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Form **990-PF** Department of the Treasury Internal Revenue Service

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.
Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf.

OMB No 1545-0052

Fort	calendar year 2015 or tax year beginning JUL	1, 2015	, and ending	JUN 30, 2016	
Nar	ne of foundation			A Employer Identification	number
S	EBY B. JONES FAMILY FOUND	ATION		31-1578859	
	ber and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
_P	O BOX 19067			919-829-24	99
•	or town, state or province, country, and ZIP or foreign pe	ostal code		C If exemption application is p	ending, check here
	ALEIGH, NC 27619				
G C	theck all that apply: Initial return	Initial return of a for	rmer public charity	D 1. Foreign organizations	, check here
	Final return	Amended return		2. Foreign organizations me	eting the 85% test.
	Address change	Name change		2. Foreign organizations me check here and attach co	mputation
H C	theck type of organization: X Section 501(c)(3) ex			E If private foundation sta	
<u> </u>	<del> \/ /                  </del>	Other taxable private founda	<del></del>	under section 507(b)(1)	• //
	ur market value of all assets at end of year J Accounting	ng method: X Cash her (specify)	Accrual	F If the foundation is in a (	
( <i>II</i>			asis )	under section 507(b)(1)	(b), check here
	It   Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(a) Adjusted not	(d) Disbursements
	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) )	expenses per books	income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received	450,000.			
	2 Check if the foundation is not required to attach Sch. B				
	lnterest on savings and temporary cash investments	136,040.	136,040.	136,040.	STATEMENT 1
	4 Dividends and interest from securities	158,557.	158,557.	158,557.	STATEMENT 2
	5a Gross rents				
	th Net rental income or (loss)	24 050			
ē	68 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 6 1 2 2 3 5 5	-24,058.			
Revenue	assets on line 6a	$\neg$ —— $+$	0.		
æ	7 Capital gain net income (from Part+V Tine 2) / 15 5 8 Net short-term capital gain 5 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7			N/A	<u> </u>
	O Jacomo modifications	<del>\( \)</del>		N/A	
	10a and allowances	10/		<del> </del>	<del> </del>
	b Less Cost of goods sold	141			
	c Gross profit or (loss)  OGDEN	83,304.	41,162.	83,304.	STATEMENT 3
	12 Total. Add lines 1 through 11	803,843.	335,759.	377,901.	
	13 Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
	14 Other employee salaries and wages			<b></b>	
ģ	15 Pension plans, employee benefits			<del> </del>	ļ
penses	16a Legal fees	27 140	3,750.	ļ	3,750.
ĝ	b Accounting fees STMT 4	37,140.		0.	
Ä	c Other professional fees STMT 5	84,266. 41,215.	84,266. 41,215.	0.	0.
ativ	18 Taxes STMT 6	8,610.	5,042.	0.	0:
stra	19 Depreciation and depletion	0,010.	3,044.		ļ <u>-</u>
ᆵ	20 Occupancy	<del></del>	<del></del>	<del> </del>	
Ą	21 Travel, conferences, and meetings				
ē	22 Printing and publications				<u> </u>
<u>S</u>	23 Other expenses STMT 7	15,703.	14,354.	0.	116.
Operating and Administrative	24 Total operating and administrative		<del></del>		
per	expenses. Add lines 13 through 23	186,934.	148,627.	0.	3,866.
Ō	25 Contributions, gifts, grants paid	484,400.			3,866. 484,400.
	26 Total expenses and disbursements.				
_	Add lines 24 and 25	671,334.	148,627.	0.	488,266.
	27 Subtract line 26 from line 12:				
	Excess of revenue over expenses and disbursements	132,509.	108 435	<u> </u>	<b></b>
	b Net investment income (if negative, enter -0-)		187,132.	377,901.	<u> </u>
5235 11-2	C Adjusted net income (if negative, enter -0-)		<del></del>	3//,301.	Form <b>990-PF</b> (2015)
11-0	4-15 LHA For Paperwork Reduction Act Notice, see	msauchons.			rvini <b>330-1 (</b> (2013)

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LHA For Paperwork Reduction Act Notice, see instructions.

<u>For</u>	m 99	0-PF (2015) SEBY B. JONES FAMILY FO			L578859 Page 2
Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only			Beginning of year	End of	<del></del>
<u></u>	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	52,840.	1,912.	1,912.
	2	`Savings and temporary cash investments	1,895,030.	2,111,700.	2,111,700.
	3	Accounts receivable >			
		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	Other notes and loans receivable 528,357.			
		Less: allowance for doubtful accounts ▶ 0.	603,668.	528,357.	528,357.
Ś	8	Inventories for sale or use			
Assets	•	Prepaid expenses and deferred charges			
As		Investments - U.S. and state government obligations			
	ı	Investments - corporate stock STMT 8	7,050,344.	6,574,340.	7,239,114.
	ı	Investments - corporate bonds STMT 9	1,522,843.	2,105,516.	2,206,790.
	ı	Investments - Land, buildings, and equipment basis	1,322,043.	2,103,310.	2,200,130.
	''				
	12	Less accumulated depreciation  Investments - mortgage loans			
	12 13	Investments - other STMT 10	836,713.	927,935.	964,950.
		Land, buildings, and equipment basis	030,713.	341,333.	304,330.
	14				
	4-	Less accumulated depreciation	35,587.	176 500	176 500
	1	Other assets (describe ► STATEMENT 11)	33,307.	-176,500.	-176,500.
	16	Total assets (to be completed by all filers - see the	11 007 005	10 072 200	10 000 202
_	4-	instructions. Also, see page 1, item I)	11,997,025.	12,073,260.	12,876,323.
	1	Accounts payable and accrued expenses	110.	5,050.	
	18	Grants payable			
Liabilities	19	Deferred revenue			
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons			
Ë	21	Mortgages and other notes payable		·	
_	22	Other liabilities (describe )	<del></del>	<del></del>	
	00	Tatal Kahilistan (add lines 17 through 99)	110.	E 0E0	
_	23	Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here		5,050.	
		and complete lines 24 through 26 and lines 30 and 31.			
es	24	Unrestricted			
Š	25	Temporarily restricted			
als	l	· · ·	<del></del>		
or Fund Balances	26	Permanently restricted  Foundations that do not follow SFAS 117, check here	<del></del>		
Ę		·	ĺ		
<u>6</u>	0.7	and complete lines 27 through 31.	11 507 700	11 507 700	
Net Assets	27	Capital stock, trust principal, or current funds	11,597,700.	11,597,700.	
1556	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
χţ	29	Retained earnings, accumulated income, endowment, or other funds	399,215.	470,510.	
ž	30	Total net assets or fund balances	11,996,915.	12,068,210.	
	31	Total liabilities and net assets/fund balances	11,997,025.	12,073,260.	
_				12,013,200	
LP	art	Analysis of Changes in Net Assets or Fund B	alances		
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30		
	(mus	st agree with end-of-year figure reported on prior year's return)		1	11,996,915.
		r amount from Part I, line 27a		2	132,509.
		r increases not included in line 2 (itemize)			0.
		lines 1, 2, and 3		4	12,129,424.
5		eases not included in line 2 (itemize) DISALLOWED WAS		5	61,214.
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30		12,068,210.
					Form <b>990-PF</b> (2015)

