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Form 990-PF

EXTENDED TO AUGUST 15 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.

OMB No 1545-0052

Department of the Treasury Internal Revenue Service Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. For calendar year 2015 or tax year beginning , and ending Name of foundation A Employer identification number THE JULIAN & CHRIS DANIELLY FOUNDATION 91-1909696 Number and street (or P O box number if mail is not delivered to street address) B Telephone number 5555 KENT ROCK ROAD 770-787-7470 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending check here LOGANSVILLE, GA 30052 G Check all that apply: Initial return Initial return of a former public charity D 1 Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change X Name change X Section 501(c)(3) exempt private foundation H Check type of organization: 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 Cash 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 ,389. (Part I, column (d) must be on cash basis) ▶\$ Analysis of Revenue and Expenses Part I (b) Net investment (c) Adjusted net (d) Disbursements (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes expenses per books income income (cash basis only) 10,000 N/A Contributions, gifts, grants, etc., received if the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments 1 1 STATEMENT 3 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 0. 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 10,001 Total. Add lines 1 through 11 0. 0. Compensation of officers, directors, trustees, etc. Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees STMT 2 646. 0 0. **b** Accounting fees c Other professional fees 17 Interest 18 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative 646 0 0. expenses Add lines 13 through 23 10,200 10,200. 25 Contributions, gifts, grants paid Total expenses and disbursements 10,846 0 10,200. Add lines 24 and 25 Subtract line 26 from line 12: -845 2 Excess of revenue over expenses and disbursements 1 b Net investment income (if negative, enter -0-) N/A

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LHA For Paperwork Reduction Act Notice, see instructions

c Adjusted net income (if negative, enter -0-)

\equiv		Attached abstallar and arrange in the description	Beginning of year		09696 Page 2
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	End of year (b) Book Value	ar (c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	6,234.	5,389.	5,389.
	3	Accounts receivable ►		•	7
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ►			
		Less; allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	_	-		··
S)		Less: allowance for doubtful accounts			
ts	8	Inventories for sale or use			·
Assets	9	Prepaid expenses and deferred charges			
As		Investments - U.S. and state government obligations			
	l	Investments - corporate stock			
	ı	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
	40	Less accumulated depreciation			
	1	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment; basis	<u> </u>		
		Less accumulated depreciation			
	1	Other assets (describe ►)			
	16	Total assets (to be completed by all filers - see the			
		instructions Also, see page 1, item I)	6,234.	5,389.	<u>5,389.</u>
	17	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers directors, trustees, and other disqualified persons			
ap	21	Mortgages and other notes payable			
_	22	Other liabilities (describe >)			
		•			
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here	i		
Ś	l	and complete lines 24 through 26 and lines 30 and 31			
or Fund Balances	24	Unrestricted			
ala	25	Temporarily restricted			
80	26	Permanently restricted			
Š		Foundations that do not follow SFAS 117, check here			
卢		and complete lines 27 through 31.			
ţŞ	27	Capital stock, trust principal, or current funds	0.	0.	
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
ţ	29	Retained earnings, accumulated income, endowment, or other funds	6,234.	5,389.	
ž	30	Total net assets or fund balances	6,234.	5,389.	
	21	Total liabilities and net assets/fund balances	6,234.	5,389.	
	31			3,309.	
<u> </u>	art	III Alialysis of Changes in Net Assets of Fulld B			
		I net assets or fund balances at beginning of year - Part II, column (a), line	30		
	•	st agree with end-of-year figure reported on prior year's return)		1	6,234.
		r amount from Part I, line 27a		2	-845.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	5,389.
		eases not included in line 2 (itemize)		5	0.
<u>6</u>	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	5,389.
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	Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		(col. (b) divided by col (c))
	2014	100.	7,184.		.01392
	2013	13,328.	6,091.		2.18814
	2012	0.	2,440.		.00000
	2011	274.	3,447.		.07948
_	2010	225,168.	11,168.		20.16189
	Total of line 1, column (d)	on payors and advantage of the State of the		2	22.44344
3	Average distribution ratio for the 5-year bas the foundation has been in existence if less	•	or by the number of years	3	4.48868
4	Enter the net value of noncharitable-use as	sets for 2015 from Part X, line 5		4	5,725
5	Multiply line 4 by line 3			_5_	25,698
6	Enter 1% of net investment income (1% of	Part I, line 27b)		6	0
7	Add lines 5 and 6			7	25,698

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

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10,200.

