Department of the Treasury Internal Revenue Service

## 2949110403004

## 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.irs.gov/form990pf.

For	calen	dar year 2016 or tax year beginning	, 2016,	and ending		, 20				
Nar	ne of fou	undation		A Employer	dentification number	r				
The	Jason	Project, Inc.			47-1943889					
		d street (or P O box number if mail is not delivered to street address)	Room/su	ute B Telephone	e number (see instructi	ons)				
181	8 The \	Woods Drive			(904) 354-7378	ł				
		n, state or province, country, and ZIP or foreign postal code	C. If everynt	C If exemption application is pending, check here ▶						
lac	keanvi	lle, FL 32246	O il exempli	and a supplied that the partial supplied to the supplied to th						
			n of a former public ch	narity n 1 Foreign	organizations chock	noro N				
, <b>"</b>	01,001	Final return Amended		D 1. Foreign	organizations, check i	nere ► 📗				
		Address change Name cha			organizations meeting					
_	Chack	type of organization.   Section 501(c)(3) exempt p	<del></del>	<del></del>	nere and attach compu foundation status was t					
		n 4947(a)(1) nonexempt charitable trust			07(b)(1)(A), check here	▶ 🗀				
		parket value of all assets at J Accounting method								
-		year (from Part II, col. (c),	i. 🔽 Casii 📋 Acc	r ii the four	idation is in a 60-montl ition 507(b)(1)(B), check					
	line 16		on each basis !		(I)(I)(I)(I), U(I)	(note				
	art I		T T T T T T T T T T T T T T T T T T T		<del></del>	(4) (2) (1)				
<i>F</i> 6		Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable				
		the amounts in column (a) (see instructions) )	expenses per books	income	income	purposes (cash basis only)				
_				.758 27	. ×2.	(Casit Dasis Offly)				
	1	Contributions, gifts, grants, etc., received (attach schedule)			<u> </u>					
	2	Check ► ☐ If the foundation is <b>not</b> required to attach Sch B	<b>A</b> ,	<del>```</del>						
	3	Interest on savings and temporary cash investments	0	0	0					
	4	Dividends and interest from securities CEIVED	0	0	0					
	5a	Gross rents		0	0					
	b	Net rental income or (loss)		\$ 8						
ne	6a	Net rental income or (loss)  Net gain or (loss) from sale of assets not on-line 10  Gross sales price for all assets on line 6a	0.	** ***	<u> </u>	```				
en		Gross sales price for all assets on line 6a	76.	<u>`</u>	7 1	2				
Revenue	7	Capital gain net income (from Part) (Cline 2)	18,3	0	182 57	<b>**</b>				
<u> </u>	8	Net short-term capital gain	9.		0	3 3 1				
	9	Income modifications	```		0	****				
	10a	Gross sales less returns and allowances	8 4 × (84 )	3.	**					
	b	Less: Cost of goods sold	·, \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	, , ,		5 3				
	С	Gross profit or (loss) (attach schedule)	0	. *	0	- :				
	11	Other income (attach schools	0	0	0					
	12	Total. Add lines 1 through 1	24,251	0	0					
S	13	Compensation of officers, directors drustees, etc.	0	0	0	0				
Se	14	Other employee salaries and wages	0	0	0	0				
ě	15	Pension plans, employee benefits	0	0	0	0				
Expenses	16a	Pension plans, émployée benefits  Legal fees (attach schedule)  Accounting fees (attach schedule)	0	0	0	0				
ive	b		0	0	0	0				
	C	Other profession dees (attach schedule)	0	0	0	<del></del>				
tra	17	Interest	0	0	0	0				
Jis	18	Taxes (attach schedule) (see instructions)	0	0	0	<del></del>				
Ē	19	Depreciation (attach schedule) and depletion	0	0	0					
ď	20	Occupancy RECEIVED O	0	0	0	0				
þ	21	Travel, conferences, and meetings	0	0	0	0				
a	22	Printing and Bublications 0 9 2018.	0	0	0	0				
β	23	Other expenses (attach schedule)	20,502	0	0	0				
ıŧ	24	Total operating and administrative expenses.			1					
er		Add lines 13 through 23 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	20,5020	0	0	<u> </u>				
Operating and Administral	25	Contributions gifts, grants paid	20,502			0				
· —	26_	Total expenses and disbursements. Add lines 24 and 25	20,502	0	0					
`	27	Subtract line 26 from line 12 <sup>-</sup>								
,	a	Excess of revenue over expenses and disbursements	3,749							
)	b	Net investment income (if negative, enter -0-) .		0						
	<u> </u>	Adjusted net income (if negative, enter -0-)			0					

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form 990-PF (2016)