Part IV Capital Gains and Losses for Tax on Investment Income				31-1578859					8859	Page 3	
<del></del>	e the kind(s) of property sold (e.g.,			(b) H	ow acq Purcha	uired (c	) Date a	cquired	(d) Dat	(d) Date sold	
2-story brick ware	house; or common stock, 200 shs.	MLC Co.)		) P-	Purcha Donati	ise (Con	mo., da	ay, yr.)	(mo., d		
 1a `											
b SEE ATTACHED	STATEMENTS										
С											
<u>d</u>				<u> </u>						·	
<u>e</u>			<del></del> _	Ь,				<del> !</del>			
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale					nin or (loss) (f) minus (ç	1)		
<u>a</u>		-									
<u>b</u>											
<u>c</u>				+		<del>_</del>					
d 6,188,395.			6,212,45	3					-24	,058.	
	gain in column (h) and owned by t			3.	_	(I) G	ains (C	ol. (h) gaın r		,030.	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (1) col. (j), if any			còl. (k	), but n	ot less than (from col. (h	-0-) or		
a											
b											
С				$-\downarrow$							
d											
e				$\dashv$					<u>-24</u>	,058.	
2 Capital gain net income or (net capi	tal loss) { If gain, also enter   If (loss), enter -0-	ın Part I, line ın Part I, line	7 7	}	2				-24	,058.	
3 Net short-term capital gain or (loss)	) as defined in sections 1222(5) and	d (6):		1	1						
If gain, also enter in Part I, line 8, co	olumn (c).			<b> </b>					150	001	
If (loss), enter -0- in Part I, line 8  Part V Qualification Un	der Section 4940(e) for	Dodugod	Tay on Not	1000	3	ant Inco			<u>-156</u>	<u>,201.</u>	
if section 4940(d)(2) applies, leave this  Was the foundation liable for the section  If "Yes," the foundation does not qualify	on 4942 tax on the distributable am y under section 4940(e). Do not coi	mplete this pa	irt.						Yes	X No	
1 Enter the appropriate amount in ea	ch column for each year; see the in	Structions bei	iore making any e						(4)		
Base periód years Calendar year (or tax year beginning			Net value of no					Distribi (col. (b) divi			
2014		9,962.				,264.				39846	
2013		9,804.	<del></del>			,461.				39144	
2012		8,850.				,351.				61309 81240	
2011 2010		5,800. 9,750.				,316.				79416	
2010		<u> </u>	<u> </u>		<u>, , , , , , , , , , , , , , , , , , , </u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				17=10	
2 Total of line 1, column (d)							2		. 3	00955	
3 Average distribution ratio for the 5- the foundation has been in existence		n line 2 by 5,	or by the number	r of yea	ırs		3			60191	
4 Enter the net value of noncharitable	•	ıne 5					4	1:	•	,682.	
5 Multiply line 4 by line 3	. 100 according to the month at Ay I						5			, <u>44</u> 6.	
	/40/ -4 David Line 07h)										
6 Enter 1% of net investment income	: (1% 01 Part I, line 2/D)						6		-	,871.	
7 Add lines 5 and 6							7_	<del></del> -		,317.	
8 Enter qualifying distributions from I If line 8 is equal to or greater than I		1b, and comp	olete that part usin	ng a 1%	6 tax ra	te.	8		488	,266.	
See the Part VI instructions.			· 								
523521 11-24-15								Fo	orm <b>990-</b>	PF (2015	

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523521 11-24-15

orm 990-PF (2015) SEBY B. JONES FAMILY FOUNDATION							15788			Page 4
_	rt VI   Excise Tax Based on Investment Income (Section 4940				e), or 4	948 -	- see in	stru	CTIO	<u>1S)</u>
1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and er	iter "N/	/A"	on line 1.	)		Į.			
	Date of ruling or determination letter: (attach copy of letter if nec						ļ			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	ــا	an	nd enter 1%	þ	1			<u>3,7</u>	<u>43.</u>
	of Part I, line 27b				Ì					
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	of Par	rt I,	line 12, col. (b).	J		l			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Ot	hers er	nte	r -0-)		2				0.
3	Add lines 1 and 2					3			3,7	43.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Of	thers e	ente	er -0-)		4				0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			•		5			3,7	<del>43.</del>
	Credits/Payments:									
	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	1	15	421.					
	Exempt foreign organizations - tax withheld at source	6b	1			1				
	Tax paid with application for extension of time to file (Form 8868)	6c	$\top$			1 !				
	Backup withholding erroneously withheld	6d	十			1				
	Total credits and payments. Add lines 6a through 6d	<u> </u>		-		7	ł	1	5,4	21
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attack.	shad				8		<del>_</del>	<u>J, =</u>	<u> 4                                   </u>
		ineu			_		<del> </del>			
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed					9	<del> </del>		1 6	70
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	-		670 la 1		10	<b>├</b> ──-		1,6	
	Enter the amount of line 10 to be: Credited to 2016 estimated tax		ΤŢ	.,678. Refu	nded 📂	11_				0.
	rt VII-A Statements Regarding Activities								Vaa	Na
1a	During the tax year, did the foundation attempt to influence any national, state, or local legisl	lation o	or c	did it participate oi	intervene	: IN	}-		Yes	
	any political campaign?						-	_1a		<u>X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos						-	1b		<u>X</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	d copi	ies	of any materials	publishe	ed or		1		
	distributed by the foundation in connection with the activities.									
C	Did the foundation file Form 1120-POL for this year?						ļ	1c		_X_
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	year:						ŀ		
	(1) On the foundation. > \$ 0 . (2) On foundation managers.	. > \$	\$_		0.	_				
e	Enter the reimbursement (if any) paid by the foundation during the year for political expendi				ition					
	managers. ▶ \$ 0 •									
2	Has the foundation engaged in any activities that have not previously been reported to the IF	RS?					l	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 is	nstrum	nen	it, articles of incor	poration, o	or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change			•			Ì	3		х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the yea						Ī	4a	X	
	If "Yes," has it filed a tax return on Form 990-T for this year?						Ţ	4b	X	
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?						ŀ	5		X
٠	If "Yes," attach the statement required by General Instruction T.						ŀ			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied er	ther•					ĺ			ľ
U	<ul> <li>By language in the governing instrument, or</li> </ul>	uioi.								
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandator</li> </ul>	ı dıroo	atio	ne that conflict un	h tha ctate	o love	j		! !	1
		y unec	JUU	ns mai connict wi	II IIIE SIAII	; law		_		<b>.</b>
_	remain in the governing instrument?					,	}	6	37	X
′	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," con	npiete	e Pa	art II, col. (c), an	o Pan XV	,	ŀ	7	X	
_							İ			
8a	Enter the states to which the foundation reports or with which it is registered (see instructio	ns) 🕨	_							ļ
	NC									
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	ttorney	y G	eneral (or designa	te)		1		 	
	of each state as required by General Instruction G? If "No," attach explanation						1	8b	X	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of se				5) for cale	endar				
	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," $c$						ļ	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedu	le list <u>in</u> e	ig th	eir names and addre	sses			10_		<u>X</u>
							Forr	n <b>99</b> 0	)-PF	(2015)

