015?

orm 990-PF (2015) THE PRIMERICA FOUNDATION			<u> 27-46896</u>	47 Page	6
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be I	Required (contin	ued)	·	·
5a During the year did the foundation pay or incur any amount to:					-
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	s X No	1	
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indir	ectly,			;
any voter registration drive?			s X No	[ ]	ŧ
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y6	s X No		4
(4) Provide a grant to an organization other than a charitable, etc., organizatio					1
4945(d)(4)(A)? (see instructions)		X Ye	es 🔲 No		ţ
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t			1 1	
the prevention of cruelty to children or animals?	,		s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un-	der the exceptions described			1 1	- 1
section 53.4945 or in a current notice regarding disaster assistance (see instru				5b X	i
Organizations relying on a current notice regarding disaster assistance check h					_
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		ined			
expenditure responsibility for the grant?		X Ye	s No	'	
If "Yes," attach the statement required by Regulations section 53 494	5-5(d)				į
6a Did the foundation, during the year, receive any funds, directly or indirectly, to					1
a personal benefit contract?	pay promiums on		s X No	,	1
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	sarconal boostit contract?	IT		6b X	
· · · · · · · · · · · · · · · · · · ·	bei Sunai beneni cumi acti		<del> -</del>	1 7	<u> </u>
If "Yes" to 6b, file Form 8870	shalter transaction?		es X No		ļ
7a At any time during the tax year, was the foundation a party to a prohibited tax s b If "Yes," did the foundation receive any proceeds or have any net income attribute.		1		7b	
Part VIII Information About Officers, Directors, Trust		nagara Highli		<del>"</del>	_
Paid Employees, and Contractors	ees, Foundation Ma	inagers, nigiti	<b>y</b>		
List all officers, directors, trustees, foundation managers and their	compensation.				—
		(c) Compensation	(d) Contributions to	(e) Expense	<del>,</del>
(a) Name and address	(b) Title, and average hours per week devoted	(if not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, othe allowances	er
	to position	enter -0-)	compensation	allowarices	—
	1			l ,	
SEE STATEMENT 5	1	0.	0.	0	
SEE STATEMENT J	-		· ·		÷
	-				
	-				
	<u> </u>				—
	-				
·					
					<u>.                                    </u>
	1				
	Endad an bair 40° Maria	1210215			_
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	enter "NONE."	(d) Contributions to	(a) Evpopos	_
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deterred	(e) Expense account, othe	; er
YOUT	devoted to position	<u> </u>	compensation	allowances	_
NONE					
			···-		_
	1				_
1					
					_
					_
					_
				-	_
Total number of other employees paid over \$50,000		<u> </u>	<b>&gt;</b>		0
			Form	990-PF (201	5)

Form 990-PF (2015) THE PRIMERICA FOUNDATION, INC	27-4	1689647 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundat Paid Employees, and Contractors (continued)	ion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter		- <del></del>
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	<del> </del>	
	<del> </del>	
	<del></del>	
F0.000 (s	1	<b>D</b> 0
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. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers produced.	cal information such as the	Expenses
1 N/A	1000, 610.	
1		
2		
3		
4		
Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on li		
1 N/A	nes i and Z.	Amount
I N/A		
2		
All other program-related investments. See instructions.		
3		1
		,
Total Add lines 1 Newscarb 2		<del></del>

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

Form **990-PF** (2015)

4940(e) reduction of tax in those years.

## Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI,				
line 7	***	<u></u>		36,702.
2 Undistributed income, if any, as of the end of 2015	** 4930			
a Enter amount for 2014 only b Total for prior years:	4".n. M" "		0	•
g rotation prior years.				
3 Excess distributions carryover, if any, to 2015.		0.		
a From 2010				
bFrom 2011 567, 637	- 1 Marine 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	****		
cFrom 2012 684, 276				*
dFrom 2013 979,542		`**		
eFrom 2014 941,727		A* *		
f Total of lines 3a through e	3,173,182.		İ	
4 Qualifying distributions for 2015 from	3,1/3,104.			
Part XII, line 4: ►\$ 959, 150		and the second		
a Applied to 2014, but not more than line 2a	· · · · · · · · · · · · · · · · · · ·	, , , , , , , , , , , , , , , , , , , ,		
b Applied to 2014, but not more than line 2a	*	474 20 3 20 1	0	•
	<i>#</i> *			
years (Election required - see instructions) c Treated as distributions out of corpus	SAC	0.		
(Election required - see instructions)				
d Applied to 2015 distributable amount	0.	<b>**</b> ' ** 、		
e Remaining amount distributed out of corpus	922,448.			36,702.
5 Excess distributions carryover applied to 2015	922,446.	******		
(if an amount appears in column (d), the same amount				0.
must be shown in column (a) )	, , , , , , , , , , , , , , , , , , ,		A	
6 Enter the net total of each column as indicated below:	ξ 5°	م کی می س		
,	4 00E 620	mily ve in a still it	,	,
a Corpus Add lines 31, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract	4,095,630.			
line 4b from line 2b	*	0	•	ŧ
c Enter the amount of prior years'		0.		
undistributed income for which a notice of			,	
deficiency has been issued, or on which				1
the section 4942(a) tax has been previously assessed	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ا م	*	1.
d Subtract line 6c from line 6b. Taxable	." ** * 1	0.	·	
amount - see instructions	and an an an all the state of t		× .	
e Undistributed income for 2014. Subtract line	* * * *	0.	<u> </u>	,
4a from line 2a. Taxable amount - see instr.	, " " , ' ,	* ^	_	,
f Undistributed income for 2015. Subtract	· · · · · · · · · · · · · · · · · · ·	*** **** ***	0.	'
lines 4d and 5 from line 1. This amount must	** **** * **** *			
be distributed in 2016	, ,	,,,, ,,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,		
7 Amounts treated as distributions out of		. **		0.
corpus to satisfy requirements imposed by	,	`.^* **		
section 170(b)(1)(F) or 4942(g)(3) (Election	*	eren ja ja sa		
may be required - see instructions)	0.	*** *** * * * *		!
8 Excess distributions carryover from 2010	<del>`</del>	, , , , , , , , , , , , , , , , , , ,	*	
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2016.	<del></del>			
Subtract lines 7 and 8 from line 6a	4,095,630.	46 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Analysis of line 9:	* *			
a Excess from 2011 567,637.	* ''	**	*	
b Excess from 2012 684, 276.	, ,			1
c Excess from 2013 979, 542.	nt la	~ , , ,, , , , , , , , , , , , , , , ,		
d Excess from 2014 941,727.	***	** ** ** /		
e Excess from 2015 922, 448.		non ox shows " "		
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		NDATION, IN		27-46	89647 Page 10
Part XIV Private Operating Fo	_ <del></del>	<del></del>	<del></del>	N/A	
1 a If the foundation has received a ruling or		. ,	]		
foundation, and the ruling is effective for			<b>. ▶</b> └┬₋	140404110	10(2)(5)
b Check box to indicate whether the founda	<del></del>	ing foundation described		4942(j)(3) or49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2015	(b) 2014	Prior 3 years (c) 2013	(d) 2012	(e) Total
income from Part I or the minimum	(a) 2015	(0) 20 14	(6) 2013	(4)2012	(6) 10(2)
investment return from Part X for		'			
each year listed		1	<del></del>		
<b>b</b> 85% of line 2a		<del></del>	-		
c Qualifying distributions from Part XII,				ļ	
line 4 for each year listed		<del> </del>			<del></del>
d Amounts included in line 2c not				Ì	
used directly for active conduct of		}			
exempt activities	<del></del>	<del></del>			
e Qualifying distributions made directly		ı		į	,
for active conduct of exempt activities.					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the		<del></del>		_	
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets	<del></del>	<u> </u>			
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year listed	·	· · · · · · · · · · · · · · · · · · ·			
c "Support" alternative test - enter:		Į.			
(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		<u> </u>			
(4) Gross investment income			<u></u>		
Part XV Supplementary Infor			y if the foundation	on had \$5,000 or m	ore in assets
at any time during the	_ <del>-</del>	tructions.)	<del></del>		<del></del>
1 Information Regarding Foundation		- than 70/ -f tha tatal an		h	
a List any managers of the foundation who year (but only if they have contributed me	ore than \$5,000). (See	e man 2% of the total co section 507/d1/21 )	ntributions received by t	ne toundation before the cio	se or any tax ,
NONE		;			
b List any managers of the foundation who other entity) of which the foundation has	own 10% or more of t	the stock of a corporatio	n (or an equally large po	tion of the ownership of a p	artnership or
NONE	= 1070 or ground inter-				
2 Information Regarding Contribution	on Grant Gift Lage	- Sabalarahin ata	Dua		<del></del>
Check here ► X if the foundation or the foundation makes gifts, grants, etc. (	nly makes contributions	s to preselected charitable	le organizations and does	s not accept unsolicited requ	ests for funds. If
a The name, address, and telephone numb					
<b>b</b> The form in which applications should be	submitted and inform	ation and materials they	should include:		
c Any submission deadlines:		(			
d Any restrictions or limitations on awards,	, such as by geographi	cal areas, charitable field	s, kinds of institutions, o	r other factors:	
523601 11-24-15					Form <b>990-PF</b> (2015)
					1 (2010)