Enter qualifying distributions from Part XII, line 4

	m 990-PF (2015) THE JULIAN & CHRIS DANIELLY FOUNDATION 91-1	L909696		Page 4
_	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 -	see instru	ıctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 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).			
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			<u>0.</u>
3				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-			0.
6	Credits/Payments:			
	a 2015 estimated tax payments and 2014 overpayment credited to 2015			
	Exempt foreign organizations - tax withheld at source			
	: Tax paid with application for extension of time to file (Form 8868)			
	1 Backup withholding erroneously withheld			_
_	Total credits and payments Add lines 6a through 6d			<u>0.</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed			0.
	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 2016 estimated tax ► Refunded ► 11 art VII-A Statements Regarding Activities			
			Yes	No
ıa	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	4.	163	
k		1a		X
Ų	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	<u>1b</u>		
	distributed by the foundation in connection with the activities		į	
	c) Did the foundation file Form 1120-POL for this year?			v
	I Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	1c		X
u	(1) On the foundation. \triangleright \$ (2) On foundation managers. \triangleright \$ 0.			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	1		
	managers. > \$ 0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		х
-	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			
Ī	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		<u>x</u>
	o If "Yes," has it filed a tax return on Form 990-T for this year?			
	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	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	
8a	a Enter the states to which the foundation reports or with which it is registered (see instructions)			
	GA			
b	o 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 2015 or the taxable year beginning in 2015 (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		<u>X</u>
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c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

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

b If "Yes," did it have excess business holdings in 2015 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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

Form 4720, to determine if the foundation had excess business holdings in 2015)

had not been removed from jeopardy before the first day of the tax year beginning in 2015?

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X

3b

4a

Yes X No

during the year?

orm 990-PF (2015) THE JULIAN & CHRIS DANIE	LLY FOUNDATIO	N	<u>91-19096</u>	96 Page 6
Part VII-B Statements Regarding Activities for Which I	orm 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	, ,,		s X No	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire			
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	es 🗶 No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
4945(d)(4)(A)? (see instructions)			s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t			
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 und	•	in Regulations	/-	
section 53.4945 or in a current notice regarding disaster assistance (see instru	•		N/A	5b
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 fr				
expenditure responsibility for the grant?		I/A L Ye	s No	
If "Yes," attach the statement required by Regulations section 53 4945				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on	<u></u>	[12]	
a personal benefit contract?		Y €	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		<u> </u> '	6b X
If "Yes" to 6b, file Form 8870	haltar transaction()		s X No	
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.		Y €	H	7b
Part VIII Information About Officers, Directors, Trusto		nagere Highly		/ 0
Paid Employees, and Contractors	ees, i outloation wie	magers, riigini	•	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	(e) Expense account, other allowances
JULIAN H. DANIELLY	CO - TRUSTEE	Cities o j	compensation	unowanoco
5555 KENT ROCK ROAD				1
LOGANVILLE, GA 30052	0.10	0.	0.	0.
	CO - TRUSTEE			
5555 KENT ROCK ROAD				1
LOGANVILLE, GA 30052	0.10	0.	0.	0.
	f	•		1
				1
				1
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each ship toyes paid more than \$60,000	hours per week devoted to position	(C) Compensation	and deterred compensation	allowances
NONE				1
				