	990-PF (2015) SEBY B. JONES FAMILY FOUNDATION 31-1578	<u>859</u>		Page 5
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	X	<u> </u>
	Website address ► N/A			
14	The books are in care of ► SEBY RUSSELL JONES  Telephone no. ► 919-82			
	Located at ► 1207 FRONT STREET, RALEIGH, NC ZIP+4 ►27	609		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		. •	·
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	<del></del>
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16	<u> </u>	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
_	foreign country			L
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	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?			
	(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)?			
	(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			
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations			<u> </u>
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
0	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		<u>X</u>
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)):			
а	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?			
	If "Yes," list the years <b>&gt;</b>			
b	If "Yes," list the years \( \rightarrow\)			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		<u> </u>
C	If the provisions of section 4942(a)(2) are being applied to any 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	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,			
	Form 4720, to determine if the foundation had excess business holdings in 2015.)  N/A	3b		
<b>4</b> a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	1		<del></del> -
_	had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		x

orm 990-PF (2015) SEBY B. JONES FAMILY FOU			<u>31-15788</u>	59	Page 6
Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be F	Required (continu	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	1	
(2) Influence the outcome of any specific public election (see section 4955); or	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	s X No	1	ļ
(4) Provide a grant to an organization other than a charitable, etc., organization	described in section	П.,	( <del>.</del>		
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		s X No		
the prevention of cruelty to children or animals?			S LALINO		ì
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		n Regulations	N/A	5b	l
section 53.4945 or in a current notice regarding disaster assistance (see instru- Organizations relying on a current notice regarding disaster assistance check hi	•		N/A	30	
c if the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		unod			
expenditure responsibility for the grant?			s 🔲 No		
If "Yes," attach the statement required by Regulations section 53 4945		I/A I	.s NU		į
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	• •		ł	- 1	ŀ
a personal benefit contract?	ay promiums on	☐ <b>Y</b>	s X No		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal henefit contract?			6b	x
If "Yes" to 6b, file Form 8870.			<u> </u>		<del></del>
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	s X No		
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b	
Part VIII Information About Officers, Directors, Trusto		nagers, Highly	/		
Paid Employees, and Contractors					
List all officers, directors, trustees, foundation managers and their		(c) Compensation	(d) Contributions to	T .	\ Cypopaa
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	acc	) Expense ount, other
(4)	to position	enter -0-)	compensation	al al	llowances
SEE STATEMENT 12		0.	0.	1	0.
SEE STATEMENT IZ	<del></del>			+	
			ľ		
				-	
	<del></del>				
		<u> </u>			
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e	) Expense ount, other
(a) Name and address of each employee paid more than 650,000	devoted to position	(C) Compensation	and deterred compensation	al	lowances
NONE					
		ļ	<u></u>	<u> </u>	
		ļ		<u> </u>	
				1	
				1	
				1	
		ļ		1	
Total number of other employees paid over \$50,000		L		<u> </u>	
LOTAL BURDOEL DI OMEL EMDIOVEES DAID OVEL SSU 1990	,				

Form **990-PF** (2015)

Form 990-PF (2015) SEBY B. JONES FAMILY FOUNDATION	31-15	78859_ Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NC	NE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	_	
	<del></del>	
		<del>-  </del>
	<u></u>	
Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities	<u> </u>	<b>▶</b> 0
	<del></del>	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in number of organizations and other beneficiaries served, conferences convened, research papers produced		Expenses
1 N/A		
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 lines	1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
Table Add Inco 1 through 2		0.
Total. Add lines 1 through 3		

0 . Form **990-PF** (2015)

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

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

income. Enter 1% of Part I, line 27b

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

Form **990-PF** (2015)

5

6

Part XIII. Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	( <b>d</b> ) 2015
1 Distributable amount for 2015 from Part XI,				
line 7				609,320.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			0.	
<b>b</b> Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2015:				
a From 2010 260, 261.				
b From 2011 290, 835.			,	
c From 2012 134,403.				
d From 2013 e From 2014				
f Total of lines 3a through e	685,499.			
4 Qualifying distributions for 2015 from	003,433.			
Part XII, line 4: ►\$488, 266.				
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				488,266.
e Remaining amount distributed out of corpus	0.		<del></del>	
5 Excess distributions carryover applied to 2015	121,054.			121,054.
(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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	564,445.			
<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			<del></del>	
lines 4d and 5 from line 1. This amount must				
be distributed in 2016			<u> </u>	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)	0.			
8 Excess distributions carryover from 2010				
not applied on line 5 or line 7	139,207.			
9 Excess distributions carryover to 2016.	405 000			
Subtract lines 7 and 8 from line 6a	425,238.			
10 Analysis of line 9:	1			
a Excess from 2011 290, 835.				
b Excess from 2012 134,403.				
c Excess from 2013 d Excess from 2014				
e Excess from 2015	ł			
523581 11 24 15				Form <b>990-PF</b> (2015)

Part XIV Private Operating For	oundations (see in			N/A	L-13/0033 rage it
1 a If the foundation has received a ruling of			71, question 6)	N/A	<del></del>
foundation, and the ruling is effective for					
b Check box to indicate whether the found	·	<del>-</del>	n cootion	4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	ig loundation described i	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	(-)	(5) = 5 · ·	(0)2010	(0,2014	(0) 10101
each year listed					
b 85% of line 2a		_		<del>-  </del>	<del></del>
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.			ļ		
Subtract line 2d from line 2c					
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		4-41	if the effective de	-ti l d	
Part XV Supplementary Info at any time during t		•	ii the iounda	ation nad \$5,000	or more in assets
1 Information Regarding Foundation		400.0110.,			
a List any managers of the foundation wh	•	than 2% of the total cont	ribiltions received	hy the foundation before	the close of any tax
year (but only if they have contributed n			i ibaliono i occivoa	by allo loundation bolore	the close of any ax
NONE					
<ul> <li>b List any managers of the foundation wh other entity) of which the foundation has</li> </ul>			(or an equally large	e portion of the ownershi	p of a partnership or
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:		
Check here ▶ ☐ If the foundation o	nly makes contributions	to preselected charitable	organizations and	does not accept unsolici	ted requests for funds. If
the foundation makes gifts, grants, etc.	(see instructions) to indiv	riduals or organizations u	nder other conditi	ons, complete items 2a,	b, c, and d.
a The name, address, and telephone num	ber or e-mail address of t	he person to whom appl	cations should be	addressed:	
SEBY RUSSELL JONES,					
PO BOX 19067, RALEIG	•				
b The form in which applications should b		tion and materials they sl	nould include:		
c Any submission deadlines:			,		
NONE	e cuch ac hy accarachia	al areae, charatable fields	kinds of institution	ne or other factors:	
d Any restrictions or limitations on awards LIMITED TO USA	s, such as by yevyraphica	ai aivas, viiai liavie neius,	vinos oi institutioi	กอ, บา บเกซา เลนเบาจ.	