Part XV | Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount status of recipient contribution any foundation manager Name and address (home or business) or substantial contributor Paid during the year AMERICAN RED CROSS NONE DISASTER RESPONSE PROGRAMS IN GEORGIA 1955 MONROE DRIVE NE ATLANTA, GA 30324 10,000. AMERICAN RED CROSS NONE FLOOD RELIEF IN THE 1955 MONROE DRIVE NE CAROLINAS ATLANTA, GA 30324 10,000. ATLANTA CHILDRENS SHELTER NONE ÞС SOCIAL SERVICES 607 PEACHTREE STREET NE PROGRAMS 25,000. ATLANTA, GA 30308 ATLANTA FULTON COUNTY ZOO NONE ЪC SPONSORED ADMISSION 800 CHEROKEE AVENUE SE PROGRAM FOR SCHOOL ATLANTA, GA 30315-1440 CHILDREN 35,000. AURORA THEATRE NONE PC LEARNING LIBRARY WITH 128 EAST PIKE STREET TWO (2) PRODUCTIONS LAWRENCEVILLE, GA 30046 FOR UNDERSERVED CHILDREN 15,000. SEE CONTINUATION SHEET(S) **▶** 3a 929,602. **b** Approved for future payment JEWISH FAMILY & CAREER SERVICES NONE FINANCIAL LITERACY ÞС 4549 CHAMBLEE DUNWOODY ROAD PROGRAM FOR ATLANTA, GA 30338 LOW-INCOME/DISLOCATED UNEMPLOYED WORKERS 15,000. Total **▶** 3b 15,000,

523611 11-24-15

<sup>\*\*</sup> SEE PURPOSE OF GRANT CONTINUATIONS

Part XVI-A	Analy	eie of li	noome-P	raducina	Activities
Part Avi-A	Analy	SIS ()	icome-r	rouucing	ACTIVITIES

inter gross amounts unless otherwise indicated.	Unrelated	business income		ded by section 512, 513, or 514	(e)
·	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a					
b					
С					
d					
e					
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	81.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:	224	·	" "gran "		
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a	_				
b	_	·			
c		<del></del> -	ᆜ	<u></u>	
d	_	· · · · · · · · · · · · · · · · · · ·	<u> </u>		
e	_	<u> </u>	1		
12 Subtotal. Add columns (b), (d), and (e)	" " " " " " " " " " " " " " " " " " "	0	• ××*· */	81.	0
13 Total Add line 12, columns (b), (d), and (e)				13	81
See worksheet in line 13 instructions to verify calculations.	.)				· · · · · · · · · · · · · · · · · · ·
Part XVI-B Relationship of Activities	s to the Accor	mplishment of E	xemp	t Purposes	
Line No. Explain below how each activity for which in the foundation's exempt purposes (other the			A contrib	outed importantly to the accomp	lishment of

