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### **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.

		venue Service ► Information about For	m 990-PF and its separate	Instructions	is at www.lrs		Open to Public Inspection
For	caler	dar year 2015 or tax year beginning JUN	1 1, 2015	, and e	nding	MAY 31, 201	6
Na	me of	foundation				A Employer identification	n number
С	AC	AJONES FAMILY FOUNDATIO	)N				
		CARL E. JONES, JR.				63-127805	Λ
		nd street (or P O box number if mail is not delivered to street	address)		Room/suite		<u> </u>
		'	. uddicooy		7100/19 Suite	B Telephone number	
		0 SMOLIAN PLACE	· · · · · · · · · · · · · · · · · · ·		<u></u>	205-939-3	227
-		own, state or province, country, and ZIP or foreign p	ostal code			C If exemption application is	pending, check here
_B	IR.	MINGHAM, AL 35205					
G (	Check	all that apply: Initial return	Initial return of a f	ormer public o	harity	D 1 Foreign organization	ns, check here
		Fınal return	Amended return				
		Address change	Name change			Foreign organizations meck here and attach of the control of	neeting the 85% test,
H (	heck		xempt private foundation			1	
_	_		Other taxable private found	otion		E If private foundation st	
				$\overline{}$		under section 507(b)(	i)(A), check here
		·   —	ing method: X Cash	Accr	uai	F If the foundation is in a	
			ther (specify)			under section 507(b)(	1)(B), check here
_	-\$	3,942,183. (Part I, colu	ımn (d) must be on cash	basis )			
Pa	art l	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net in	vestment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	l 'inco		income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	163,164.			N/A	1, 4
	2	Check If the foundation is not required to attach Sch B	103/101.			11/11	
	-	Interest on savings and temporary cash investments	F (C)		F 662		CITIA TITIA CONTRACTOR O
	3		5,662.		5,662.		STATEMENT 2
	4	Dividends and interest from securities	103,197.	10	<u>3,197.</u>		STATEMENT 3
	5a	Gross rents					20 - 10
	b	Net rental income or (loss)	· 通行的 · · · · · · · · · · · · · · · · · · ·				1.2.20
d)	6ã	Net gain or (loss) from sale of assets not on line 10	<112,685.	>			STATEMENT 1
Revenue	Ь	Gross sales price for all assets on line 6a 223, 420.	は確認は確認し	~,*		7, 1	
Š	7	Capital gain net income (from Part IV, line 2)	A THE LANGE TO SERVICE A STATE OF THE PARTY	7	5,904.		" " " " " " " " " " " " " " " " " " "
æ	8	Net short-term capital gain		<del> </del>	FIVE		
	*	, · · · ·		RE		70	,
	9	Income modifications Gross sales less returns					, , ,
	10a	and allowances	'~,	el not	1 7 2018		
	1	Less Cost of goods sold	ļ <b>\</b>	51 001			
	C	Gross profit or (loss)		4		المنا المسم	
	11	Other income		00	DEM, L	17	
	12	Total. Add lines 1 through 11	159,338.	18	4,763.		,
	13	Compensation of officers, directors, trustees, etc	0.		0.		0.
	14	Other employee salaries and wages					
		Pension plans, employee benefits					
ŝ	l	Legal fees		-			<del> </del>
js.		=	1 700	<del></del>	0.5.0		0.50
8		Accounting fees STMT 4	1,700.		850.		850.
ũ	ı	Other professional fees					<u>.                                    </u>
Š	17	Interest					
Tat	18	Taxes STMT 5	10,530.		0.		0.
ışt	19	Depreciation and depletion		1			
Ē	20	Occupancy					
Ā	l	Travel, conferences, and meetings					
وَ		Printing and publications					+
ā			5,209.	-	4,609.		
ij	23	•	5,209.		4,009.		600.
rai	24	Total operating and administrative	4= 400				
Operating and Admınıstrative Expenses		expenses Add lines 13 through 23	17,439.		<u>5,459.</u>		1,450. 169,089.
J	ı	Contributions, gifts, grants paid	169,089.				169,089.
	26	Total expenses and disbursements					
		Add lines 24 and 25	186,528.		5,459.		170,539.
	27	Subtract line 26 from line 12;					
	1	Excess of revenue over expenses and disbursements	<27,190.	<b>&gt;</b>			
		Net investment income (if negative, enter -0-)	12.71300		9,304.		<u>†                                      </u>
	Į.	Adjusted net income (if negative, enter -0-)		<del>                                     </del>	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	N/A_	<del> </del>
		represented the intention (in negative, enter -0-)	<u> </u>	l			1