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager or substantial contributor Name and address (home or business) recipient a Paid during the year ALZHEIMER'S ASSOCIATION NONE ÞС MEDICAL 400 OBERLIN ROAD, SUITE 220 RALEIGH, NC 27605 1,000, BENCHMARK MINISTRIES NONE PC GENERAL SUPPORT 200 THORN HOLLOW DRIVE APEX, NC 27523 15,000. BOY SCOUTS OF AMERICA - OCCONEECHEE NONE ÞС COMMUNITY SUPPORT COUNCIL PO BOX 41229 15,000. RALEIGH, NC 27629 NONE ÞС BOYS & GIRLS CLUBS COMMUNITY SUPPORT PO BOX 19999 RALEIGH, NC 27619 21,000. NONE RELIGIOUS CHRISTIAN LIBRARY INTERNATIONAL PC PO BOX 97095 RALEIGH NC 27624 6,000. SEE CONTINUATION SHEET(S) ▶ 3a Total 484 400. b Approved for future payment NONE **▶** 3b Total

Part XVI-A	Analys	is of Incor	ne-Producing	Activities

Enter gross amounts unless otherwise indicated.	Unrelate	d business income	Exclu	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					
1	_				<del></del>
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					· · · · · · · · · · · · · · · · · · ·
investments			14	136,040.	
4 Dividends and interest from securities			14	158,557.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income			14	41,162.	_ <del>_</del>
8 Gain or (loss) from sales of assets other		<del></del>			<del></del>
than inventory			18	-24,058.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					<u> </u>
a SEE STATEMENT 13		42,142.			
b					
C					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		42,142.		311,701.	0.
13 Total. Add line 12, columns (b), (d), and (e)	<del></del>			13	353,843.
(See worksheet in line 13 instructions to verify calculations.	)			· · ·	

Part XVI-B	Relationshi	o of Activities	to the Accom	plishment of	Exempt Puri	ooses
1 WILLY	Itolationi	9 91 N9411199		Pilolillone or	EVALUE OF	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

<b>,</b>	the foundation's exempt purposes (other than by providing funds for such purposes).					
$\neg$						
$\dashv$						
-						
_ _						
$\dashv$						
$\dashv$						
-+						
1						

orm 990			B. JONES						<u>578859</u>		ge 13
Part >	(VII )	Information Re Exempt Organ		nsfers To a	and Transa	ictions a	nd Relations	hips With Non	charitable	е	
1 Did	the org	anızatıon directly or indi	rectly engage in any	of the followin	ig with any othe	r organizatio	n described in sect	ion 501(c) of		Yes	No
the	Code (d	other than section 501(c)	)(3) organizations) (	or in section 52	27, relating to p	olitical organ	ızatıons?				
a Trai	nsfers f	rom the reporting found	ation to a noncharita	able exempt or	ganization of:						
(1)	Cash								1a(1)		X
(2)	Other	assets							1a(2)		X
<b>b</b> Oth	er trans	sactions:									
(1)	Sales	of assets to a noncharita	ble exempt organiza	ation					1b(1)	ļ	X
		ases of assets from a no		organization					1b(2)	-	X
		of facilities, equipment,							1b(3)		X
		oursement arrangements	•						1b(4)	1	X
		or loan guarantees							1b(5)		X
		mance of services or me	•	-					1b(6)		X
	-	facilities, equipment, ma	-			المالية ماميا		montrat value of the ma		l ooto	X
		er to any of the above is				-				sets,	
		given by the reporting for the yalue of the goods,				i iliaiket valu	ie ili aliy transactioi	i vi Silatiliy attaliyeli	iciii, Siiow iii		
a) Line no		(b) Amount involved	<del>,                                     </del>		e exempt organ	ızatıon	(d) Description	of transfers, transaction	s and sharing a	rrangeme	ents
C C C C C C C C C C C C C C C C C C C	<del>'   '</del>	(b) / modific mitorious	(6)	N/A	o onompt or game		(2) Secondario	, , , , , , , , , , , , , , , , , , , ,	<u>.,</u>		
				H/A		-	-				
	+						· · · · · · · · · · · · · · · · · · ·				
						<del> </del>			•		
									····		
								···········			
									<u> </u>		
			<u> </u>								
2a Ist	he four	idation directly or indirec	ctly affiliated with, or	related to, one	e or more tax-ex	empt organi	zations described				_
in s	ection	501(c) of the Code (othe	er than section 501(	c)(3)) or in sec	tion 527?				Yes	X	∵No
<b>b</b> If "	es," co	mplete the following sch					ı				
		(a) Name of org	ganization		(b) Type of o	rganization		(c) Description of rela	ationship		
		N/A			ļ						
					-						
	Hadas	penalties of perjury I deplare	that I have examined to	his return include	ng accompanying	schedules and	statements and to the	hest of my knowledge			
Sign			implete Declaration of p						May the IRS return with the	discuss he prepa	this rer
Here		///////////////////////////////////////	1/ Zhow	,	11 111	14/10/	//		s <u>hown</u> below	v (see ins	str )?
	Sign	ature of officer or trustee			Date	1	SECRE!	TWLI	_ LX Yes	5 L	_ No
	July	Print/Type preparer's n		Preparer's s		-	Date	Check   If	PTIN		
				1 Topardi S	10/	1.1.1		self- employed			
Paid		DAVID A. J   CPA	OUNSON,	CAU H		PH	11/14/16	23 2	P01301	<u></u> ናበ5	
Prepa	arer	Firm's name ► THC	יחוד פאר	V 2. mitc	CKER P.	Δ.	177/14/10	Firm's EIN ► 56			•
Use (		Fill Shalle FIAC		Ι α ΙΟ	RER F.	A•		I I I I I I I I I I I I I I I I I I I		, , ,	

Phone no. 919-571-7055 Form **990-PF** (2015)