				1
				
- 				1
				ļ
				ı
Total number of other employees paid over \$50,000				0

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, High Paid Employees, and Contractors (continued)	91-1909696 Page 7 nly
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000 (b) Type of se	ervice (c) Compensation
NONE	
Fotal number of others receiving over \$50,000 for professional services	▶ 0
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
N/A	
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
N/A	
All other program-related investments. See instructions.	
All other program-related investments. See instructions.	
Total. Add lines 1 through 3	▶ 0.
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P	Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, se	e instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a		1a	0.
b	Average of monthly cash balances	1b	<u> </u>
C		1c	
d	Total (add lines 1a, b, and c)	1d	5,812.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	5,812.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	87.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	5,725.
6	Minimum investment return Enter 5% of line 5	6	286.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are	nd certain	
	foreign organizations check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	286.
2a	Tax on investment income for 2015 from Part VI, line 5		
b	Income tax for 2015. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	286.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	286.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	286.
<u>P</u>	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	10,200.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	······································
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	,	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	10,200.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	10,200.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for th	e section

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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				286.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2015				
a From 2010 224,626.				
b From 2011 102.				
c From 2012				
d From 2013 13,023.				
e From 2014				
f Total of lines 3a through e	237,751.			
4 Qualifying distributions for 2015 from				
Part XII, line 4: ► \$ 10,200.				
a Applied to 2014, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.	 		
d Applied to 2015 distributable amount				286.
e Remaining amount distributed out of corpus	9,914.			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	247,665.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2014 Subtract line				
4a from line 2a. Taxable amount - see instr.		···	0.	
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2016				0.
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) 8 Excess distributions carryover from 2010	0.			
not applied on line 5 or line 7	224 626			
<u> </u>	224,626.			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	23,039.	ļ		
10 Analysis of line 9:	43,039.			
a Excess from 2011 102.				
b Excess from 2012				
c Excess from 2013 13,023.				
d Excess from 2014				
e Excess from 2015 9,914.				
500504 44.04.45				Form QQ0-DF (2015)

Form 990-PF (2015) THE JUI Part XIV Private Operating F	LIAN & CHRIS	DANIELLY I	FOUNDATION		909696 Page 10
1 a If the foundation has received a ruling			A, question 9)	N/A	
foundation, and the ruling is effective fo					
b Check box to indicate whether the foun		•	un contion	4942(j)(3) or	4942(J)(5)
2 a Enter the lesser of the adjusted net	Tax year	ig loandation described	Prior 3 years] 4342(J)(J) UI1	1342())(3)
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
investment return from Part X for		(0)	(4) 20 10	(0) 20.2	(0) 1002
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		<u> </u>			
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c			ļ		
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter	-				
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info			if the foundation	n had \$5,000 or m	nore in assets
at any time during	tne year-see insti	ructions.)			
1 Information Regarding Foundation	_				
a List any managers of the foundation wi year (but only if they have contributed			tributions received by the	e foundation before the cl	ose of any tax
, , , ,	more man 40,000). (See s	section 507 (d)(2).)			
NONE	400/		, , , , , , , , , , , , , , , , , , , ,		
 b List any managers of the foundation w other entity) of which the foundation has 			(or an equally large porti	on of the ownership of a	partnership or
**	20 a 1070 or grouter mitel 5				
NONE		0.1.1	· · · · · · · · ·		
2 Information Regarding Contribu Check here ► X if the foundation the foundation makes gifts, grants, etc	only makes contributions	to preselected charitable	organizations and does		
a The name, address, and telephone nur					10 0.
a The name, address, and telephone nur	inder of e-mail address of	ть реголи то миони арр	HODE 90 DIBOTIC CHORDON	เออซิน	
b The form in which applications should	be submitted and informa	tion and materials they s	hould include:		
c Any submission deadlines:					
d Any restrictions or limitations on award	ds, such as by geographic	al areas, charitable fields	, kinds of institutions, or	other factors:	
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Total