' CACAJONES FAMILY FOUNDATION

Form 99	90-PF (2015) C/O CARL E. JONES, JR.			12/8050 Page 2
Part	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year (a) Book Value	(b) Book Value	f year (c) Fair Market Value
1	Cash - non-interest-bearing			
2	Savings and temporary cash investments	125,226.	275,265.	275,265.
	Accounts receivable ►			
	Less; allowance for doubtful accounts			
A	Pledges receivable ►			
"	Less: allowance for doubtful accounts	DESCRIPTION OF THE PROPERTY OF	Service of the servic	
_	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			
_	disqualified persons	Activity and September 1981		
7	Other notes and loans receivable			
	Less: allowance for doubtful accounts			
र्घ   8				
Assets	Prepaid expenses and deferred charges			·
▼   10a	Investments - U.S. and state government obligations			
ь	Investments - corporate stock STMT 7	3,489,953.	3,313,188.	3,561,824.
0	Investments - corporate bonds STMT 8	100,977.	100,513.	105,094.
111	Investments - land, buildings, and equipment basis	5	ing W	
	Less accumulated depreciation			
12	Investments - mortgage loans			
13	Investments - other			
14	Land, buildings, and equipment: basis	, , , , , , , , , , , , , , , , , , ,		
' '	Less accumulated depreciation			
1.5	· · · · · · · · · · · · · · · · · · ·			
	Other assets (describe		<del></del> .	
16	Total assets (to be completed by all filers - see the	2 716 156	2 600 066	2 042 102
+	instructions. Also, see page 1, item I)	3,716,156.	3,688,966.	3,942,183.
17	, -			- 2 gard 5
18	Grants payable			
ဖ္မ 19	Deferred revenue			- 1 is
Liabilities 50 21 21 22 22 22 22 22 22 22 22 22 22 22	Loans from officers, directors, trustees, and other disqualified persons			
윤 21	Mortgages and other notes payable			,
ے <sub>22</sub>	Other liabilities (describe )			
23	Total liabilities (add lines 17 through 22)	0.	0.	
	Foundations that follow SFAS 117, check here			
	and complete lines 24 through 26 and lines 30 and 31			
8 24	Unrestricted			
E 25	Temporarily restricted			ì
Fund Balances	Permanently restricted			!
פַ	Foundations that do not follow SFAS 117, check here			
교	and complete lines 27 through 31			
b 27	Capital stock, trust principal, or current funds	0.	0.	
#	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	1
28	Retained earnings, accumulated income, endowment, or other funds	3,716,156.	3,688,966.	<b>'</b>
¥ 29		3,716,156.	3,688,966.	1
ž  30	Total net assets or fund balances	3,710,130.	3,000,300.	
		2 716 156	2 600 066	
31	Total liabilities and net assets/fund balances	3,716,156.	3,688,966.	
Part	Analysis of Changes in Net Assets or Fund E	Balances		
1 Tota	al net assets or fund balances at beginning of year - Part II, column (a), line	e 30		
(mu	st agree with end-of-year figure reported on prior year's return)		1	3,716,156.
•	er amount from Part I, line 27a		2	<27,190.
	er increases not included in line 2 (itemize)		3	0.
	lines 1, 2, and 3		4	3,688,966.
	reases not included in line 2 (itemize)		5	0.
	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, o	column (b), line 30	6	3,688,966.
				Form <b>990-PF</b> (2015)

_		CARL E. JONES,						6	<u>3-127</u>	8050	Page 3
Pa	元[[V] Capital Gains a	and Losses for Tax on I	nvestment	Income	1						
	(a) List and descr 2-story brick wa	ribe the kind(s) of property sold (e. rehouse; or common stock, 200 st	g., real estate, hs. MLC Co.)		( <b>6)</b> I P D	How acc - Purch - Donat	quired lase tion	(c) Date a (mo., da		(d) Date (mo., da	
1a ]	REGIONS FINANC	IAL CORPORATION				I		06/0		11/1	
Ь]	REGIONS FINANC	IAL CORPORATION						12/0	<u>7/07_</u>	06/18	
C S	SOUTHERN COMPA	NY				1		11/2		06/18	
d s	SOUTHERN COMPA	NY				I	P	11/2	8/06	11/1	7/15
e ]	MAINGATE MLP F	UND I SHARES				I	₽	07/2	9/14	05/1	1/16_
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale					nn or (loss (f) minus		
	36,302.			21,31	2.					14	,990.
<u> </u>	34,642.			40,18							,542.>
C	37,057.			24,74				-			,317.
d	88,979.			21,36			•				,619.
e	26,440.			39,92							,480.
		g gain in column (h) and owned by	v the foundation				(1)	Gains (Co	ol. (h) gain		
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (I) col. (J), If any				(k), but n	ot less tha (from col. (	n -0-) <b>or</b>	
a	<del></del>									14	,990.
<u>ъ</u>			1								,542.
c		· "	<del>                                     </del>	,							,317.
											,619.
<u>d</u>			<del> </del>								,480.
<u>e</u>			<del></del>		╮┤						, <del>1</del> 00.
2 C	apital gain net income or (net ca	pital loss) $ \begin{cases} \text{If gain, also entity} \\ \text{If (loss), enter -} \end{cases} $	er in Part I, line O- in Part I, line	7 7	}	2	<del></del>			75	<u>,904.</u>
lf	gain, also enter in Part I, line 8,	ss) as defined in sections 1222(5) a column (c).	and (6):		}				NT / 7		
<u>독대대</u>	(loss), enter -0- in Part I, line 8	nder Section 4940(e) fo	r Boduood	Tay on Not	100	3 costm	ont Inc	omo	N/A	<u> </u>	
		e foundations subject to the section									
(FUI	optional use by domestic private	s touridations subject to the section	1 4540(a) tax 011	illet illvestilletit ill	icom	G.)					
If sec	tion 4940(d)(2) applies, leave th	nis part blank.									
											X No
		tion 4942 tax on the distributable a		•	riou					res	INO
		lify under section 4940(e). Do not o									<del></del>
1 E		each column for each year; see the	instructions be	iore making any e	nuries	s		<del></del>		(d)	
Ca	(a) Base period years ilendar year (or tax year beginnii			Net value of no		rıtable-ı			Distril (col. (b) div	bùtion ratio vided by col.	
	2014		60,125.				<u>5,509</u>				44411
	2013	1	41,825.				<u>5,359</u>				<u>43567</u>
	2012	1:	26,500.				2,990			.0	<u>44031</u>
	2011		17,440.				0,278		<del></del>	.0	45870
	2010		01,420.				8,557				42819
2 T	otal of line 1, column (d)							2		.2	20698
3 A	verage distribution ratio for the	5-year base period - divide the tota	I on line 2 by 5,	or by the number	of ye	ears					
th	ne foundation has been in existe	nce if less than 5 years						3		.0	44140
4 E	nter the net value of noncharitab	ole-use assets for 2015 from Part X	(, line 5					4	<del></del>	3,705	<u>,468.</u>
5 N	fultiply line 4 by line 3							_5		163	<u>,559.</u>
6 E	nter 1% of net investment incon	ne (1% of Part I, line 27b)						6		1	<u>,793.</u>
7 A	dd lines 5 and 6							7		165	,352.
								1 I			
8 E	nter qualifying distributions from	n Part XII, line 4						8		170	,539.