Firm's address ► 4700 FALLS OF NEUSE ROAD SUITE 400 RALEIGH, NC 27609

Part IV Capital Gains and Los	sses for Tax on Investment Income			
	describe the kind(s) of property solo ick warehouse; or common stock, 20		(b) How acquired P - Purchase D - Donation	(c) Date acquired (d) Date sold (mo., day, yr.)
1a MORGAN STANLEY	- 2607		P	VARIOUS VARIOUS
b MORGAN STANLEY	- 2607		P	VARIOUS VARIOUS
c MORGAN STANLEY			P	VARIOUS VARIOUS
d MORGAN STANLEY			P	VARIOUS VARIOUS
e MORGAN STANLEY			P	VARIOUS VARIOUS
MORGAN STANLEY			P	VARIOUS VARIOUS
g MORGAN STANLEY			P	VARIOUS VARIOUS
h MORGAN STANLEY			P	VARIOUS VARIOUS
MORGAN STANLEY		<del></del>	P	VARIOUS VARIOUS
MORGAN STANLEY			P	VARIOUS VARIOUS
k MORGAN STANLEY			P	VARIOUS VARIOUS
MORGAN STANLEY			P	VARIOUS VARIOUS
m MORGAN STANLEY			P	VARIOUS VARIOUS
n MORGAN STANLEY			P	VARIOUS VARIOUS
			P	VARIOUS VARIOUS
o MORGAN STANLEY		(a) Cost or other book	<del></del>	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		) Gain or (loss) plus (f) minus (g)
a 10,813.		10,724.		89.
b 596,917.		544,964.	<del></del>	51,953.
c 962,607.		1,002,467.		-39,860.
d 387,439.		418,236.		-30,797.
e 321,247.		292,024.		29,223.
f 121,086.		169,263.		-48,177.
g 396,511.		381,862.		14,649.
h 218,349.		248,651.		-30,302.
1 234,600.		261,006.		-26,406.
2,302,319.		2,276,593.		25,726.
k 126,501.		125,946.		555.
129,396.		155,505.		-26,109.
m 3,957.		4,347.		-390.
n 200,556.		210,530.		-9,974.
0 111,130.		110,335.		795.
Complete only for assets showing	ng gain in column (h) and owned by t	the foundation on 12/31/69	(I) Lo	sses (from col. (h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (I) over col. (J), if any	Gains (excess but i	of col. (h) gain over col. (k), not less than "-0-")
a			**	89.
b				51,953.
С			**	-39,860.
d			**	
е				29,223.
f			**	-48,177.
g				14,649.
h			**	-30,302.
1				-26,406.
1			**	25,726.
k				555.
<u> </u>			**	-26,109.
<u>'</u> m				
<u>n</u>			**	-9,974.
0		<u> </u>		795.
<u> </u>	·	<u> </u>		193.
2 Capital gain net income or (net ca	apıtal loss) {   If gain, also enter   If (loss), enter "-0	in Part I, line 7	2	
,		` `	<del></del>	
3 Net short-term capital gain or (los If gain, also enter in Part I, line 8, If (loss), enter "-0-" in Part I, line 8	column (c).	(a (p):	3	
			<del>- J</del>	

SEBY B. JONES FAMILY FOUNDATION

Part IV | Capital Gains and Losses for Tax on Investment Income

	de la			(h) How acquired	L > D-4	100.
(a) List and • 2-story br	describe the kind(s) of property solution in the describe the kind(s) of property solution is tock, 20	1, e.g., real estate, 10 shs. MLC Co.		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a HEDGE PREMIER	FUND K-1			P	VARIOUS	VARIOUS
	E OPPORTUNITIES	K-1				VARIOUS
c PLEXUS FUND II				P		VARIOUS
d CAPITAL GAINS						·
e						
f						
g			-			
h					-	
1			-			
k						
m_						
n						
0						<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) (e) p	Gain or (loss) lus (f) minus (g)	
a 563.						563.
b 3,203.						3,203.
c 54,937.						54,937.
d 6,264.						6,264.
е						
<u>f</u>	L					
g					<del></del>	
h						
1			<u> </u>			
	· · · · · · · · · · · · · · · · · · ·					
k			ļ			
<u> </u>		<del></del>				
m			┷			
n			<b>-</b>			
O Complete and the constraint	(h) and award h	She 4				<del></del>
Complete only for assets snowli	ng gain in column (h) and owned by		-	(I) Los	sses (from col. (h) of col. (h) gain ove	) ar col (k)
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (1) over col. (3), if any		but n	ot less than "-0-")	
a			1			563.
b		· · · · · · · · · · · · · · · · · · ·	**	· ————————		3,203.
С						54,937.
<u>d</u>			<u> </u>			6,264.
e						
f		<u> </u>	-	<del></del>		
<u>g</u>		<del></del>			<u> </u>	
<u>h</u>		<u> </u>	+			
<u> </u>						
<u> </u>	<del> </del>		+			
<u>k</u> 			-			
			+			
mn						
0			+			
		<u> </u>	+	1		
2 Capital gain net income or (net ca	apıtal loss) {   If gain, also enter   If (loss), enter "-C	in Part I, line 7 -" in Part I, line 7 }	2			-24,058.
3 Net short-term capital gain or (los If gain, also enter in Part I, line 8,	column (c).	d (6):				
If (loss), enter "-0-" in Part I, line	<u> </u>	<u></u>	3	<u> </u>	<del></del>	<u>-156,201.</u>

# SEBY B. JONES FAMILY FOUNDATION 31-1578859

3 Grants and Contributions Paid During the		·		
• Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
walle and address (notice of pusitiess)	or substantial contributor	recipient		
CITY LIGHT CHURCH	NONE	PUBLIC	RELIGIOUS	
PO BOX 5154				
NEW YORK, NY 10185	<del></del>	<del>                                     </del>		10,0
DOWNLINE ATLANTA MINISTRIES	NONE	PC	GENERAL SUPPORT	
1155 MT. VERNON HWY ATLANTA, GA 30338				5.0
ATLANTA, GA 30330		<del> </del>		
ECU EDUCATIONAL FOUNDATION WARD SPORTS MEDICINE BLDG STE 304	NONE	PC	EDUCATIONAL	
GREENVILLE, NC 27858				21,5
<del>-</del>				<del></del>
ECU PIRATES CLUB	NONE	PC	EDUCATION	
1001 E 5TH ST	[			
GREENVILLE, NC 27858		ļ <u> </u>		4,4
FOUNDATION FOR GOOD BUSINESS	NONE	₽C	COMMUNITY AWARENESS	
PO BOX 26762	,,,,,,			
RALEIGH, NC 27611		ļ		2,0
GREYSTONE BAPTIST CHURCH	NONE	₽C	RELIGIOUS	
7509 LEAD MINE ROAD		}		
RALEIGH, NC 27615		<del> </del>	<u> </u>	10,0
HIGH POINT ROWING CLUB	NONE	PC	GENERAL SUPPORT	
3700 WATERVIEW ROAD		1		E 0
HIGH POINT, NC 27265	<del>                                     </del>			5,0
HUNTER ELEMENTARY PTA 1018 E DAVIE STREET	NONE	₽C	EDUCATIONAL	
RALEIGH NC 27601				5
INTERFAITH FOOD SHUTTLE	NONE	PC	COMMUNITY SUPPORT	
PO BOX 14638	none	[	JOHNSKIII BOLFORI	
RALEIGH, NC 27620				5,0
INTERVARSITY CHRISTIAN FELLOWSHIP	NONE	PUBLIC	COMMUNITY SUPPORT	
6400 SCHROEDER ROAD				
MADISON, WI 53707-7895		J		2,5
Total from continuation sheets				426,4