<del></del>

523621 11-24-15

Form 990-P		RIMERICA FOUNDATION,		27-468			ge 13
Part XV	Information Re Exempt Organi	garding Transfers To and Transizations	sactions and	Relationships With Nonch	aritable	9	
1 Did the	e organization directly or indire	ectly engage in any of the following with any of	her organization des	scribed in section 501(c) of		Yes	No
the Co	de (other than section 501(c)	(3) organizations) or in section 527, relating to	political organizatio	ins?			
a Transf	ers from the reporting founda	tion to a noncharitable exempt organization of:			ĺ		1
(1) C	ash				1a(1)		X
(2) 0	ther assets	•		•	1a(2)		X
• •	transactions:		•				-
(1) S	ales of assets to a noncharitat	ole exempt organization			16(1)	•	X
		ncharitable exempt organization			1b(2)		X
(3) R	ental of facilities, equipment, o	or other assets			1b(3)		X.
,	eimbursement arrangements				1b(4)		X
٠,,	oans or loan guarantees	• •			1b(5)		X
	•	mbership or fundraising solicitations			1b(6)		X
		iling lists, other assets, or paid employees			10		X
	•	"Yes," complete the following schedule: Columi	(b) should always	show the fair market value of the goods	other ass	ets.	
		oundation. If the foundation received less than				,010,	
		other assets, or services received	an mannot raids me	stry transaction of charing changement	,		
(8)Line no	(b) Amount involved	(c) Name of noncharitable exempt orga	anization	(d) Description of transfers, transactions, ar	nd sharing a	rangeme	nts
(4/2	(0)	N/A				<u> </u>	
				<del></del>			
						<del></del> -	
		<u> </u>					

2a	Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described
	in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

Yes	X	No
 100		110

b If	Yes," complete the following schedule.	•		
	(a) Name of organization	(b) Type of organization	(c) Description of relat	ionship
	N/A			1
Sign Here	Under penalties of perjury, I declare that I have examined this return inclu- and belief, it is true, correct, indicomplete Declaration of preparer (other			May the IHS discuss this return with the preparer shown below (see instr.)?  X Yes No

Signature of officer or trustee Title Print/Type preparer's name Check \_\_\_\_\_\_if PTIN Preparer's signature Date self- employed Paid CARLYE W. DOOLEY CARLYE W. DOOLEY
Preparer Firm's name WINDHAM BRANNON, P.C. Paid 11/02/16 P00292964 Firm's EIN ▶ 58-1763439 **Use Only** Firm's address ▶ 3630 PEACHTREE RD., NE, SUITE 600 ATLANTA, GA 30326 Phone no. 404-898-2000

3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	7.41100111
BIG BROTHERS, BIG SISTERS OF METRO	NONE	PC	MENTORING AND	
ATL			EDUCATIONAL PROGRAMS	
1382 PEACHTREE STREET NE			FOR UNDERSERVED	
ATLANTA, GA 30309			CHILDREN	10,000
BOYS & GIRLS CLUBS OF METRO ATLANTA	NONE	PC	MENTORING AND	
1275 PEACHTREE STREET NE, SUITE 500			EDUCATIONAL PROGRAMS	
ATLANTA, GA 30309			FOR UNDERSERVED	
		ļ	CHILDREN	15,000
	;			
CHILDREN'S MUSEUM OF ATLANTA	none	PC	COMPREHENSIVE OUTREACH	
275 CENTENNIAL OLYMPIC PARK DRIVE NW	,		PROGRAM FOR	
ATLANTA, GA 30313		<del> </del>	DISADVANTAGED CHILDREN	10,000
				1
CHRIS KIDS	NONE	₽C	MENTAL HEALTH & CHILD	
1017 FAYETTEVILLE ROAD; SUITE B			ADVOCACY SERVICES FOR	
ATLANTA, GA 30316	-		UNDERSERVED CHILDREN	10,000
COMMUNITIES IN SCHOOLS	NONE	PC	PROGRAM TO INCREASE	
260 PEACHTREE STREET; SUITE 750			HIGH SCHOOL GRADUATION	
ATLANTA, GA 30308			RATE IN GEORGIA - SITE	
	ļ		COORDINATORS PROGRAM	15,000
COMMUNITY FOUNDATION FOR NORTHEAST	NONE	PC	NONPROFIT CAPACITY	
GEORGIA		<b>\</b>	FUNDING FOR WORKFORCE	
6500 SUGARLOAF PARKWAY, SUITE 220			DEVELOPMENT	
DULUTH, GA 30097		ļ	<del>                                     </del>	35,000
COOL GIRLS	NONE	PC	AFTER-SCHOOL	
621 NORTH AVENUE NE; SUITE A220		j	DEVELOPMENT &	
ATLANTA, GA 30308	· ·	1	EDUCATIONAL PROGRAMS	
	ļ	<del> </del>	FOR LMI GIRLS	10,000
EAGLE RANCH	NONE	PC	RESIDENTIAL,	
P.O. BOX 7200		1	EDUCATIONAL, AND	
CHESTNUT MOUNTAIN, GA 30502		1	COUNSELING NEEDS FOR	!
BACK TAKE BOININGTON	Love -		CHILDREN IN CRISIS	10,000
EAST LAKE FOUNDATION	NONE	PC	ACCELERATOR PROGRAM	
2606 ALSTON DRIVE SE ATLANTA, GA 30317			FOR	
			MICRO-ENTREPRENEURS TO ACHIEVE	
			SELF-SUFFICIENCY	10,000
ECONOMIC EMPOWERMENT INITIATIVE, INC	NONE	P.C.	PPT PTNANCTAL TERRASON	
F/B/O CENTERS OF HOPE		PC	PROGRAMS FOR LMI	
250 GEORGIA AVENUE, SUITE 203			2Outun ton mit	
ATLANTA, GA 30312	1	<u> </u>		30,000
Total from continuation sheets	<u> </u>			834,602