De	rt II	Ralance Shoots Attached schedules and amounts in the description column	Beginning of year	End o	f year
- 73		Balance Sheets Attached schedules and amounts in the description countril should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash-non-interest-bearing	8,584	12,333	12,333
	2	Savings and temporary cash investments	0	0	0
	3	Accounts receivable ▶			
i		Less: allowance for doubtful accounts ▶	0	0	0
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶	0	0	0
	5	Grants receivable	0	0	0
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)	0	0	0
	7	Other notes and loans receivable (attach schedule) ▶			
		Less allowance for doubtful accounts ▶	0	0	0
ţ	8	Inventories for sale or use	0	0	0
Assets	9	Prepaid expenses and deferred charges	0	0	0
Ą	10a	Investments—U.S. and state government obligations (attach schedule)	0	0	0
	b	Investments - corporate stock (attach schedule)	0	0	0
	С	Investments - corporate bonds (attach schedule)	0	0	
	11	Investments—land, buildings, and equipment basis ▶		<u> </u>	<u> </u>
		Less accumulated depreciation (attach schedule) ▶	0	0	0
	12	Investments—mortgage loans	0	_ 0	0
	13	Investments—other (attach schedule)	0	0	
	14	Land, buildings, and equipment basis ▶			
	Ì	Less accumulated depreciation (attach schedule) ▶	0	0	
	15		0	0	
	16	Other assets (describe   Total assets (to be completed by all filers—see the			
		instructions. Also, see page 1, item l)	8,584	12,333	
	17	Accounts payable and accrued expenses	0	0	* * * * * * * * * * * * * * * * * * * *
so	18	Grants payable	0	0	
Ë	19	Deferred revenue	0	0	
ij	20	Loans from officers, directors, trustees, and other disqualified persons	0	0	ļ. ž. ž. ļ
Liabilities	21	Mortgages and other notes payable (attach schedule)	0	0	
_	22	Other liabilities (describe ► )	0	0	, × ,
	23	Total liabilities (add lines 17 through 22)	0	0	,***
S		Foundations that follow SFAS 117, check here . >	i		,
nd Balances	١	and complete lines 24 through 26 and lines 30 and 31.			*.
<u>a</u>	24	Unrestricted			-
Ва	25	Temporarily restricted	<del></del>		-
Þ	26	Permanently restricted			-
Ē		Foundations that do not follow SFAS 117, check here ▶ ✓ and complete lines 27 through 31.	ļ		,
o.	27	Capital stock, trust principal, or current funds			, ,
	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	٦ ,
Net Assets	28 29	Retained earnings, accumulated income, endowment, or other funds			٦ ,
As	ì	Total net assets or fund balances (see instructions)	0	<del></del>	-1
et '	30	Total liabilities and net assets/fund balances (see		<u> </u>	<u>'</u>
ž	31	instructions)		ĺ	
D.	art III		0		<u>'L</u> _
		al net assets or fund balances at beginning of year—Part II, colu		st agree with	<del></del>
		-of-year figure reported on prior year's return)			8,584
		er amount from Part I, line 27a			3,749
					3,743
		I lines 1, 2, and 3		4	12,333
				· · · · · · · · · · · · · · · · · · ·	12,333
į	6 Tota	creases not included in line 2 (itemize) ► al net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), I	ine 30 <b>6</b>	12,333
_	_				