CACAJONES FAMILY FOUNDATION

Form 990-PF (2015) C/O CARL E. JONES, JR. Part VI Excise Tax Based on Investment Income (Section 4940)	0(a) 4040(b) 4040(a) ar	63-1	1278050	otio	Page 4
		1940 - Tablesile is	See msuc	WASA	15)
1a Exempt operating foundations described in section 4940(d)(2), check here   Date of ruling or determination letter:  (attach copy of letter if nec	essary-see instructions)			1	
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	► LX and enter 1%	1 20200000	eres especies 7. Next	1,/	93.
of Part I, line 27b		XX	No 1		
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%				Lete	
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Of	thers enter -0-)	2		1 7	0.
3 Add lines 1 and 2		3		1,7	
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. 0	thers enter -0-)	4		1 7	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5 #788#N 0	5004 1218 OU "	1,7	93.
6 Credits/Payments:	1 000			- 64 - 800	
a 2015 estimated tax payments and 2014 overpayment credited to 2015	6a 4,000	July 1			
b Exempt foreign organizations - tax withheld at source	6b	<del> </del>			46(3)
c Tax paid with application for extension of time to file (Form 8868)	60	┨ ′ '.	19		X.
d Backup withholding erroneously withheld	6d		the state of	4,0	<u>7.8666</u>
7 Total credits and payments. Add lines 6a through 6d	ahad	8		4,0	00.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached.	Ciled	9			
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed		10		2,2	07
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	2,207. Refunded	11		4,4	0.
Part VII-A Statements Regarding Activities	Z,ZO7. Refuilded	, ,,,			<u> </u>
1a During the tax year, did the foundation attempt to influence any national, state, or local legis	lation or did it narticipate or interven	e in		Yes	No
any political campaign?	nation of the it participate of interven		1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purpose	ses (see instructions for the definitio	1)?	1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities an			<u></u>		
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	e year:				26.5
(1) On the foundation. ▶ \$ 0. (2) On foundation managers	_	•		1/4	25 4
e Enter the reimbursement (if any) paid by the foundation during the year for political expendi		_		17.7	8
managers. ▶ \$ 0.				<u>'`</u>	
2 Has the foundation engaged in any activities that have not previously been reported to the li	RS?		2		X
If "Yes," attach a detailed description of the activities				٠.	
3 Has the foundation made any changes, not previously reported to the IRS, in its governing i	instrument, articles of incorporation,	or		,	
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	es		3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year	ıt.		_4a_		X
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?		N,	/A <u>4b</u>		
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 en	ither:				
By language in the governing instrument, or					
By state legislation that effectively amends the governing instrument so that no mandator	y directions that conflict with the sta	ie law		37	
remain in the governing instrument?			6	X	<del></del>
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," cor	nplete Part II, col. (c), and Part X	V	7	X	<u> </u>
8a Enter the states to which the foundation reports or with which it is registered (see instruction			—		
AL b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	uttornov General (or designate)		<del></del>		
of each state as required by General Instruction G? If "No," attach explanation	attorney deneral (of designate)		8b	X	ļi
<ul><li>9 Is the foundation claiming status as a private operating foundation within the meaning of se</li></ul>	ection 4942(1)(3) or 4942(1)(5) for ca	endar	00	<del>  ^</del>	
year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," or		oriudi	9		X
10 Did any persons become substantial contributors during the tax year? ir "yes," attach a scheduler of the tax year?			10		X
To the diff persons become substantial contributors during the tax year. If rest, attach a screen	are noting their flames and addresses		Form <b>QQ</b>	n_DE	

523531 11-24-15

Pa	rt·VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ► CARL E. JONES, JR  Telephone no. ► 205-93			
	Located at ► 1510 SMOLIAN PL, BIRMINGHAM, AL ZIP+4 ►35	205		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	3.7	/3	·Ш
40	and enter the amount of tax-exempt interest received or accrued during the year  15	1/4	/A Yes	No
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,	16	163	X
	securities, or other financial account in a foreign country?  See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	- 10 To	14.4	- ¥v _v
	foreign country	3 43 4		,
Pa	art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required	1	-	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	. 4	Yes	No
1a	During the year did the foundation (either directly or indirectly).			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			į
	a disqualified person?			}
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	, ~	,	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?  Yes X No			
	, , ,	-	*	
	(6) Agree to pay money or property to a government official? (Exception Check "No"  If the foundation agreed to make a grant to or to employ the official for a period after	,	Ť	
	termination of government service, if terminating within 90 days.)	, ,	x.	
h	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	, "	,	
_	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	************	X
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		, .	
	before the first day of the tax year beginning in 2015?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	'		
	defined in section 4942(j)(3) or 4942(j)(5)).			
a	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015?  Yes X No			
				ĺĺ
h	If "Yes," list the years \( \bigsim			
U	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach		1	
	statement - see instructions.)  N/A	2b		
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			
	<b>&gt;</b>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			[
	during the year?			
b	of f"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,			
4	Form 4720, to determine if the foundation had excess business holdings in 2015)  N/A	3b 4a	<del> </del>	X
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	48		A
U	had not been removed from jeopardy before the first day of the tax year beginning in 2015?	 4b		X
_		rm <b>99</b>	0-PF	

CACAJONES FAMILY FOUNDATION Form 990-PF (2015) C/O CARL E. JONES, 63-1278050 JR. Page 6 Part,VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 4945(d)(4)(A)? (see instructions) (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? N/A Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained N/A \_\_\_ Yes \_\_\_ No expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No a personal benefit contract? X b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b If "Yes" to 6b, file Form 8870 Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7b b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation. (c) Compensation (d) Contributions to employee benefit plans and deferred (e) Expense account, other allowances (b) Title, and average hours per week devoted to position (If not paid, enter -0-) (a) Name and address compensation SEE STATEMENT 9 0 0. 0.

Total number of other employees paid over \$50,000			▶	(
NONE				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
2 Compensation of five highest-paid employees (other than thos	se included on line 1). It hone,	CITTEL HOIL.		

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 service	(c) Compensation
NONE		
···		
	_	
		_
Total number of others receiving over \$50,000 for professional services		▶ 0
Rantix A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic	cal information such as the	Evnonces
number of organizations and other beneficiaries served, conferences convened, research papers produ	uced, etc.	Expenses
1 <u>N/A</u>		
2		
3		
4		
Part IX:BI Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on li	ines 1 and 2.	Amount ,
1 <u>N/A</u>		
<u></u>		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	<b>▶</b>	0.