SEBY B. JONES FAMILY FOUNDATION 31-1578859

3 Grants and Contributions Paid During the '		·	<del></del>	
• Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
CELLY HOUSE	NONE	₽C	COMMUNITY SUPPORT	
390 S SIXTEENTH STREET		1		
VILMINGTON, NC 28401	<del> </del>		<del>                                     </del>	10,00
LA LUZ DE CRISTO MINISTRIES	NONE	PC	GENERAL SUPPORT	
REENSBORO NC 27403				1,30
MEDINODORO, NO 27403				
LOUISBURG COLLEGE	NONE	PC	EDUCATION	
501 N. MAIN STREET	10.12			
LOUISBURG, NC 27549			ļ	30,00
MEALS ON WHEELS	NONE	PC	COMMUNITY SUPPORT	
PO BOX 37639		}		F 0/
RALEIGH, NC 27627	+	<del> </del>		5,00
NATIONAL MS SOCIETY	NONE	₽C	MEDICAL	
3101 INDUSTRIAL DRIVE, SUITE 210	NONE		MEDICAL	
RALEIGH, NC 27609				2,50
NC COMMUNITY FOUNDATION	NONE	PC	COMMUNITY SUPPORT	
PO BOX 2828				
RALEIGH, NC 27602			+	5,00
NC FEF PO BOX 12406	NONE	PUBLIC	COMMUNITY AWARENESS	
RALEIGH, NC 27606				5(
NC HOSPITALITY EDUCATION FOUNDATION	NONE	₽C	COMMUNITY SUPPORT	
5036 SIX FORKS ROAD				
RALEIGH, NC 27609				2,5
NCSU STUDENT AID ASSOCIATIONS	NONE	PC	EDUCATION	
PO BOX 37100 RALEIGH, NC 27627				30.00
NEW LIPE CAMP	NONE	₽C	COMMUNITY SUPPORT	
9927 FALLS OF NEUSE ROAD				
RALEIGH, NC 27614		L		2,5

SEBY B. JONES FAMILY FOUNDATION

Part XV Supplementary Informati 3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual,	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
PASSAGE HOME	NONE	₽C	COMMUNITY SUPPORT	
PO BOX 10347				
RALEIGH, NC 27605				2,500
RAFIKI FOUNDATION	NONE	NC	COMMUNITY SUPPORT	
PO BOX 1988				
EUSTIS, FL 32727	<del></del>	<del> </del>		4,000
RALEIGH LIONS CLUB	NONE	PC	COMMUNITY SUPPORT	
315 HUBERT STREET				
RALEIGH, NC 27603		<del> </del>		1,000
RALEIGH LITTLE THEATRE	NONE	PC	COMMUNITY DEVELOPMENT	
PO BOX 5637				
RALEIGH, NC 27650				
RALEIGH RESCUE MISSION	NONE	PC	COMMUNITY SUPPORT	
PO BOX 27391				
RALEIGH, NC 27611			<del>                                     </del>	5,000
		İ		
SHEPHERD'S TABLE	NONE	PC	COMMUNITY SUPPORT	
PO BOX 28024				2.000
RALEIGH, NC 27611				
SIMPLE CYCLES INC	NONE	PC	COMMUNITY SUPPORT	
4455 N 6TH STREET PHILADELPHIA, PA 19140				8,000
SOUTHEASTERN BAPTIST THEOLOGICAL	NONE	PC	RELIGIOUS	
SEMINARY				
222 N WINGATE STREET WAKE FOREST, NC 27587	ļ			28,000
mais rought, no 2,00.				20,000
SPCA OF WAKE COUNTY	NONE	₽C	COMMUNITY SUPPORT	
200 PETFINDER LANE RALEIGH, NC 27603				2,500
				2,300
ST. DAVID'S SCHOOL	NONE	PC	EDUCATION	
PO BOX 17787 RALEIGH NC 27619				15,000
Total from continuation sheets		•		

3 Grants and Contributions Paid During the				
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
- Name and address (nome of business)	or substantial contributor	recipient	- <del> </del>	
TAMMY LYNN CENTER	NONE	ъс	COMMUNITY SUPPORT	
739 CHAPPELL DRIVE			Ì	, , , , ,
RALEIGH, NC 27606				20,000
THE EASY DOES IT RANCH AND RIDING	NONE	PC	COMMUNITY SUPPORT	
ACADEMY		1		}
3581 MUDDY CREEK ROAD				40.00
VIRGINIA BEACH, VA 23456				42,000
THE SALVATION ARMY	NONE	PC	COMMUNITY SUPPORT	
215 SOUTH PERSON STREET				25.00
RALEIGH, NC 27601				25,000
TRANSITIONS LIFE CARE	NONE	PC	GENERAL SUPPORT	
250 HOSPICE CIRCLE RALEIGH NC 27607				2,500
and I on , no 27007				2,500
			goldenizmy evipope	
TRIANGLE FAMILY SERVICES, INC. 3937 WESTERN BLVD	NONE	PC	COMMUNITY SUPPORT	
RALEIGH, NC 27606				10,000
		}		<u>.</u>
WAKE TECH COMMUNITY COLLEGE FOUNDATION	NONE	PC	GENERAL SUPPORT	
9101 FAYETTEVILLE ROAD				
RALEIGH, NC 27603				5,000
WHITE MEMORIAL PRESBYTERIAN CHURCH	NONE	₽C	RELIGIOUS	
1704 OBERLIN ROAD	:			
RALEIGH, NC 27608		<del> </del>		3,500
WILMINGTON AREA INTERGROUP	NONE	₽C	COMMUNITY SUPPORT	
ASSOCIATION				
5901 WRIGHTSVILLE AVENUE				
WRIGHTSVILLE BEACH, NC 28403		<del></del>		7,500
WILMINGTON INTERFAITH HOSPITALITY	NONE	PUBLIC	COMMUNITY SUPPORT	
NETWORK				
4938 OLEANDER DRIVE				[
WILMINGTON, NC 28403		<del> </del>	<del></del>	5,000
WREATHS ACROSS AMERICA	NONE	PC	GENERAL SUPPORT	
4 POINT STREET COLUMBIA FALLS ME 04623				10,000
Total from continuation sheets			<u> </u>	10,000