	V Capital Gains an	d Losses for Tax on Investme	nt income			
		he kind(s) of property sold (e.g., real estate, use, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a	none / not applicable					
b						
Ç						
<u>d</u>						
е	<del></del>			<del></del>		
	(e) Gross sales price (f) Depreciation allowed (or allowable)			other basis nse of sale		n or (loss) f) minus (g)
<u>a</u> b						
С						
d						
е						
	Complete only for assets sh	owing gain in column (h) and owned by	the foundation	on 12/31/69		(h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any		less than -0-) or rom col (h))
а						
b						
C			<del></del>	<del>-</del>		
<u>d</u>			<del></del>	<del></del>		
е		( If gain als	o enter in Pa	rt Line 7		<del></del>
2	Capital gain net income of	or (not canital loss) {	nter -0- in Pa		2	
3	If gain, also enter in Pari	ın or (loss) as defined in sections 12 t i, line 8, column (c) (see instruction	ons). If (loss)			
	Part I, line 8					
		<u> </u>		<u> </u>	3	
or o	V Qualification Uno ptional use by domestic pr	der Section 4940(e) for Reduce rivate foundations subject to the sec	ed Tax on N		Income	
or o sec as t 'Ye	Qualification Uno ptional use by domestic pi tion 4940(d)(2) applies, leav the foundation liable for the s," the foundation does no	der Section 4940(e) for Reduce rivate foundations subject to the serve this part blank. e section 4942 tax on the distributate t qualify under section 4940(e). Do	ed Tax on Notion 4940(a)  ble amount of not complete	tax on net invest f any year in the l this part.	t Income tment income.) base period?	☐ Yes ☐
or o sec	Ptional use by domestic pition 4940(d)(2) applies, leaving for the foundation liable for the s," the foundation does no Enter the appropriate am	der Section 4940(e) for Reduce rivate foundations subject to the serve this part blank.	ed Tax on Notion 4940(a)  ble amount of not complete	tax on net invest f any year in the l this part.	t Income tment income.) base period?	
or o sec as t Ye 1	Qualification Uno ptional use by domestic pi tion 4940(d)(2) applies, leav the foundation liable for the s," the foundation does no	der Section 4940(e) for Reduce rivate foundations subject to the serve this part blank. e section 4942 tax on the distributate t qualify under section 4940(e). Do ount in each column for each year;  (b)	ction 4940(a)  ble amount of not complete see the instri	tax on net invest f any year in the l this part.	t Income tment income.) base period? aking any entries.	(d) tribution ratio divided by col (c))
or o sec as t Ye 1	Pualification Unoptional use by domestic propertion 4940(d)(2) applies, leave the foundation liable for the s," the foundation does not enter the appropriate ame (a)  Base period years endar year (or tax year beginning in 2015	der Section 4940(e) for Reduce rivate foundations subject to the serve this part blank. e section 4942 tax on the distributate t qualify under section 4940(e). Do ount in each column for each year;  (b)	ction 4940(a)  ble amount of not complete see the instru	f any year in the l this part. uctions before m	t Income tment income.) base period? aking any entries.	(d) tribution ratio
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or o sectas t 'Ye 1	Publication United States of States	der Section 4940(e) for Reduce rivate foundations subject to the serve this part blank. e section 4942 tax on the distributate t qualify under section 4940(e). Do it ount in each column for each year;  (b) Adjusted qualifying distributions	ction 4940(a)  ble amount of not complete see the instru	f any year in the l this part. uctions before m	t Income tment income.) base period? aking any entries.	(d)
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or or or sections the section of the	Ptional use by domestic proposed to a part of the foundation liable for the start of the foundation liable for the start of the foundation does not be foundation does not enter the appropriate arm (a)  Base period years endar year (or tax year beginning in 2015 2014 2013 2012 2011  Total of line 1, column (of Average distribution ration number of years the four enter the net value of not Multiply line 4 by line 3  Enter 1% of net investment and foundation in the four enter the four enterers enter the four enterers enter	der Section 4940(e) for Reduce rivate foundations subject to the serve this part blank.  e section 4942 tax on the distributate t qualify under section 4940(e). Do not in each column for each year;  (b)  Adjusted qualifying distributions  all of Part V not applicate of or the 5-year base period—divided adation has been in existence if less incharitable-use assets for 2016 from	ole amount of not complete see the instruction of the see the see the instruction of the see the see the see the instruction of the see	f any year in the l this part. uctions before m (c) f nonchantable-use a	tincome timent income.)  base period?  aking any entries.  ssets (col (b) of the color (b)	(d)

С	All other domestic foundations enter 2% of line 2/b. Exempt foreign organizations enter 4% of J			
_	Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0	
3	Add lines 1 and 2		0	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		0	
6	Credits/Payments:			
a	2016 estimated tax payments and 2015 overpayment credited to 2016 6a		>	'
b	Exempt foreign organizations—tax withheld at source 6b	,		.
C	Tax paid with application for extension of time to file (Form 8868) . 6c	· , .	·.	*
_d	Backup withholding erroneously withheld		<u></u>	لنن
7	Total credits and payments. Add lines 6a through 6d		0	
8	Enter any penalty for underpayment of estimated tax. Check here		0	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		0	
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶ 10 Enter the amount of line 10 to be: Credited to 2017 estimated tax ▶ Refunded ▶ 11		0	
	Enter the amount of line 10 to be: Credited to 2017 estimated tax   Refunded   11  VII-A Statements Regarding Activities		0	
Ta	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	Γ.	Yes	No
10	participate or intervene in any political campaign?	<u>,</u>	165	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	1a	<b></b>	<b>√</b>
	Instructions for the definition)?	16		1
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	1b	<b>13</b> -1	***
	published or distributed by the foundation in connection with the activities		38.	1
С	Did the foundation file Form 1120-POL for this year?	1c	) v ;	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	16	×(4	* "1
u	(1) On the foundation. ▶ \$(2) On foundation managers. ▶ \$	)	4	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$	**************************************	, «	1
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	2		<b>V</b>
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			, 3
3	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		<b>-</b>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		✓
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		<b>/</b>
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	1	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	1	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶			
	Florida and North Carolina	ļ		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	1	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"			
	complete Part XIV	9	<u> </u>	<b>✓</b>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10	<u> </u>	✓
	F	.m 99	0-PF	(2016)