3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
				•
FERNBANK MUSEUM OF NATURAL HISTORY	NONE	PC	SUPPORT OF THE YOUTH	
767 CLIFTON ROAD NE			EDUCATION PROGRAM	
ATLANTA, GA 30307-1221	<del>                                     </del>	<del> </del>	+	10,000
POSTER CARE SUPPORT FOUNDATION	NONE	PC	BASIC CARE ITEMS FOR	
3334 TRAILS END ROAD NE			FOSTER AND DISPLACED	
ROSWELL, GA 30075			CHILDREN	10,000
FRIENDS OF GWINNETT COUNTY SENIOR	NONE	PC	RN IN-HOME MEDICAL	
SERVICES			CARE FOR SENIORS	
75 LANGLEY DRIVE LAWRENCEVILLE, GA 30046-1680				10,000
BANADACETIDE, ON JOVE-1000				
G.R.I.P./UNITED WAY	NONE	PC PC	JOB RE-ENTRY	
100 EDGEWOOD AVENUE NE			INTERVENTION PROGRAM FOR NEWLY-RELEASED	
ATLANTA, GA 30303			PRISON INMATES	10,000
	7			
GEORGIA CENTER FOR NONPROFITS	NONE	PC PC	TRAINING FOR NONPROFIT	
100 PEACHTREE STREET NW, SUITE 1500	,		STAFF - NPO CAPACITY	
ATLANTA, GA 30303			BUILDING	20,000
GROUND CONTRACT ON TOOMS AND TOOMS A			VONTOURN FOR THE GUIRE	
GEORGIA COUNCIL ON ECONOMIC EDUCATION P.O. BOX 1619	NONE	₽C	WORKSHOPS FOR TEACHERS	
ATLANTA, GA 30301			OF ECONOMICS	20,000
GEORGIA PARTNERSHIP FOR EXCELLENCE IN	NONE	PC	HIGH SCHOOL COMPLETION	
EDUCATION			PUSHING FORWARD	
270 PEACHTREE STREET; SUITE 2200			PROGRAM - PROGRAM TO	
ATLANTA, GA 30303		•	INCREASE HIGH SCHOOL	45.00
			GRADUATION RATE IN	15,000
GEORGIA RIVER NETWORK	NONE	₽C	RIVER CONSERVATION	
126 S. MILLEDGE AVENUE; SUITE E3			PROGRAMS IN GEORGIA	
ATHENS, GA 30605	ļ	-		10,000
GOOD SAMARITAN HEALTH CENTER OF	NONE	PC	LOW-COST/FREE HEALTH	
GWINNETT			CARE TO UNINSURED	
3700 CLUB DRIVE			CITIZENS IN GWINNETT	
LAWRENCEVILLE, GA 30044			COUNTY	10,000
GOODWILL OF NORTH GEORGIA	NONE	PC	JOB TRAINING AND JOB	
235 PEACHTREE STREET NE; N. TOWER;		1	PLACEMENT FOR	
SUITE 2300 ATLANTA, GA 30303		-	INDIVIDUALS IN DEKALB	10 000
Total from continuation sheets	<del></del>	<del></del>		10,000