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▶ 3b

g. g. cc	s amounts unless otherwise indicated.	Unrelate	d business income	Exclu	ded by section 512, 513, or 514	(0)
1 Progra	m service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	(e) Related or exempt function income
_		3000				
c						
d	-			ļ		
e		-				
f		-				
	s and contracts from government agencies					
	rship dues and assessments			ļ		
investr	t on savings and temporary cash			14	1.	
	ds and interest from securities			1.4	<u></u>	
	tal income or (loss) from real estate:					
	t-financed property					
	debt-financed property		··········			
	tal income or (loss) from personal					
propert						
7 Other in	nvestment income					
8 Gain or	(loss) from sales of assets other	i				
than in	-			ļ		
	ome or (loss) from special events					
	profit or (loss) from sales of inventory					
11 Other re	evenue:					
_		1				
_		l i		 		
		1 1		<u> </u>		
				1		
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e	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations)			æmp	13	
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523621 11-24-15

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Sign and be Here	penalties of perjury, I declare that I have examined this elief, It is true, correct, and complete Declaration of prediction of the penalties of officer printrustee			has any knowledge	May the IRS discuss this return with the preparer shown below (see instr.)? X Yes No
Paid	JAMES C. ELLIS, CPA	Preparer's signature	Date 06/02/16	self- employed	TIN P00321829
Preparer Use Only		SECTATES, P. C.	100,02,10	Firm's EIN ► 63	
	Firm's address ▶ P. O. BOX 6. DOTHAN, AL			Phone no 334	-792-2153
		-			Form 990-PF (2015

11-24-1

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.lrs.gov/form990.

OMB No 1545-0047

2015

Name of the organization

Employer identification number

T	HE JULIAN & CHRIS DANIELLY FOUNDATION	91-1909696				
Organization type (check						
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					
	is covered by the General Rule or a Special Rule.					
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	le See instructions				
General Rule						
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling by one contributor. Complete Parts I and II. See instructions for determining a contributor.					
Special Rules						
sections 509(a)(1 any one contribu	on 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, tor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount Z, line 1 Complete Parts I and II	or 16b, and that received from				
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III						
year, contributior is checked, enter purpose Do not a	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.					
but it must answer "No" o	that is not covered by the General Rule and/or the Special Rules does not file Schedule En Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fort 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 JULIAN & CHRIS DANIELLY FOUNDATION

91-1909696

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	al space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JULIAN H. DANIELLY 5555 KENT ROCK ROAD LOGANSVILLE, GA 30052	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	CHRIS DANIELLY 5555 KENT ROCK ROAD LOGANSVILLE, GA 30052	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions)

Employer identification number

THE JULIAN & CHRIS DANIELLY FOUNDATION

91-1909696

(a) No. from Part I	Noncash Property (see instructions) Use duplicate copies of P (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. irom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_ _		\$Schedule B (Form	

Name of orga	anization	Employer identification number					
THE JU Part III	LIAN & CHRIS DANIELLY Exclusively religious, charitable, etc., cont	ributions to organizations describe	91-1909696 d in section 501(c)(7), (8), or (10) that total more than \$1,000 for				
	the year from any one contributor. Complete completing Part III, enter the total of exclusively religious	s, charitable, etc., contributions of \$1,000	OWING line entry. For organizations or less for the year (Enterthis info once) \$				
(a) No.	Use duplicate copies of Part III if addition	al space is needed					
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, a	nd ZIP + 4	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
_	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee						
	mansieree's name, address, a	10217 + 4	Relationship of transferor to transferee				
(a) No.							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	(e) Transfer of gift						
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
							

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CASH	INVESTMENTS	STATEMENT 1	
SOURCE	(A REVE PER B		(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME	
CHARLES SCHWAB		1.	1.		
TOTAL TO PART I, LINE 3	1.		1.		
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 2	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM	(C) - ADJUSTED E NET INCOM		
TAX PREPARATION FEE	646.	. 0.		0.	
TO FORM 990-PF, PG 1, LN 16B	646.	0.		0.	