Part	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	}	✓
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	- 1	1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	1	<u> </u>
	Website address > none / n/a			
14		1) 354	7279	
	Located at 1919 The Woods Drug Lacksonville El	3224		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here	3224		
15			•	
40	and enter the amount of tax-exempt interest received or accrued during the year	<del></del> -	Yes	No
16	over a bank, securities, or other financial account in a foreign country?		res	
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of	16	<del>_</del> _	<b>√</b>
	the foreign country ▶			
			í.	<u> </u>
Part	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)	.)s.	2000). 23.0	î
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? $\square$ Yes $\square$ No		1414) 1	-378
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	15	3	4
	disqualified person?		W.	1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? $\square$ Yes $\square$ No	7		1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?   Yes  No		;	100 P
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	***		je i
	the benefit or use of a disqualified person)?	Wg.	`*. `}\$ <sub>&amp;</sub>	1
	(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		٠	198
	termination of government service, if terminating within 90 days.) Yes 📝 No	, 🐺		<b>*</b>
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations	Ġ.	350	1
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here	× 4.8 v		:3
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	٠,	,	
	were not corrected before the first day of the tax year beginning in 2016?	1c		<b>√</b>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	33	\$ 10%	
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))		ႏို	
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and			
_	6e, Part XIII) for tax year(s) beginning before 2016?	,		
•	If "Yes," list the years ▶ 20 , 20 , 20 , 20			}
h	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)	4 *	,	
_	(relating to incorrect 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.)	2b		<b>-</b>
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	-10	<u> </u>	<del>  •</del>
C	► 20 , 20 , 20 , 20	Ì '		]
32	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
Ja				
_	, , ,			
b	If "Yes," did it have excess business holdings in 2016 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		ļ	<u> </u> ]
	foundation had excess business holdings in 2016.)	3b	ļ	ļ
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	ļ	/
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			<u> </u> ]
	chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		<b>/</b>

<u> </u>	0-11 (2010)									raye <b>U</b>
Part	VII-B Statements Regarding Activities	for W	hich Form	4720	May Be R	equire	d (conti	nued)		
`5a	,								İ	
	(1) Carry on propaganda, or otherwise attempt t						☐ Yes	✓ No	-	
	(2) Influence the outcome of any specific public		on (see secti	on 495	5), or to ca	arry on,			1	
	directly or indirectly, any voter registration dr						Yes Yes	✓ No		
	(3) Provide a grant to an individual for travel, stu	dy, or d	other similar į	ourpose	es?		Yes	✓ No	-	
	(4) Provide a grant to an organization other than			-					1	
	section 4945(d)(4)(A)? (see instructions)						☐ Yes	✓ No	İ	, ,
	(5) Provide for any purpose other than religious								1	' .
	purposes, or for the prevention of cruelty to							✓ No		s,*
b	If any answer is "Yes" to 5a(1)-(5), did any of the							ribed in	Ĺ	
	Regulations section 53.4945 or in a current notice	regardı	ng disaster as	ssistanc	e (see instr	uctions)	?		5b	
	Organizations relying on a current notice regarding disaster assistance check here ▶ □									
C	c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax									
	because it maintained expenditure responsibility	for the	grant?				Yes Yes	☐ No	-5	
	If "Yes," attach the statement required by Regula	ations s	ection 53.49	45–5(d).	•				81	
6a	Did the foundation, during the year, receive any	funds,	directly or in-	directly	, to pay pre	emiums			. 45	
	on a personal benefit contract?						☐ Yes	✓ No	10 m	
b	Did the foundation, during the year, pay premiur	ns, dire	ctly or indire	ctly, on	a personal	benefit	contract	γ.	6b	/
	If "Yes" to 6b, file Form 8870.			-	·				7.3	7 3
7a	At any time during the tax year, was the foundation	a party	to a prohibited	tax sh	elter transac	tion?	☐ Yes	✓ No		. 4.
	If "Yes," did the foundation receive any proceed						ransactio	n? .	7b	They are minorious
Part	VIII Information About Officers, Direct	tors, 7	Trustees, F	ounda	tion Mana	gers,	Highly I	Paid E	mploy	ees,
	and Contractors					_	_		-	•
1	List all officers, directors, trustees, foundatio	n mana	agers and th	eir con	npensation	(see i	nstructio	ns).		
	(a) Name and address		e, and average irs per week		mpensation		Contribution		(e) Expe	ense account,
	(a) Name and address		ed to position		not paid, iter -0-)		yee benefit erred compe			allowances
James	L. Nipper									
1818 T	he Woods Drive Jacksonville, FL 32246	Presie	nt / 15		0			0		0
Cheryl	L. Nipper									
1818 T	he Woods Drive Jacksonville, FL 32246	Vice P	resident/ 5		0			0		0
James	M. Nipper									
206 No	orth Mitchell Ave. Bakersville, NC 28705	Sec/ Ti	rea. / 25		0			o		0
		_								
2	Compensation of five highest-paid employe	es (oth	er than tho	se incl	uded on li	ne 1 —	see instr	uction	s). If n	one, enter
	"NONE."									
			(b) Title, and a	verane			(d) Contrib			
	(a) Name and address of each employee paid more than \$50,0	00	hours per v	veek	(c) Comper	nsation	employee plans and			ense account, allowances
			devoted to p	osition			compen	a 1		
None										
_										
		******								
				-		_				
									_	
	•••••••••••••••••••••••••••••••••••••••									
Total	number of other employees paid over \$50,000 .				• • • •	<del></del>	• • •	. ▶		0
									Form 99	0-PF (2016)

All other program-related investments. See instructions

Total. Add lines 1 through 3 . . . . . . . . . .