3 Grants and Contributions Paid During the	/ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	
WINNETT CLEAN AND BEAUTIFUL	NONE	₽C	CLEANING UP A STREAM	
1300 SATELLITE BLVD			OR WATERSHED AND	
OULUTH, GA 30096			LITTER PREVENTION	
•			WORKSHOPS	10,00
WINNETT COALITION	NONE	₽C	HEALTH & HUMAN	
750 S PERRY STREET, SUITE 312			SERVICES IN GWINNETT	
LAWRENCEVILLE, GA 30046			COUNTY - COMMUNITY	
			BIOSTRATEGIC	
	<u> </u>		IMPROVEMENT PROGRAM	25,00
SWINNETT COUNCIL FOR THE ARTS D/B/A	NONE	PC	VISUAL AND COMMUNITY	
JACQUELINE CASEY HUDGENS CENTER FOR			ARTS INITIATIVES	
ART	ı		ESPECIALLY FOR LMI	
6400 SUGARLOAF PARKWAY, SUITE 300			INDIVIDUALS	
DULUTH, GA 30097	ļ <u>.</u>			30,000
CULTURATE COLDUNA PURI TO COMOOL C	NOVE	na	DROGRANG MO INCREASE	
GWINNETT COUNTY PUBLIC SCHOOLS	NONE	PC	PROGRAMS TO INCREASE	
FOUNDATION			TECHNOLOGY INSTRUCTION	
437 OLD PEACHTREE ROAD NW SUWANEE, GA 30024-2978			1	20,00
SUMMED, GA SUUZE-2370	<del> </del>	<del> </del> -		
GWINNETT TECHNICAL COLLEGE	NONE	PC	SUPPORT OF LMI STUDENT	
5150 SUGARLOAF PARKWAY			COLLEGE ACCESS	
ATLANTA, GA 30043				25,00
			]	
			HORETON OF DESIGNATION	
HALL CHAMBER OF COMMERCE	NONE	PC	WORKFORCE DEVELOPMENT	
230 E E BUTLER PARKWAY		1	PROGRAMS IN HALL	25 00
GAINESVILLE, GA 30503	<del> </del>		COUNTY	25,00
JUNIOR ACHIEVEMENT OF GEORGIA	NONE	₽C	SUPPORT OF THE	
460 ABERNATHY ROAD NE		ļ	GWINNETT COUNTY	
ATLANTA, GA 30328		<del></del>	DISCOVERY CENTER	34,60
				•
LEADERSHIP GWINNETT	NONE	PC	GLANCE GWINNETT	
6500 SUGARLOAF PARKWAY		j	PROGRAM FOR FUTURE	•
LAWRENCEVILLE, GA 30097	<u> </u>	ļ	LEADERS	10,000
NORCROSS COOPERATIVE MINISTRY	NONE	PC	EMERGENCY ASSISTANCE	
2275 MITCHELL ROAD		1	TO FAMILIES IN NEED	
NORCROSS, GA 30071				10,000
NOTHING BUT THE TRUTH	NONE	₽C	MULTIPLE PROGRAMS FOR	
P.O. BOX 845		1	HOMELESS STUDENTS	
DACULA, GA 30019	<u> </u>	<u> </u>		10,000