63-1278050

CACAJONES FAMILY FOUNDATION C/O CARL E. JONES, JR.

_	Minimum Investment Return (All domestic foundations	must complete this	part. Foreign fou	ndations, s	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charita	ble, etc., purposes:		140	
a	Average monthly fair market value of securities			1a	3,489,141.
Ь	Average of monthly cash balances			1b	3,489,141. 272,755.
C	Fair market value of all other assets			1c	
d	Total (add lines 1a, b, and c)			1d	3,761,896.
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	3,761,896.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amour	nt, see instructions)		4	56,428.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and	on Part V, line 4		5	3,705,468.
6	Minimum investment return. Enter 5% of line 5	6	185,273.		
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3)	and (j)(5) private opera	iting foundations ar	nd certain	
	foreign organizations check here 🕨 🔲 and do not complete this par				
1	Minimum investment return from Part X, line 6			1	185,273.
2a	Tax on investment income for 2015 from Part VI, line 5	2a	1,793.		
b	Income tax for 2015. (This does not include the tax from Part VI.)	2b		]	
C	Add lines 2a and 2b			2c	1,793.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	183,480.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	183,480.
6	Deduction from distributable amount (see instructions)			6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Pa	rt XIII, line 1		7	183,480.
P	art XII Qualifying Distributions (see instructions)				
	Qualitying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., pu	irposes:			
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26			1a	170,539.
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 charit-	able, etc., purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the:				
а	Suitability test (prior IRS approval required)			3a	
b	Cash distribution test (attach the required schedule)			3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8,	and Part XIII, line 4		4	170,539.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net inv	estment			
	income. Enter 1% of Part I, line 27b			5	1,793.
6	Adjusted qualifying distributions Subtract line 5 from line 4			6	168,746.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years	when calculating whet	her the foundation (	qualifies for	the section
	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,				103 400
line 7		SA CAMBRANT OF THE PARTY		103,400.
2 Undistributed income, if any, as of the end of 2015			168,921.	100
a Enter amount for 2014 only	1. 10/14 1/14 1/14 1/14 1/14 1/14 1/14 1/1		100,341.	The state of the s
b Total for prior years:		0.		The second second
3 Excess distributions carryover, if any, to 2015:				
a From 2010			* **	1-, 4-
b From 2011			7	
c From 2012	, , , , , , , , , , , , , , , , , , , ,		Section of the sectio	l l
d From 2013	The state of the s	The state of the s		, ,
e From 2014	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		· · .	
f Total of lines 3a through e	0.	At 1 and	,	
4 Qualifying distributions for 2015 from				
Part XII, line 4: ► \$ 170,539.		`		
a Applied to 2014, but not more than line 2a			168,921.	
<b>b</b> Applied to undistributed income of prior			200,321	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus		<u></u>		
(Election required - see instructions)	0.			
d Applied to 2015 distributable amount				1,618.
e Remaining amount distributed out of corpus	0.			2,0200
5 Excess distributions carryover applied to 2015	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))	,			
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
<b>b</b> Prior years' undistributed income. Subtract		_		
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 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				181,862.
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)	0.			,
8 Excess distributions carryover from 2010	_		•	
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2016	_			
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2011	-			
b Excess from 2012	-			
c Excess from 2013				
d Excess from 2014	-			
e Excess from 2015	<u> </u>	1	<u> </u>	1

	L E. JONES,			63-12	78050 Page 10
Part XIV Private Operating F	oundations (see in:	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter that	it is a private operating			
foundation, and the ruling is effective for	r 2015, enter the date of t	he ruling	<b>▶</b>		
b Check box to indicate whether the found	lation is a private operatir	ng foundation described i		4942(j)(3) or49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
investment return from Part X for					
each year listed					
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c				1	
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>b</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		
(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)				<del></del>	
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income  Part XV   Supplementary Info	rmation (Comple	to this part only	if the foundatio	n had \$5 000 or me	oro in accote
at any time during t			ir the ioundatio	ii iiau \$5,000 or iii	ore iii assets
		40110113.7			
1 Information Regarding Foundation	-				
a List any managers of the foundation wh year (but only if they have contributed n			ributions received by th	ie foundation before the clo	se of any tax
	nore than \$5,000). (See s	ection 307 (d)(2) }			
SEE STATEMENT 10		<del></del>			<del></del>
b List any managers of the foundation wh other entity) of which the foundation ha			(or an equally large por	tion of the ownership of a p	artnership or
NONE					
2 Information Regarding Contribut	ion, Grant, Gift, Loan,	, Scholarship, etc., Pr	ograms:		
Check here ► ☐ If the foundation of the foundation makes gifts, grants, etc.	•	•	-	not accept unsolicited requ	
a The name, address, and telephone num	<del>`</del>			<del></del>	
	ibei oi e-ilian audiess oi i	ine person to whom appi	ications should be addi-	6556u.	
ARLENE SEVY	TT CVIVICUT	TTE MD 017	101		
930 HIGH STEPPER TRA					
b The form in which applications should be		•			
NO SPECIFIC FORM OF	APPLICATION	I IS PRESCRI	.BED		<del>_</del>
c Any submission deadlines.					
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields	kinds of institutions of	r other factors	
AWARDS ARE LIMITED T					STATES OF
		D WITH A CU			2111110
523801 11-24-15					Form <b>990-PF</b> (2015)

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3 Grants and Contributions Paid During th		Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
HARRISON HOME FOR SOBER LIVING	NONE	PUBLIC	GENERAL CONTRIBUTION	
507 RIVERHAVEN PLACE				
HOOVER, AL 35244				25,000
RUFFNER MOUNTAIN NATURE PRESERVE	NONE	PUBLIC	GENERAL CONTRIBUTION	
1214 81ST STREET SOUTH BIRMINGHAM, AL 35206				11,169
LIFELINE CHILDREN'S SERVICES	NONE	PUBLIC	GENERAL CONTRIBUTION	
2104 ROCKY RIDGE ROAD BIRMINGHAM, AL 35216				25,000
BINITIONAL, III 59810				•
ALABAMA POLICY INSTITUTE	NONE	PUBLIC	GENERAL CONTRIBUTION	
2213 MORRIS AVENUE				
BIRMINGHAM, AL 35203				17,52
ALABAMA TEEN CHALLENGE	NONE	PUBLIC	GENERAL CONTRIBUTION	
P.O. BOX 270				20.40
LINCOLN AL 35096  Total SEE C	CONTINUATION SHE	ET(S)	<b>▶</b> 3a	169.08
b Approved for future payment				
NONE				
	-			
Total	<u></u>		<b>&gt;</b> 3b	

C/O CARL E. JONES, JR.