0

20,502

Part	X Minimum Investment Return (All domestic foundations must complete this part. Foreign	gn foundati	ons,
	see instructions.)	_	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	3 ^	-
	purposes:	\$	
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	9,182
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	9,182
е	Reduction claimed for blockage or other factors reported on lines 1a and	`	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	9,182
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	138
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	9,044
6	Minimum investment return. Enter 5% of line 5	6	452
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for		
	and certain foreign organizations check here ▶ □ and do not complete this part.)		
1.	Minimum investment return from Part X, line 6	1	452
2a	Tax on investment income for 2016 from Part VI, line 5	<b>3</b>	
þ	Income tax for 2016. (This does not include the tax from Part VI.) 2b 0	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
С	Add lines 2a and 2b	_2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	452
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	452
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	452
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	7''',	
	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	20,502
b	Program-related investments—total from Part IX-B	1b	20,502
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
_	purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the:	3,	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	0
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		20,502
•	Enter 1% of Part I, line 27b (see instructions)	5	_
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0
J	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating		20,502
	qualifies for the section 4940(e) reduction of tax in those years.	j wnetner th	e roundation

r ai t	Ondistributed income (see instruction	oris)	·		
1	Distributable amount for 2016 from Part XI, line 7	(a) Corpus	(b) Years prior to 2015	<b>(c)</b> 2015	(d) 2016
2 a	Undistributed income, if any, as of the end of 2016 Enter amount for 2015 only			0	
р	Total for prior years: 20,20,20		0		
3 a	Excess distributions carryover, if any, to 2016 From 2011	1			
b	From 2012 0	-			-
C	From 2013 0	] ،			
d	From 2014				
e f	From 2015				
4	Qualifying distributions for 2016 from Part XII,	0		> ×į́	, , , ,
а	line 4. ► \$ Applied to 2015, but not more than line 2a.	2		0	
b	Applied to undistributed income of prior years (Election required—see instructions)		0		
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2016 distributable amount	, , , , , , , , , , , , , , , , , , ,			
е	Remaining amount distributed out of corpus	0		744	****
5	Excess distributions carryover applied to 2016	. 0	* .	189 <b>4</b> 34	C
	(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	0			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0		
С	Enter the amount of prior years' undistributed		-	, , , , , , , , , , , , , , , , , , ,	***************************************
	income for which a notice of deficiency has been issued, or on which the section 4942(a)	" " " " "		, , , ,	
	tax has been previously assessed	, ,	0		
d	Subtract line 6c from line 6b. Taxable amount—see instructions	*	0	y ,	,
е	Undistributed income for 2015. Subtract line				
	4a from line 2a. Taxable amount—see instructions				
f	Undistributed income for 2016. Subtract lines			0	
	4d and 5 from line 1. This amount must be distributed in 2017		:		
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 2011 not applied on line 5 or line 7 (see instructions).	0			
9	Excess distributions carryover to 2017.				
40	Subtract lines 7 and 8 from line 6a	0			
10	Analysis of line 9 Excess from 2012				
a b	Excess from 2012	{			
c	Excess from 2014 0				
d	Excess from 2015 0				
e	Excess from 2016				

Part	VIV Drivete Operating Founds	tions (see instru	tions and Part	VII A guestion I	<u></u>	Page 10
	XIV Private Operating Founda  If the foundation has received a ruling				9) 	····
ıa	foundation, and the ruling is effective fo			•		
	Check box to indicate whether the four	•	•		ection  4942(j)(	3) or 4942(j)(5)
			operating foundati	Prior 3 years	ection 4942()(c	3) 01 [] 4942()(3)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	(E) 0010	<del></del>	(-0.0014	(e) Total
	investment return from Part X for each year listed	(a) 2017	<b>(b)</b> 2016	(c) 2015	(d) 2014	
b	85% of line 2a	Part XIV n/a				
С	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 .					
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test-enter					
	(1) Value of all assets			1		
	(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					
С	"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					<del></del>
	(4) Gross investment income					
Part	XV Supplementary Information	on (Complete th	is part only if t	he foundation	had \$5,000 or me	ore in assets at
	any time during the year-	-see instruction	s.)			
1	Information Regarding Foundation	Managers:				
а	List any managers of the foundation before the close of any tax year (but of					by the foundation
James	L. Nipper / \$6,000					
b	List any managers of the foundation	who own 10% or	more of the sto	ck of a corporation	on (or an equally la	rge portion of the
	ownership of a partnership or other e	ntity) of which the f	oundation has a	10% or greater in	terest.	-
None						
2	Information Regarding Contributio	n, Grant, Gift, Loa	n, Scholarship, e	etc., Programs:		
	Check here ► ✓ If the foundation unsolicited requests for funds. If the complete items 2a, b, c, and d. See it	foundation makes (			-	
а	The name, address, and telephone n	umber or email add	lress of the perso	on to whom applic	cations should be ad	ddressed
b	The form in which applications should	d be submitted and	I information and	materials they sh	ould include	
c	Any submission deadlines:	<u> </u>				
<del></del> _	Any restrictions or limitations on a	warde such as h	, geographical a	reas charitable	fields kinds of in-	titutions or other
d	Any restrictions or limitations on a factors:	warus, Sucri as Dy	, geographical a	ireas, Charitable	III DI III N	munons, or other