3 Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Contribution	
OPERATION HOPE	NONE	PC	"BANKING ON OUR	
707 WILSHIRE BLVD; SUITE 3030			FUTURE" EDUCATIONAL	
LOS ANGELES, CA 90017			PROGRAM FOR ELEMENTARY	
			SCHOOL PUPILS	25,00
ORANGE DUFFEL BAG	NONE	₽C	AFTER SCHOOL PROGRAM	
1801 PEACHTREE STREET NE; SUITE 300			FOR STUDENTS FACING	60.00
ATLANTA, GA 30309			POVERTY	60,00
PARTNERSHIP AGAINST DOMESTIC VIOLENCE	NONE	PC	SAFE HOUSE PROGRAM FOR	
PO BOX 170225		1	VICTIMS OF DOMESTIC	
ATLANTA, GA 30317			VIOLENCE	25,00
RAINBOW VILLAGE, INC.	NONE	PC	FINANCIAL LITERACY AND	
3427 DULUTH HIGHWAY 120			SELF-SUFFICIENCY	
DULUTH, GA 30096			CLASSES FOR NEEDY	20.00
			WOMEN	30,00
SALVATION ARMY METRO ATLANTA AREA	NONE	PC	EMERGENCY SHELTER &	
COMMAND			HOUSING PROGRAMS FOR	
1000 CENTER PLACE			тне	
NORCROSS, GA 30506	'		HOMELESS/ELDERLY/DISAB	10,00
SPECIAL NEEDS SCHOOL OF GWINNETT	NONE	PC	PROGRAM TO PROVIDE	
660 DAVIS ROAD			COMMUNICATION MEANS	
LAWRENCEVILLE, GA 30046		İ	FOR NON-VERBAL	
			STUDENTS	10,00
THE WOODRUFF ARTS CENTER	NONE	PC	LMI EDUCATION	
1280 PEACHTREE STREET NW			PROGRAMMING	
ATLANTA, GA 30309				50,00
UGA FOUNDATION - TERRY COLLEGE OF	NONE	PC	EDUCATION EXPANSION	
BUSINESS	'			
394 S MILLEDGE AVENUE; SUITE 100				
ATHENS, GA 30602	<del> </del>		<del>                                     </del>	25,00
UNITED WAY OF GREATER ATLANTA	NONE	PC	INCOME, HEALTH	
100 EDGEWOOD AVENUE			EDUCATION, AND	
ATLANTA, GA 30303	<u> </u>	<del> </del>	HOMELESS PROGRAMS	65,00
WOUNDED WARRIOR PROJECT	NONE	PC	SUPPORT OF AN ECONOMIC	
4899 BELFORT ROAD; SUITE 300 JACKSONVILLE, FL 32256			EMPOWERMENT PROGRAM	44.55
Total from continuation sheets	<u> </u>	<u> </u>	IN ATLANTA	10,00

3 Grants and Contributions Paid During the				
Recipient	if recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	CONTRIBUTION	
EAR UP	NONE	₽C	JOB TRAINING PROGRAM	
730 PEACHTREE STREET NE; SUITE 900			FOR UNDERSERVED	35 00
ATLANTA, GA 30308		<del> </del>	STUDENTS	25,000
YMCA - METRO ATLANTA	NONE	PC	AFTER-SCHOOL PROGRAMS	
2985 SUGARLOAF PARKWAY LAWRENCEVILLE, GA 30045			FOR UNDERSERVED YOUTH	10,000
YMCA OF NORTHWEST NORTH CAROLINA	none	PC PC	SUPPORT OF SUMMER CAMP	
301 N MAIN STREET; SUITE 1900 WINSTON-SALEM, NC 27101			OPPORTUNITIES FOR LMI CHILDREN	10,00
				ì
	}			
				· · · · · · · · · · · · · · · · · · ·
				·
<del></del>		ļ		
	}			
Total from continuation sheets		<u> </u>	1	

# Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

#### **Schedule of Contributors**

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

2015

Name of the organization

Employer identification number

TH	E PRIMERICA FOUNDATION, INC	27-4689647				
Organization type (check or	ne)·					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)( ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
• •	s covered by the <b>General Rule</b> or a <b>Special Rule.</b> (7), (8), or (10) organization can check boxes for both the General Rule and a Special R ,	ule See instructions.				
=	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor					
Special Rules						
sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount line 1 Complete Parts I and II.	a, or 16b, and that received from				
year, total contribu	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts i, ii, and iii					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
but it must answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Schedule Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

Employer identification number

THE D	RIMERICA FOUNDATION, INC		27	-4689647
Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.		100001,
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	ns	(d) Type of contribution
1	PRIMERICA, INC.  1 PRIMERICA PARKWAY  DULUTH, GA 30099	\$ 1,025,0	00.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	ns	(d) Type of contribution
		\$		Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	ns	(d) Type of contribution
	;	\$		Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	ns	(d) Type of contribution
		\$		Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	ns	(d) Type of contribution
		\$		Person Payroll Concash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	าร	(d) Type of contribution
		\$	<del></del>	Person Payroll Noncash (Complete Part II for

523452 10-26-15

noncash contributions)