Part XVI-A	Analysis of	Income-Producing	<b>Activities</b>
------------	-------------	------------------	-------------------

Enter 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	sion code	Amount	function income
a					
b				-	
c					
d					
e					
f					
g Fees and contracts from government agencies				·	
2 Membership dues and assessments					
3 Interest on savings and temporary cash					-
investments			14		
4 Dividends and interest from securities			14	103,197.	
5 Net rental income or (loss) from real estate:	* * * ° ž	AMARY TO	<i>'</i> ,'	"事实成熟"。 "先上"	1
a Debt-financed property					
b Not debt-financed property					<u> </u>
6 Net rental income or (loss) from personal	1				
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	<112,685.	>
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b			+		
C					
d					
e				2 226	
12 Subtotal. Add columns (b), (d), and (e)	<u>'</u>		0.	<3,826.	> 0.
13 Total Add line 12, columns (b), (d), and (e)				13	<3,826.
(See worksheet in line 13 instructions to verify calculations.)		· · · ·			
Part XVI-B Relationship of Activities t	o the Acc	omplishment of	Exemp	t Purposes	

ine No.	the foundation's exempt purposes (other than by providing funds for such purposes).					
	<del></del>					

Yes No

C/O CARL E. JONES, JR.

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

Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of

	,	(3) organizations) or in section	- · · · · · · · · · · · · · · · · · · ·	nizations?			
		ation to a noncharitable exemp	t organization of:				37
(1) Cas						1a(1)	X
(2) Oth	er assets					1a(2)	X
<b>b</b> Other tra	ansactions:						
` '	es of assets to a noncharital					1b(1)	<u> </u>
(2) Pur	chases of assets from a noi	ncharitable exempt organizatio	n			1b(2)	<u> </u>
( <b>3</b> ) Rer	ntal of facilities, equipment,	or other assets				1b(3)	<u> </u>
(4) Ren	mbursement arrangements					1b(4)	<u> </u>
( <b>5</b> ) Loa	ins or loan guarantees					1b(5)	<u> </u>
(6) Per	formance of services or me	mbership or fundraising solici	tations			1b(6)	<u> </u>
c Sharing	of facilities, equipment, ma	iling lists, other assets, or paid	employees			1c	<u> </u>
d If the an	swer to any of the above is	"Yes," complete the following s	schedule. Column (b) should a	lways show the fair	market value of the g	oods, other assets,	
or service	ces given by the reporting fo	oundation. If the foundation re	ceived less than fair market val	ue in any transactio	n or sharing arranger	ment, show in	
column	(d) the value of the goods,	other assets, or services receiv	red.				
a) Line no	(b) Amount involved	(c) Name of nonchard	able exempt organization	(d) Description	on of transfers, transaction	ns, and sharing arrange	ments
		N/	A.				
		-					
			<del>-</del>				
					<del></del>		
<del></del>	•••,						
			·			-	
					<del></del>		
						<u> </u>	
2a Is the fo	oundation directly or indirect	tly affiliated with, or related to,	one or more tax-exempt orgar	nizations described			
ın sectio	on 501(c) of the Code (other	r than section 501(c)(3)) or in	section 527?			Yes	X No
b If "Yes,"	complete the following sch	edule					
	(a) Name of org	anization	(b) Type of organization		(c) Description of re	lationship	
	N/A						
	•						
							_
Und	der penalties of perjury, I declare	that have examined this return, inc	luding accompanying schedules an	d statements, and to th	e best of my knowledge	May the IDS disease	00 1010
Sign and	belief, with true, correct, and cor	mplete Declaration of preparer (othe	r than taxpayer) is based on all infor	mation of which prepar	er has any knowledge	May the IRS discu return with the pre	parer
Here	) (1.13 m	my t	112 Oct 20	IL TRO	Burch	shown below (see	No
📜	anature of officer or frustee	1 0	Date	Title	70344	_ Las les	140
	Print/Type preparer's na	<u> </u>	's signature	Date	Check   If	PTIN	<del></del>
	Tring Type preparer 5 mg		•		self- employed		
Paid	TAMEC T P	TOURDDOOM	Z Richel	10/10/16	33 3	DOOOOOO	E
	JAMES L. R		<u> </u>	1		P0002002	
Prepare	Thin chamb - Ltb12	OS TTF (			Firm's EIN > 2	6-2732677	
Use Only	·	C CIDE			<del></del>		
	Firm's address > 21		EVARD, STE 300	J			. 4
	_ BI	RMINGHAM, AL	35243		Phone no. 20	<u>5-278-000</u>	
						Form <b>990-P</b>	<b>'F</b> (2015)

523622 11-24-15

#### 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

**Employer identification number** 

Name of the organization CACAJONES FAMILY FOUNDATION

C/O CARL E. JONES, JR.

63-1278050

Organization type (check one):						
Filers of	:	Section:				
Form 99	0 or 990-EZ	501(c)( ) (enter number) organization				
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation				
		527 political organization				
Form 99	0-PF	501(c)(3) exempt private foundation				
		X 4947(a)(1) nonexempt charitable trust treated as a private foundation				
		501(c)(3) taxable private foundation				
	nly a section 501(c)	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 Rule See instructions				
	For an organization	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor Complete Parts I and II. See instructions for determining a contributor's total contributions				
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 test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, line 1 Complete Parts I and II				
	year, total contribu	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the itions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for truelty to children or animals. Complete Parts I, II, and III				
	year, contributions is checked, enter hourpose. Do not contributions	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box here the total contributions that were received during the year for an exclusively religious, charitable, etc., complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively e, etc., contributions totaling \$5,000 or more during the year.				
but it mi	ust answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to 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 .