,3	Grants and Contributions Paid During t	he Year or Approve	ed for Fut	ure Payment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or	Amount
	Name and address (home or business)	or substantial contributor	recipient	contribution	
а	Paid during the year				
			}		
This s	ection not applicable				
	•	ł			
	,				
-					1
					1
					1
					1
					<u> </u>
	Total	<u> </u>	· · ·	▶ 3á	1
В	Approved for future payment		ļ		1
			\ 		
			İ		
		l	į		
This s	section not applicable				
			1		1
			1		
	Total			<b>▶</b> 3l	

_	t XVI-A Analysis of Income-Producing Actions amounts unless otherwise indicated.		siness income	Excluded by sect	on 512, 513, or 514	
	gross amounts amost outerwise indicator.	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1	Program service revenue			Exolusion dodo	741100111	(See instructions)
	a no income producing activities			<u> </u>		
	b			<del> </del>		
	<u> </u>		·			
	d					
	e				· · · · · · · · · · · · · · · · · · ·	ļ
	f			ļ		
_	g Fees and contracts from government agencies					
	Membership dues and assessments	ļ		<del> </del>	-	
	Interest on savings and temporary cash investments	<u> </u>	<del></del>			
	Dividends and interest from securities			. 1. 41.		
5	Net rental income or (loss) from real estate	<u>// (###################################</u>	× , %/2%/	1 7 7 th 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		<u>, - ;                                  </u>
	a Debt-financed property		<del> </del>			
e	<b>b</b> Not debt-financed property	\				
	Net rental income or (loss) from personal property Other investment income		_			<del>  _</del>
	Gain or (loss) from sales of assets other than inventory Net income or (loss) from special events			-	<u> </u>	
	Gross profit or (loss) from sales of inventory					
	Oth #	<u> </u>				
• • •	h	<u> </u>				
	_					
	1		<del></del>	<del>                                     </del>		
	e		<u>-</u>	<del>                                     </del>		
		1			ļ	
12		Photos,		338/40		
	Subtotal. Add columns (b), (d), and (e)	****			13	
13	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)				13	
<b>13</b> (See	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation	 ns.)			13	
13 (See Par	Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation  t XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exem	ot Purposes		
13 (See Par Line	Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation  t XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exem	ot Purposes		
13 (See Par Line	Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation  t XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exem	ot Purposes		
13 (See Par Line	Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation  t XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exem	ot Purposes		
13 (See Par Line	Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation  t XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exem	ot Purposes		
13 (See Par Line	Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation  t XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exem	ot Purposes		
13 (See Par Line	Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation  t XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exem	ot Purposes		
13 (See Par Line	Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation  t XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exem	ot Purposes		
13 (See Par Line	Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculation  XVI-B Relationship of Activities to the A  No. Explain below how each activity for which accomplishment of the foundation's exempt put	 ns.) Accomplishm	ent of Exem	ot Purposes		
13 (See Par Line	Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculation  XVI-B Relationship of Activities to the A  No. Explain below how each activity for which accomplishment of the foundation's exempt put	 ns.) Accomplishm	ent of Exem	ot Purposes		
13 (See Par Line	Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculation  XVI-B Relationship of Activities to the A  No. Explain below how each activity for which accomplishment of the foundation's exempt put	 ns.) Accomplishm	ent of Exem	ot Purposes		
13 (See Par Line	Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculation  XVI-B Relationship of Activities to the A  No. Explain below how each activity for which accomplishment of the foundation's exempt put	 ns.) Accomplishm	ent of Exem	ot Purposes		
13 (See Par Line	Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculation  XVI-B Relationship of Activities to the A  No. Explain below how each activity for which accomplishment of the foundation's exempt put	 ns.) Accomplishm	ent of Exem	ot Purposes		
13 (See Par Line	Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculation  XVI-B Relationship of Activities to the A  No. Explain below how each activity for which accomplishment of the foundation's exempt put	 ns.) Accomplishm	ent of Exem	ot Purposes		
13 (See Par Line	Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculation  XVI-B Relationship of Activities to the A  No. Explain below how each activity for which accomplishment of the foundation's exempt put	 ns.) Accomplishm	ent of Exem	ot Purposes		
13 (See Par Line	Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculation  XVI-B Relationship of Activities to the A  No. Explain below how each activity for which accomplishment of the foundation's exempt put	 ns.) Accomplishm	ent of Exem	ot Purposes		
13 (See Par Line	Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculation  XVI-B Relationship of Activities to the A  No. Explain below how each activity for which accomplishment of the foundation's exempt put	 ns.) Accomplishm	ent of Exem	ot Purposes		
13 (See Par Line	Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculation  XVI-B Relationship of Activities to the A  No. Explain below how each activity for which accomplishment of the foundation's exempt put	 ns.) Accomplishm	ent of Exem	ot Purposes		
13 (See Par Line	Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculation  XVI-B Relationship of Activities to the A  No. Explain below how each activity for which accomplishment of the foundation's exempt put	 ns.) Accomplishm	ent of Exem	ot Purposes		
13 (See Par Line	Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculation  XVI-B Relationship of Activities to the A  No. Explain below how each activity for which accomplishment of the foundation's exempt put	 ns.) Accomplishm	ent of Exem	ot Purposes		
13 (See Par Line	Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculation  XVI-B Relationship of Activities to the A  No. Explain below how each activity for which accomplishment of the foundation's exempt put	 ns.) Accomplishm	ent of Exem	ot Purposes		
13 (See Par Line	Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculation  XVI-B Relationship of Activities to the A  No. Explain below how each activity for which accomplishment of the foundation's exempt put	 ns.) Accomplishm	ent of Exem	ot Purposes		
13 (See Par Line	Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculation  XVI-B Relationship of Activities to the A  No. Explain below how each activity for which accomplishment of the foundation's exempt put	 ns.) Accomplishm	ent of Exem	ot Purposes		
13 (See Par Line	Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculation  XVI-B Relationship of Activities to the A  No. Explain below how each activity for which accomplishment of the foundation's exempt put	 ns.) Accomplishm	ent of Exem	ot Purposes		mportantly to the stions)
13 (See Par Line	Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculation  XVI-B Relationship of Activities to the A  No. Explain below how each activity for which accomplishment of the foundation's exempt put	 ns.) Accomplishm	ent of Exem	ot Purposes		