SEBY B. JONES FAMILY FOUNDATION

Part XV | Supplementary Information

Recipient	Year (Continuation)  If recipient is an individual,			
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient	<del> </del>	
MCA	NONE	₽C	COMMUNITY SUPPORT	
80 MARTIN LUTHER KING JR BLVD				
HAPEL HILL, NC 27514	-		<del></del>	7,50
NUMAN WALL FOR FALLEN SOLDIERS	NONE	PC	GENERAL SUPPORT	
VILMINGTON, NC 28403				11,00
UPUS FOUNDATION OF AMERICA,	NONE	PC	GENERAL SUPPORT	
HEARTLAND CHAPTER	NONE	1	GENERAL SUPFORT	
1640 SHENANDOAH AVE				
SAINT LOUIS, MO 63110		-		5,00
MISSION TO THE WORLD DONATIONS	NONE	PC	GENERAL SUPPORT	
1600 N BROWN RD				
AWRENCEVILLE, GA 30043				3,70
		Í		
SHEPHERD'S RANCH	NONE	PC	GENERAL SUPPORT	
3017 BRASSFIELD RD CREEDMOOR NC 27522				30.00
AND DESCRIPTION OF THE PROPERTY OF THE PROPERT				30,00
FAMILY VIOLENCE PREVENTION CT	NONE	PC	GENERAL SUPPORT	
207 WILSON STREET				
CHAPEL HILL, NC 27514		<b></b>		2,50
THE LEUKEMIA AND LYMPHOMA SOCIETY	NONE	PC	GENERAL SUPPORT	
101 HARRISON OAKS BLVD				
ZARY, NC 27513				50
PHE MISSION CINCINNATI PO BOX 6006	NONE	PC	GENERAL SUPPORT	
CINCINNATI, OH 45206				5,00
VARZONE INITIATIVES	NONE	PC	GENERAL SUPPORT	
20 494224				
REDDING , CA 96049				5,00

## 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

2015

Employer identification number

31-1578859

nation about Schedule B (Form 990, 990-EZ, or 990-PF) a its instructions is at www.lrs.gov/form990 .

Name of the organization

SEBY B. JONES FAMILY FOUNDATION

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	X 501(c)(3) exempt private foundation		
		4947(a)(1) nonexempt charitable trust treated as a private foundation		
		501(c)(3) taxable private foundation		
Note. O	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.		
General	Rule			
X	•	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or contributor. Complete Parts Land 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 utions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for cruelty to children or animals. Complete Parts I, II, and III.		
	year, contributions is checked, enter h purpose Do not co	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the seclusively 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., omplete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively le, etc., contributions totaling \$5,000 or more during the year.		
but it m	ust answer "No" on	hat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), in 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

Employer identification number

#### SEBY B. JONES FAMILY FOUNDATION

31-1578859

PEBI	B. JONES FAMILY FOUNDATION		-13/6633
Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	onal space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	SBJ CHARITABLE LEAD TRUST  3350 RIVERWOOD PARKWAY, SUITE 1600  ATLANTA, GA 30339-3359	\$\$	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 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.)

Employer identification number

#### SEBY B. JONES FAMILY FOUNDATION

31-1578859

art II Nonc	ash Property (see instructions) Use duplicate copies of P	art II ir 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	(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
		<b></b>	=
(-)			
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	990, 990-EZ, or 990-PF) (

Relationship of transferor to transferee

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1	FORM 990-PF	INTEREST ON	SAVINGS AND	TEMPORARY C	ASH INVESTMENTS	STATEMENT	1
--	-------------	-------------	-------------	-------------	-----------------	-----------	---

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
CAPITAL BANK	845.	845.	845.
CAPITOL PRIVATE OPPORTUNITIES			
II K-1	16.	16.	16.
HEDGE PREMIER FUND K-1	23,876.	23,876.	23,876.
MORGAN STANLEY - 2003	35.	35.	35.
MORGAN STANLEY - 2004	28.	28.	28.
MORGAN STANLEY - 2005	14.	14.	14.
MORGAN STANLEY - 2605	1.	1.	1.
MORGAN STANLEY - 2607	94.	94.	94.
MORGAN STANLEY - 2953	4,233.	4,233.	4,233.
MORGAN STANLEY - 9879	79,639.	79,639.	79,639.
MORGAN STANLEY - 9881	7.	7.	7.
THE NORTHSIDE COMPANY	27,252.	27,252.	27,252.
TOTAL TO PART I, LINE 3	136,040.	136,040.	136,040.
MORGAN STANLEY - 2953 MORGAN STANLEY - 9879 MORGAN STANLEY - 9881 THE NORTHSIDE COMPANY	4,233. 79,639. 7. 27,252.	4,233. 79,639. 7. 27,252.	79,

FORM 990-PF	DIVIDENDS	AND INTEREST	FROM SECUR	ITIES ST	'ATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
CAPITOL PRIVATE			<u> </u>		
OPPORTUNITIES II					
K-1	189.	0.	189.		189.
HEDGE PREMIER FUND MORGAN STANLEY -	13,980.	0.	13,980.	13,980.	13,980.
2003	29,562.	0.	29,562.	29,562.	29,562.
MORGAN STANLEY - 2004	63,797.	0.	63,797.	63,797.	63,797.
MORGAN STANLEY - 2005	3,987.	0.	3,987.	3,987.	3,987.
MORGAN STANLEY - 2605	842.	0.	842.	842.	842.
MORGAN STANLEY - 2607	14,916.	3,983.	10,933.	10,933.	10,933.
MORGAN STANLEY - 2953	4.	0.	4.	4.	4.
MORGAN STANLEY - 4171	24,315.	0.	24,315.	24,315.	24,315.
MORGAN STANLEY - 9879	2,883.	1,150.	1,733.	1,733.	1,733.
MORGAN STANLEY - 9881	7,216.	1,131.	6,085.		6,085.

SEBY B. JONES FAMILY FOUNDATION						31-157	78859 
WELLS FARGO 3,130.		0.	3,13	0.	3,130.	3 ,	,130.
TO PART I, LINE 4 164,821.	6,2	158,557		7.	158,557.	158,557.	
FORM 990-PF O	THER	INCOM	Œ	<del></del>	S	TATEMENT	r 3
DESCRIPTION		REV	A) VENUE BOOKS		(B) INVEST- INCOME	(C) ADJUST NET INC	
OTHER INCOME PARTNERSHIP INCOME IN HEDGE PREMIE PARTNERSHIP INCOME IN PLEXUS FUND	R		12,039. 30,524.		12,039. 30,524.		,039. ,524.
II PARTNERSHIP INCOME IN CAPITOL			-972.		-972.	-	-972.
PRIVATE OPPORTUNITIES FUND PARTNERSHIP INCOME HEDGE PREMIER			-429.		-429.	-	-429.
FUND PARTNERSHIP INCOME CAPITOL PRIVATE			43,761.		0.	43	,761.
OPPORTUNITIES II PARTNERSHIP INCOME FROM PLEXUS FUN			-1,309.		0.	-1,	,309.
II	ט		-310.		0.	-	-310.
TOTAL TO FORM 990-PF, PART I, LINE	11 =	:	83,304.	===	41,162.	83	,304.
FORM 990-PF AC	COUNT	ING E	FEES		S	TATEMENT	г 4
·	A) NSES	NET	(B) INVEST-	A	(C) DJUSTED	(D) CHARI	

PER BOOKS MENT INCOME

29,640.