CACAJONES FAMILY FOUNDATION

Employer identification number

<u>C/O C</u>	ARL E. JONES, JR.	63	-12/8050
Part I	Contributors (see instructions) Use duplicate copies of Part I if addition	al space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CARL E. JONES, JR & ANN K. JONES  1510 SMOLIAN PL  BIRMINGHAM, AL 35205	\$163,164.	Person Payroll Noncash X (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
<del></del>		\$	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 Noncash (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 Noncash Complete Part II for noncash contributions )

Name of organization .

CACAJONES FAMILY FOUNDATION

C/O CARL E. JONES, JR.

Employer identification number

63-1278050

(Part III)	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
1	600 SHARES OF HERSHEY STOCK; 900 SHARES OF HOME DEPOT STOCK	- - - -	11/12/15
		_ \$163,164.	11/12/15
(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

Name of organization .

Employer identification number

CACAJONES	<b>FAMILY</b>	FOUNDATION

<u>/O CAR</u>	L E. JONES, JR.		63-1278050			
art III	the year from any one contributor. Complete completing Part III, enter the total of exclusively religious	Olumns (a) through (e) and the follo , charitable, etc , contributions of \$1,000 or	in section 501(c)(7), (8), or (10) that total more than \$1,000 for Wing line entry. For organizations riess for the year (Enter this info once) \$			
	Use duplicate copies of Part III if additiona	ıl space is needed.				
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
=						
		(e) Transfer of gif	ft			
	Transferee's name, address, an	d 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 gif	<u> </u>			
_	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee			
-		····				
n) No. From Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	Transferee's name, address, an	(e) Transfer of gif	Relationship of transferor to transferee			
-						
n) 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, an	nd ZIP + 4	Relationship of transferor to transferee			
-						

FORM 99	O-PF G	AIN OR (LOSS) I	FROM SALE	OF	ASSETS	STA	TEMENT 1
DESCRIP	(A) TION OF PROPERTY			P	MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
REGIONS	FINANCIAL CORPO	 RATION		PU	JRCHASED	06/01/06	11/17/15
	(B)	(C)	(D)		(E)		(F)
	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE SALE	OF	DEPRE	C. GAIN	OR LOSS
	36,302.	105,346.		0.	•	0.	<69,044.>
DESCRIP	(A) TION OF PROPERTY			F	MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
REGIONS	FINANCIAL CORPO	 RATION		PU	JRCHASED	12/07/07	06/18/15
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPRE	C. GAIN	(F)
-	34,642.	88,970.	-	0.	•	0.	<54,328.
DESCRIP	(A) TION OF PROPERTY			I	MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
SOUTHER	N COMPANY	_		PU	JRCHASED	11/28/06	06/18/15
	(B)	(C)	(D)		(E)		(F)
	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE SALE	OF	DEPRE	C. GAIN	OR LOSS
-	37,057.	31,127.		0.	•	0.	5,930.

(A) DESCRIPTION OF PROPER	ry —			AC	ANNER QUIRED	DA'	IRED	DATE SO	
SOUTHERN COMPANY				PUR	CHASED	11/2	8/06	11/17/	15
(B)	(C)	\D	(D)	O.E.	(E)			(F)	
GROSS SALES PRICE	COST O		EXPENSE SALE	OF	DEPRE	c.	GAIN	OR LOSS	; 
88,979	. 70	,742.		0.		0.		18,23	37.
(A) DESCRIPTION OF PROPER'	ГY				ANNER QUIRED	DA'		DATE SO	)LD
MAINGATE MLP FUND I S	HARES			PUR	CHASED	07/2	9/14	05/11/	16
(B)	(C)		(D)		(E)			(F)	
GROSS SALES PRICE	COST COTHER BA		EXPENSE SALE	OF	DEPRE	c.	GAIN	OR LOSS	5
26,440	. 39	,920.		0.		0.		<13,48	30.>
CAPITAL GAINS DIVIDEN	OS FROM PAR	T IV							0.
TOTAL TO FORM 990-PF,	PART I, LI	NE 6A				-		<112,68	35.>
FORM 990-PF INTEREST	ON SAVINGS	AND T	TEMPORARY	CASH	INVEST	MENTS	STA	TEMENT	2
SOURCE			(A) EVENUE R BOOKS	NET	(B) INVEST	MENT		(C) DJUSTED T INCOME	E
BOND PREMIUM AMORTIZA OAKWORTH CAPITAL BANK	rion	_	<465.>		<	465.>			
60000518301 OAKWORTH CAPITAL BANK	MONEY		5,981.		5,	981.			
MARKET ACCOUNT			146.			146.			
TOTAL TO PART I, LINE	3		5,662.		5,	662.			