Firm's address ▶

Part	AVII	Exempt Or	•	•	isters ic	and Ira	insactio	ns and r	relationshi	ps wit	n Noncha	ritabi	е
1	Did the	organization of			engage in	any of the	e follówin	g with any	other organ	nization	described		Yes No
		on 501(c) of th											K-A Port
	organiz	ations?										1 1 1 1	
а	Transfe	rs from the re	porting foui	ndation to	a nonch	arıtable ex	empt org	anızatıon	of:			, 2°5	
	(1) Cas	h										1a(1)	<b>√</b>
	(2) Oth	er assets .										1a(2)	1
b	Other tr	ansactions.										1.24.25	247746 474
	(1) Sale	s of assets to	a nonchar	ıtable exe	mpt orga	nızatıon						1b(1)	1
	(2) Pure	chases of asse	ets from a r	noncharita	able exem	npt organiz	zation .					1b(2)	1
	(3) Ren	tal of facilities	, equipmen	it, or othe	r assets							1b(3)	<b>✓</b>
	(4) Reir	nbursement a	rrangemen	ts								1b(4)	✓
	(5) Loa	ns or loan gua	arantees .									1b(5)	<b>✓</b>
	(6) Perf	ormance of se	ervices or n	nembersh	np or fund	draising sc	dicitations	s				1b(6)	✓
С	Sharing	of facilities, e	quipment,	mailing lis	sts, other	assets, or	paid emp	oloyees				1c	✓
d		nswer to any											
		f the goods, o											
		any transacti											
(a) Line	e no (b)	Amount involved	(c) Na	me of nonch	naritable exe	mpt organiza	ation	(d) Descr	ption of transfe	rs, transac	tions, and sha	aring arr	angements
			-										
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	Is the f	oundation dire	ectly or inc	lirectly af	filiated w	th or rela	ated to a	ne or mo	re tax-exem	nt organ	nizations		
		ed in section	•	•							_	7 Vec	s 🗸 No
b		" complete the									_		, 110
		(a) Name of organ				(b) Type of c	organization			(c) Descri	ption of relation	nship	
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		enalties of perjury,									t of my knowle	dge and	belief, it is true
Sigr	correct,	and complete Dec	laration of prep	arer fother th	ıan taxpayer)	is based on al	I information	of which prep	arer has any kno	wledge	May the I	RS disci	uss this return
Here		1	$\mathcal{L}$			2111	ISP Pr	esident/ s	igned 2/7/18		with the	preparer	shown below
		ure of officer on the	tee			Date	Title				- (see instru	ictions)?	☐Yes ☐ No
Paid	<b>7</b>   F	rint/Type prepare	neme		Preparer	's signature			Date		heck   ıf	PTIN	
Prep		)									elf-employed		
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Phone no