37,140.

7,500.

DESCRIPTION

MANAGEMENT FEE

TAX PREPARATION FEES

TO FORM 990-PF, PG 1, LN 16B

PURPOSES

0.

3,750.

3,750.

NET INCOME

0.

0.

0.

0.

3,750.

3,750.

FORM 990-PF C	THER PROFES	SIONAL FEES	ST	ATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT FEES	84,266.	84,266.	0.	0.
TO FORM 990-PF, PG 1, LN 16C	84,266.	84,266.	0.	0.
FORM 990-PF	TAX	ES	ST	ATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TAXES FOREIGN TAXES PAID ON	3,568.	0.	0.	0.
INVESTMENTS	5,042.	5,042.	0.	0.
TO FORM 990-PF, PG 1, LN 18 =	8,610.	5,042.	0.	0.
FORM 990-PF	OTHER E	XPENSES	Sī	ATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OTHER DEDUCTIONS FROM CAPITOL PRIVATE OPPORTUNITIES II OTHER DEDUCTIONS FROM HEDGE	10,956.	10,956.	0.	0.
PREMIER FUND CHARITABLE CONTRIBUTION FROM	2,304.	2,304.	0.	0.
CHARITABLE CONTRIBUTION FROM PLEXUS FUND K1 MISCELLANEOUS	2,304. 6. 1,210.	2,304. 0. 0.	0. 0. 0.	6.
CHARITABLE CONTRIBUTION FROM PLEXUS FUND K1 MISCELLANEOUS MISCELLANEOUS EXPENSE FROM PLEXUS FUND II, LLC	6.	0.	0.	6. 110.
CHARITABLE CONTRIBUTION FROM PLEXUS FUND K1 MISCELLANEOUS MISCELLANEOUS EXPENSE FROM PLEXUS FUND II, LLC OTHER DEDUCTIONS FROM PLEXUS FUND II, LLC	6. 1,210.	0.	0.	6. 110.
CHARITABLE CONTRIBUTION FROM PLEXUS FUND K1 MISCELLANEOUS MISCELLANEOUS EXPENSE FROM PLEXUS FUND II, LLC OTHER DEDUCTIONS FROM PLEXUS FUND II, LLC MISCELLANEOUS EXPENSE FROM HEDGE PREMIER FUND MISCELLANEOUS EXPENSE FROM	6. 1,210. 96.	0. 0.	0. 0.	6. 110. 0.
CHARITABLE CONTRIBUTION FROM PLEXUS FUND K1 MISCELLANEOUS MISCELLANEOUS EXPENSE FROM PLEXUS FUND II, LLC OTHER DEDUCTIONS FROM PLEXUS FUND II, LLC MISCELLANEOUS EXPENSE FROM HEDGE PREMIER FUND	6. 1,210. 96. 1,094.	0. 0. 0. 1,094.	0. 0. 0.	6. 110. 0.
CHARITABLE CONTRIBUTION FROM PLEXUS FUND K1 MISCELLANEOUS MISCELLANEOUS EXPENSE FROM PLEXUS FUND II, LLC OTHER DEDUCTIONS FROM PLEXUS FUND II, LLC MISCELLANEOUS EXPENSE FROM HEDGE PREMIER FUND MISCELLANEOUS EXPENSE FROM CAPITOL PRIVATE	6. 1,210. 96. 1,094. 36.	0. 0. 0. 1,094.	0. 0. 0.	6. 110. 0. 0.

FORM 990-PF	CORPORAT	E STOCK		STATEMENT	8
DESCRIPTION			BOOK VALUE	FAIR MARKET	r
MUTUAL FUNDS STOCKS EXCHANGE-TRADED & CLOSED-END FUND			54,491. 6,414,449. 105,400.	43,83 7,084,24 111,04	40.
TOTAL TO FORM 990-PF, PART II, L	INE 10B		6,574,340.	7,239,13	14
FORM 990-PF (	CORPORAT	E BONDS		STATEMENT	9
DESCRIPTION			BOOK VALUE	FAIR MARKE	r
CORPORATE BONDS	2,105,516.	2,206,790			
TOTAL TO FORM 990-PF, PART II, L	2,105,516.	2,206,79	90.		
FORM 990-PF O	THER IN	VESTMENTS		STATEMENT	10
DESCRIPTION		LUATION ETHOD	BOOK VALUE	FAIR MARKE	r
INVESTMENT IN PLEXUS FUND INVESTMENT IN MS HEDGE PREMIER FOR INVESTMENT IN CAPITOL PRIV OPP FOR		COST COST COST	89,386. 637,004.	111,1	
II ERISA	, 6051		201,545.	223,10	07.
TOTAL TO FORM 990-PF, PART II, L	INE 13		927,935.	964,9	50.
FORM 990-PF	OTHER	ASSETS		STATEMENT	11
DESCRIPTION		NING OF OK VALUE	END OF YEAR BOOK VALUE	FAIR MARKE	ľ
MORGAN STANLEY - UNSETTLED SALES		35,587.	-176,500.	-176,50	00.
TO FORM 990-PF, PART II, LINE 15		35,587.	-176,500.	-176,50	00.

		OF OFFICERS, I		STAT	EMENT 12	
NAME AND ADDRESS		TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB		
ROBERT L JONES PO BOX 19067 RALEIGH, NC 27619	CHAIRMAN 1.00	0.	0.	0.		
JAMES R JONES PO BOX 19067 RALEIGH, NC 27619	PRESIDENT 1.00					
SEBY B JONES JR. PO BOX 19067 RALEIGH, NC 27619		VICE PRESIDEN	T/TREASURER 0.	0.	0.	
ALICE J HARROD PO BOX 19067 RALEIGH, NC 27619		SECRETARY 1.00	0.	0.	0.	
SEBY RUSSELL JONES PO BOX 19067 RALEIGH, NC 27619		ASSISTANT SEC	RETARY 0.	0.	0.	
TOTALS INCLUDED ON 990-	-PF, PAGE 6,	PART VIII	0.	0.	0.	
FORM 990-PF	C	OTHER REVENUE		STAT	EMENT 13	
DESCRIPTION	BUS CODE	UNRELATED BUSINESS INC		UDED EXE	ATED OR MPT FUNC- N INCOME	
PARTNERSHIP INCOME HEDO PREMIER FUND PARTNERSHIP INCOME	900099	43,761.				
CAPITOL PRIVATE OPPORTUNITIES II PARTNERSHIP INCOME FROI PLEXUS FUND II	u 900099	-1,309. -310.				
TOTAL TO FORM 990-PF, I	PG 12. LN 11	42,142.			<del></del>	