SOURCE GROSS GAINS REVENUE NET INVEST- ADJUSTED CAKWORTH CAPITAL BANK 60000518301 103,197. 0. 103,197. 103,197.  TO PART I, LINE 4 103,197. 0. 103,197. 103,197.  FORM 990-PF ACCOUNTING FEES STATEMENT INCOME PER BOOKS MENT INCOME PER BOOKS MENT INCOME NET INCOME PER BOOKS MENT INCOME NET INCOME PURPORT OF TAXES STATEMENT INCOME PER BOOKS MENT INCOME NET INCOME PURPORT OF TAXES STATEMENT INCOME PER BOOKS MENT INCOME NET INCOME PURPORT OF TAXES STATEMENT INCOME NET INCOME NET INCOME PURPORT OF TAXES STATEMENT INCOME NET INCOME NET INCOME PURPORT OF TAXES STATEMENT INCOME NET INCOME NET INCOME PURPORT OF TAXES STATEMENT INCOME NET INCOME NET INCOME PURPORT OF TAXES STATEMENT INCOME NET INCOME NET INCOME PURPORT OF TAXES PAID 6,530. 0.  TO FORM 990-PF, PG 1, LN 18 10,530. 0. 0. STATEMENT INCOME NET INCOME STATEMENT OF TAXES	FORM 990-PF	DIVIDENDS	AND INTER	EST FROM SECUR	RITIES ST	TATEMENT 3
### BANK 60000518301	SOURCE		GAINS	REVENUE	NET INVEST-	(C) ADJUSTED NET INCOME
FORM 990-PF  ACCOUNTING FEES  (A)  (B)  (C)  (D)  EXPENSES  NET INVEST- ADJUSTED  CHARTY  PER BOOKS  MENT INCOME  ACCOUNTING & ATTORNEY FEES  1,700. 850.  TO FORM 990-PF, PG 1, LN 16B  1,700. 850.  FORM 990-PF  TAXES  STATEMENT  (A)  (B)  (C)  (C)  (D)  CHARTY  PURPO  (A)  EXPENSES  NET INVEST- ADJUSTED  CHARTY  ADJUSTED  CHARTY  PER BOOKS  MENT INCOME  PURPO  (A)  FEDERAL ESTIMATED TAX  FEDERAL TAXES PAID  (A)  (B)  (C)  (D)  ADJUSTED  CHARTY  NET INCOME  PURPO  (A)  (B)  (C)  (D)  CHARTY  PER BOOKS  MENT INVEST- ADJUSTED  CHARTY  OF FORM 990-PF, PG 1, LN 18  (A)  (B)  (C)  (C)  (D)  CHARTY  PER BOOKS  MENT INVEST- ADJUSTED  CHARTY  PORT  OTHER EXPENSES  STATEMENT  (A)  (B)  (C)  (D)  CHARTY  PORT  OTHER EXPENSES  STATEMENT  (A)  EXPENSES  NET INVEST- ADJUSTED  CHARTY  PORT  OTHER EXPENSES  STATEMENT  (A)  (B)  (C)  (D)  CHARTY  PURPO  CHARTY  PURPO  SOUTHEASTERN COUNCIL OF  FOUNDATION DUES  600. 0.		103,197.		0. 103,197.	103,197.	
CA   CB   CD   CHART	TO PART I, LINE 4	103,197.		0. 103,197.	103,197.	
DESCRIPTION  EXPENSES PER BOOKS MENT INCOME NET INCOME PURPORT OF PER BOOKS MENT INCOME PURPORT OF	FORM 990-PF		ACCOUNTI	NG FEES	Si	FATEMENT 4
TO FORM 990-PF, PG 1, LN 16B 1,700. 850.  FORM 990-PF TAXES STATEMENT  (A) (B) (C) (D)  EXPENSES NET INVEST- ADJUSTED CHART PER BOOKS MENT INCOME NET INCOME PURPO  FEDERAL ESTIMATED TAX 4,000. 0. FEDERAL TAXES PAID 6,530. 0.  TO FORM 990-PF, PG 1, LN 18 10,530. 0.  FORM 990-PF OTHER EXPENSES STATEMENT  (A) (B) (C) (D)  EXPENSES NET INVEST- ADJUSTED CHART  OTHER EXPENSES STATEMENT  (A) (B) (C) (D)  EXPENSES NET INVEST- ADJUSTED CHART PER BOOKS MENT INCOME NET INCOME PURPO  SOUTHEASTERN COUNCIL OF FOUNDATION DUES 600. 0.	DESCRIPTION		EXPENSES	NET INVEST-	ADJUSTED	(D) CHARITABLE PURPOSES
FORM 990-PF  TAXES  STATEMENT  (A)  EXPENSES NET INVEST- PER BOOKS MENT INCOME NET INCOME PURPO  FEDERAL ESTIMATED TAX FEDERAL TAXES PAID  TO FORM 990-PF, PG 1, LN 18  (A)  EXPENSES  OTHER EXPENSES  STATEMENT  (A)  EXPENSES  OTHER EXPENSES  STATEMENT  (B)  (C)  (D)  (D)  (C)  (D)  (D)  (C)  (D)  (C)  (D)  (D	ACCOUNTING & ATTORNI	EY FEES	1,700.	850.		850.
DESCRIPTION  (A)  EXPENSES  NET INVEST- ADJUSTED CHARIT PER BOOKS MENT INCOME  NET INCOME PURPO  FEDERAL ESTIMATED TAX 4,000.  6,530.  TO FORM 990-PF, PG 1, LN 18  10,530.  O.  FORM 990-PF  OTHER EXPENSES  STATEMENT  (A)  (B)  (C)  (D)  (D)  (D)  (D)  (D)  (D)  (D	TO FORM 990-PF, PG	l, LN 16B	1,700.	850.		850.
DESCRIPTION  EXPENSES NET INVEST- ADJUSTED PURPO PURPO PURPO FEDERAL ESTIMATED TAX 4,000. 0. FEDERAL TAXES PAID 6,530. 0.  TO FORM 990-PF, PG 1, LN 18 10,530. 0.  FORM 990-PF  OTHER EXPENSES STATEMENT  (A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARIT PER BOOKS MENT INCOME NET INCOME PURPO SOUTHEASTERN COUNCIL OF FOUNDATION DUES 600. 0.	FORM 990-PF		TAX	ES	Si	PATEMENT 5
TO FORM 990-PF, PG 1, LN 18 10,530. 0.  FORM 990-PF OTHER EXPENSES STATEMENT  (A) (B) (C) (D)  EXPENSES NET INVEST- ADJUSTED CHARIT PER BOOKS MENT INCOME NET INCOME PURPO  SOUTHEASTERN COUNCIL OF FOUNDATION DUES 600. 0.	DESCRIPTION		EXPENSES	NET INVEST-	ADJUSTED	(D) CHARITABLE PURPOSES
FORM 990-PF  OTHER EXPENSES  (A)  EXPENSES NET INVEST- PER BOOKS MENT INCOME NET INCOME PURPO  SOUTHEASTERN COUNCIL OF FOUNDATION DUES  600.  OTHER EXPENSES  STATEMENT  (D)  (D)  (D)  (D)  EXPENSES NET INVEST- ADJUSTED CHARIT PER BOOKS MENT INCOME NET INCOME PURPO  600.  0.		AX —				0.
DESCRIPTION    CA   (B) (C) (D)	TO FORM 990-PF, PG	L, LN 18	10,530.	0.		0.
EXPENSES NET INVEST- ADJUSTED CHARIT PER BOOKS MENT INCOME NET INCOME PURPO  SOUTHEASTERN COUNCIL OF FOUNDATION DUES 600. 0.	FORM 990-PF		OTHER E	XPENSES	ST	FATEMENT 6
FOUNDATION DUES 600. 0.	DESCRIPTION		EXPENSES	NET INVEST-	ADJUSTED	(D) CHARITABLE PURPOSES
	FOUNDATION DUES					600.
TO FORM 990-PF, PG 1, LN 23 5,209. 4,609.	TO FORM 990-PF, PG	1, LN 23	5,209.	4,609.		600.