## Schedule B

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

**Schedule of Contributors** 

OMB No 1545-0047

2016

Department of the Treasury Internal Revenue Service ► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

Name of the organization
The Jason Project, Inc

Organization type (check one)

Employer identification number
47-1943889

Cigalization type (cited Cite)			
Filers of:	Section:		
Form 990 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 990-PF	501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trust treated as a private foundation		
	501(c)(3) taxable private foundation		
Check if your organization is	covered by the General Rule or a Special Rule.		
<b>Note:</b> Only a section 501(c)(7 instructions.	), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See		
General Rule			
or more (in money o	For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions		
Special Rules			
regulations under se 13, 16a, or 16b, and	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> / <sub>3</sub> % support test of the regulations under sections 509(a)(1) 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 any one contributor, 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, or (ii) Form 990-EZ, line 1. Complete Parts I and II.		
contributor, during the	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.		
contributor, during t contributions totaled during the year for a <b>General Rule</b> applie	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one he year, contributions exclusively for religious, charitable, etc., purposes, but no such dimore than \$1,000. If this box is checked, enter here the total contributions that were received in exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the est to this organization because it received nonexclusively religious, charitable, etc., contributions here during the year		
Caution: An organization tha	it isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,		

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on 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 certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization The Jason Project, Inc Employer identification number 47-1943889

Part I	Contributors (See instructions). Use duplicate copies of Part I if additional space is needed.			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
1	Mrs Delores Barr Weaver 2525 College St., Suite 1122  Jacksonville, FL 32204	\$4,500	Person  Payroll  Noncash  (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
2	Mr Frank Edward Nipper  1107 Rigdon Road  Jacksonville, Florida 32220-1123	\$1,300	Person  Payroll  Noncash  (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
3	Roslyn R Lanier  13941 White Heron Pl  Jacksonville FL 32224-4802	\$100	Person  Payroll  Noncash  (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
4	Mr Joseph C Bracewell, Jr  13753 William Davis Parkway West  Jacksonville, FL 32224-6603	\$3,300	Person  Payroll  Noncash  (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
5	Blowing Rock Community Foundation, Inc. Attn. Sandy Miller, Chairperson  PO Box 525  Blowing Rock, NC 28605	\$	Person  Payroll  Noncash  (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
6	Parker Pennington Dentists J  541 The Greens Way  Jacksonville Beach, FL 32250	\$300	Person	

Employer identification number

Part I	Contributors (See instructions). Use duplicate co	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
7	Mrs Barbara Whitton 211 Balsam Boone, NC 28607	\$ 500	Person  Payroll  Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	Mr Jerry J & Rosalind S Richardson  7544 Morrocroft Farms Lane  Charlotte, NC 28211-5013	\$ 4,500	Person Payroll Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	Lance and Pam Uhley Wellington, Florida 33414  15670 Lindbergh Lane  Wellington, Florida 33414	\$\$	Person  Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	Mr Robert Schupp  9745 Touchton Road, Unit 2803  Jacksonville, FL 32246	\$ 500	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	James L. Nipper  1818 The Woods Drive  Jacksonville, FL 32246-1079	\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Name of organization

The Jason Project, Inc

Employer identification number 47-1943889

Part II	Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed.				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received		
	THIS FOUNDATION HAS RECEIVED NO NONCASH PROPERTY, AND OWNS NO NONCASH PROPERTY				
	THIS FOUNDATION HAS GIVEN NO PROPERTY OF ANY NATURE	\$			
(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		
		\$			

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Name of o The Jason P	rganization		Employer identification number 47-194388			
Part III	Exclusively religious, charitable, etc., (10) that total more than \$1,000 for the	ne year from any one contributed some completing Part III, enter the	s described in section 501(c)(7), (8), or or. Complete columns (a) through (e) and total of exclusively religious, charitable, etc.,			
-7	Use duplicate copies of Part III if addition	onal space is needed.				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	THIS FOUNDATION HAS RECEIVED NO GIFTS, AND GIVEN NO GIFTS					
	(e) Transfer of gift					
(	Transferee's name, address, and	ZIP + 4 Rel	Relationship of transferor to transferee			
(a) No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
(a) No. from Part I	Transferee's name, address, and  (b) Purpose of gift	(e) Transfer of gift  ZIP + 4 Rel  (c) Use of gift	(d) Description of how gift is held			
		(a) Transfer of gift				
	(e) Transfer of gift  Transferee's name, address, and ZIP + 4 Relati		ationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of gift				
	Transferee's name, address, and	-	ationship of transferor to transferee			