Employer identification number

#### THE PRIMERICA FOUNDATION, INC.

27-4689647

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed				
(a) No. from Part i	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
		\$			
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) ' Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) ; Date received		
		\$			
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
523453 10-26	-15	\$Schedule B (Form S	990 990-F7 or 990-PF1/2015		

Schedule B (Fo	orm 990, 990-EZ, or 990-PF) (2015)		Page					
Name of organiz	zation		Employer identification number					
	MERICA FOUNDATION, IN	C	27-4689647					
Part III	the year from any one contributor. Complete c	olumns (a) through (e) and the following li	ction 501(c)(7), (8), or (10) that total more than \$1,000 for ine entry. For organizations					
	completing Part III, enter the total of exclusively religious Use duplicate copies of Part III if additions	i, charitable, etc., contributions of \$1,000 or less fo	x the year (Enter this info once) - \$					
(a) No.			T					
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
-								
		(e) Transfer of gift						
	Transferee's name, address, ar		Relationship of transferor to transferee					
-	<del></del>							
7a\ Na								
(a) No. from Part i	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
_								
-			-					
	(e) Transfer of gift							
-	Transferee's name, address, ar	Relationship of transferor to transferee						
		· · · · · · · · · · · · · · · · · · ·						
-								
(a) No.		(1)						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
-			-					
<u> </u>		(e) Transfer of gift	<del></del>					
<u> </u>	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee					
-								
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
Part I								
			·					
	<del>_</del>	(e) Transfer of gift						
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee					
	<del></del>							

FORM 990-PF INTEREST ON SAVI	INGS AND TEM	PORARY (	CASH IN	VESTMENTS	STATEMENT	1
SOURCE	(A) REVENUE PER BOOKS		(B) NET INVESTMENT INCOME		(C) ADJUSTED NET INCOME	
BANK INTEREST INCOME		81.		81.		
TOTAL TO PART I, LINE 3		81.		81.		
FORM 990-PF	LEGAL	FEES			STATEMENT	2
DESCRIPTION	(A) . EXPENSES PER BOOKS	(B NET IN MENT I	VEST-	(C) ADJUSTED NET INCOM		
LEGAL FEES	3,619.		0.		3,61	١9.
TO FM 990-PF, PG 1, LN 16A	3,619.		0.		3,61	L9.
FORM 990-PF	ACCOUNTING FEES			STATEMENT	3	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B NET IN MENT I	VEST-	(C) ADJUSTED NET INCOM		
AUDIT FEES	10,000.		0.		10,00	0.
TO FORM 990-PF, PG 1, LN 16B	10,000.		0.		10,00	0.
FORM 990-PF	OTHER EXPENSES		STATEMENT 4			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B. NET IN MENT I	VEST-	(C) ADJUSTED NET INCOM		
BANK FEES SOFTWARE FEE	2,814. 15,146. 57.		2,814. 0. 0.			0. 16. 57.
MEALS AND ENTERTAINMENT OFFICE SUPPLIES BUSINESS LICENSES AND FEES COMP MEMBERSHIP	186. 30. 350.		0. 0. 0.		3	30. 50.

<sup>25</sup> STATEMENT(S) 1, 2, 3, 4 2015.04030 THE PRIMERICA FOUNDATION, I 11275\_11

	IST OF OFFICERS, I	STATEMENT 5		
NAME AND ADDRESS	; TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
KAREN FINE SALTIEL 1 PRIMERICA PARKWAY DULUTH, GA 30099-0001	CHAIRMAN & PRE	CSIDENT 0.	0.	0.
ANNE SOUTTER 1 PRIMERICA PARKWAY DULUTH, GA 30099-0001	VICE CHAIRMAN, 20.00	VP, & OPER.	A 0.	0.
WILLIAM J. NEMETZ 1 PRIMERICA PARKWAY DULUTH, GA 30099-0001	TREASURER 5.00	0.	0.	0.
MARGARET HALBERT 1 PRIMERICA PARKWAY DULUTH, GA 30099-0001	SECRETARY 20.00	0.	0.	0.
KELLY HERNDON 1 PRIMERICA PARKWAY DULUTH, GA 30099-0001	ADVISOR 0.25	0.	0.	0.
JUDY WATERS 1 PRIMERICA PARKWAY DULUTH, GA 30099-0001	ADVISOR 0.25	0.	0.	. 0.
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	0.	0.	0.