FORM 990-PF	CORPORATE STOCK		STATEMENT 7
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
VANGUARD SH TRM INC GR ADM		100,021.	100,208.
VANGUARD TOTAL INTERNATIONAL B	OND INDEX ADM	75,000.	79,247.
AT&T INC		64,266.	86,326.
BRISTOL MYERS SQUIBB		19,723.	40,367.
CATERPILLAR CORP		100,416.	174,024.
CENTURYLINK INC		50,076.	33,900.
CHEVRON CORP		95,022.	91,607.
CLOROX CO		60,435.	120,828.
CONOCOPHILLIPS		31,526.	19,924.
FRONTIER COMMUNICATIONS CORP		2,517.	1,706.
GENERAL MILLS INC		59,550.	119,910.
GENUINE PARTS CO		28,832.	58,152.
HALYARD		1,464.	2,157.
HERSHEY COMPANY		100,322.	102,135.
HOME DEPOT, INC.		198,721.	383,148.
HONDA MOTORS		12,732.	16,788.
IBM		39,549.	56,884.
INTEL CORP		34,851. 89,489.	52,534. 171,289.
JOHNSON & JOHNSON KIMBERLY-CLARK CORP		33,746.	70,507.
MCDONALDS CORP		34,883.	73,236.
MERCK & CO INC		25,259.	25,711.
MICROSOFT CO		40,765.	81,885.
NEXTERA ENERGY		33,188.	60,060.
PEPSICO, INC		12,805.	24,281.
PHILLIPS 66		9,346.	18,242.
PROCTOR & GAMBLE		36,236.	42,870.
REGIONS FINANCIAL		1,059,435.	300,139.
SOUTHERN CO		306,739.	428,744.
SYSCO		25,243.	34,014.
THE COCA-COLA COMPANY		34,688.	35,680.
VERIZON COMMUNICATIONS		94,585.	130,304.
VULCAN MATERIALS, INC.		70,753.	198,475.
WEYERHAUSER COMPANY REIT		24,830.	23,783.
3-M COMPANY		24,787.	49,654.
MAINGATE MLP FUND		39,791.	27,550.
SPDR GOLD TR GOLD		88,677.	69,636.
VANGUARD BALANCED INDEX ADM		152,920.	155,919.
VERIZON COMMUNICATIONS		0.	0.
TOTAL TO FORM 990-PF, PART II,	LINE 10B	3,313,188.	3,561,824.

FORM 990-PF CC	PRPORATE BONDS		STATI	EMENT	8
DESCRIPTION		BOOK VALUE		FAIR MARKET VALUE	
AUTOZONE INC BK-ENTRY CISCO SYSTEMS INC TOTAL TO FORM 990-PF, PART II, LINE 10C		50,15 50,35		54,996.	
		100,51	13.		
FORM 990-PF PART VIII - LIST TRUSTEES AND	OF OFFICERS, D		STATI	EMENT	9
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB		
CARL E. JONES, III MOBILE, AL 36608	PRESIDENT & DI	RECTOR 0.	0.	0	ο.
ANN K. JONES BIRMINGHAM, AL 35205	VICE-PRESIDENT 1.00	& DIRECTOR 0.	0.	O	ο.
CARL E. JONES, JR. BIRMINGHAM, AL 35205	TREASURER & DI	RECTOR 0.	0.	O	ο.
ARLENE J. SEVY SYKESVILLE, MD 21784	SECRETARY & DI	RECTOR 0.	0.	O	ο.
ERIC B. SEVY SYKESVILLE, MD 21784	DIRECTOR 1.00	0.	0.	C	0.
LAURA B. JONES MOBILE, AL 36608	DIRECTOR 1.00	0.	0.	C	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII	0.	0.		0.

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FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT

NAME OF MANAGER

ANN K. JONES CARL E. JONES, JR.

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Part XXV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount contribution status of any foundation manager Name and address (home or business) recipient or substantial contributor PUBLIC GENERAL CONTRIBUTION NONE THE WELLHOUSE 8121 PARKWAY DRIVE 15,000. LEEDS AL 35094 NONE PUBLIC GENERAL CONTRIBUTION K.I.D.S. INC P.O. BOX 39090 2,000. BIRMINGHAM, AL 35208 BILLY GRAHAM EVANGELICAL ASSOC. NONE PUBLIC GENERAL CONTRIBUTION 1 BILLY GRAHAM PARKWAY CHARLOTTE, NC 28201 10,000. GENERAL CONTRIBUTION NONE PUBLIC COMMUNITY SOUP BOWL 1711 23RD AVE 3,000. TUSCALOOSA, AL 35401 NONE PUBLIC GENERAL CONTRIBUTION SHEPARD'S FOLD MINISTRY 201 E LOEB ST 25,000. CARDWELL MO 63829 GENERAL CONTRIBUTION KING'S HOME NONE PUBLIC 221 KINGS HOME DRIVE CHELSEA, AL 35043 15,000. Total from continuation sheets 70 000.