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DLN: 93491312009528

2017

OMB No 1545-0052

Return of Private Foundation

Department of the Treasury

Internal Revenue Service

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 instructions is at www.irs.gov/form990pf.

For calendar year 2017, or tax year beginning 01-01-2017 , and ending 12-31-2017 A Employer identification number THE PRIMERICA FOUNDATION INC 27-4689647 Number and street (or P O box number if mail is not delivered to street address) 1 PRIMERICA PARKWAY B Telephone number (see instructions) (470) 564-6245 City or town, state or province, country, and ZIP or foreign postal code DULUTH, GA $\,$ 30099 ${f C}$ If exemption application is pending, check here ☐ Initial return G Check all that apply ☐ Initial return of a former public charity D 1. Foreign organizations, check here Amended return ☐ Final return 2 Foreign organizations meeting the 85% test, check here and attach computation Address change ☐ Name change E If private foundation status was terminated ☑ Section 501(c)(3) exempt private foundation H Check type of organization under section 507(b)(1)(A), check here ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation I Fair market value of all assets at end **J** Accounting method ☐ Cash ☑ Accrual If the foundation is in a 60-month termination under section 507(b)(1)(B), check here of year (from Part II, col (c), Other (specify) line 16) \$ 724,727 (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The total Disbursements for charitable Revenue and (b) Net investment Adjusted net (c) of amounts in columns (b), (c), and (d) may not necessarily expenses per books purposes equal the amounts in column (a) (see instructions)) (cash basis only) Contributions, gifts, grants, etc , received (attach 1,069,691 schedule) Check ▶ ☐ If the foundation is **not** required to attach 2 4.094 4.094 3 Interest on savings and temporary cash investments Dividends and interest from securities Gross rents 5a b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a. 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications . 10a Gross sales less returns and allowances Less Cost of goods sold Gross profit or (loss) (attach schedule) c Other income (attach schedule) 11 Total. Add lines 1 through 11 1,073,785 4,094 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits Operating and Administrative Expenses 16a Legal fees (attach schedule) . . . 16,138 12,150 1,215 10,935 Accounting fees (attach schedule) Other professional fees (attach schedule) 18 Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion 19 20 150 21 Travel, conferences, and meetings 150 22 Printing and publications . . 1,405 1,405 23 Other expenses (attach schedule) 20.738 2.888 17,850 Total operating and administrative expenses. 24 Add lines 13 through 23 50.581 4,103 46,478 1,160,000 1,010,000 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 1,210,581 4,103 1,056,478 27 Subtract line 26 from line 12 Excess of revenue over expenses and -136,796 disbursements Net investment income (If negative, enter -0-) Adjusted net income(If negative, enter -0-) For Paperwork Reduction Act Notice, see instructions. Cat No 11289X Form **990-PF** (2017)

	-	cash hor meetest bearing			
	2	Savings and temporary cash investments	786,523	724,727	724,727
	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 (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less allowance for doubtful accounts ▶			
S	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U S and state government obligations (attach schedule)			
	ь	Investments—corporate stock (attach schedule)			
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	786,523	724,727	724,727
	17	Accounts payable and accrued expenses			
	18	Grants payable		75,000	
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
lab	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe)			
	23	Total liabilities(add lines 17 through 22)	0	75,000	
es		Foundations that follow SFAS 117, check here			

786,523

786,523

786,523

649,727

649,727

724,727

2

3 4

5

6

786,523

-136,796

649,727

649,727 Form **990-PF** (2017)

0

Net Assets or Fund Balance

24

25

26

27

28

29

30

31 Part III

2

3

4

Unrestricted

Temporarily restricted

Permanently restricted .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3

Foundations that do not follow SFAS 117, check here

Capital stock, trust principal, or current funds

Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Analysis of Changes in Net Assets or Fund Balances

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Page **3**

) property sold (e g , rea nmon stock, 200 shs 1		(b) How acquired P—Purchase D—Donation		(c) te acquired o , day, yr)	(d) Date sold (mo , day, yr)
1a							
-							
		(f)		(g)		(h)
(e) Gross sales pri	. [Depreciation allowed		other basis		Gain o	r (loss)
GIOSS Sales pii	ce	(or allowable)	plus expe	ense of sale		(e) plus (f) mınus (g)
a							
b							
С							
d							
e							
Complete only for	assets showing gain	in column (h) and own	ned by the foundation (on 12/31/69		(1)
(i)		(j)		(k)		Gains (Col (h) gain minus
(i) FMV as of 12/3	31/69	Adjusted basis		of col (ı)	col		less than -0-) or
	,	as of 12/31/69	over col	(j), if any		Losses (Tr	om col (h))
a							
b							
С							
d							
e							
2 Capital gain net in	come or (net capital		If gain, also enter in Po If (loss), enter -0- in P		2		
	ın Part I, line 8, colu	s defined in sections 1 umn (c) (see instructio	ons) If (loss), enter -0		}		
Part V Qualificat	ion Under Section	n 4940(e) for Re	duced Tax on Net	Investment I	ncome		
(For optional use by dome						'	
(For optional use by doine	stic private roundati	ons subject to the sec	cion 4540(a) tax on ne	t investment inco	Jille)		
If section 4940(d)(2) appl Was the foundation liable	•		ole amount of any year	in the base perio	nd?	Пу	es 🗸 No
If "Yes," the foundation do				in the base pend	,u		
1 Enter the appropria	ite amount in each c	column for each year,	see instructions before	making any entr	ies		
(a) Base period years Calenda year (or tax year beginning		(b) alifying distributions	(c) Net value of noncharitable	e-use assets	(col	(d) Distribution rati (b) divided by d	
2016		1,066,843		757,962	(55)	. ,	1 407515
2015		959,150		734,042			1 306669
2014		980,496		775,372			1 264549
2013		1,017,379		756,738			1 344427
2012		717,241		659,307			1 087871
2 Total of line 1, colu	ımn (d)			2	.		6 411031
	ratio for the 5-year		he total on line 2 by 5,	or by the	1		1 282206
4 Enter the net value	of noncharitable-use	assets for 2017 from	Part X, line 5	4			786,883
5 Multiply line 4 by line	ne 3			5	:		1,008,946
6 Enter 1% of net inv	estment income (1%	o of Part I, line 27b)		6			0
7 Add lines 5 and 6				7			1,008,946
8 Enter qualifying dis	tributions from Part	XII, line 4 ,		8	,		1,056,478
			rt VI, line 1b, and com		sing a 1%	% tax rate Se	e the Part VI

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?.

7b

	Information About Officers,	Directors	Trustage	Foundation	Managers	Highly Daid	Employees
Dowt VIII	Initination About Officers,	Directors,	Hustees,	Foundation	manayers,	nigiliy Falu	Employees,
Part VIII	and Contractors						

and Contractors					
1 List all officers, directors, truste	es, fo			(see instructions). (d)	I
(a) Name and address	(Title, and average hours per week b) devoted to position	(c) Compensation (If not paid, enter -0-)	Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
KAREN FINE SALTIEL 1 PRIMERICA PARKWAY DULUTH, GA 30099001	CHA1 5 00	IRMAN & PRESIDENT	0	0	C
ANNE SOUTTER	VICE	CHAIRMAN, VP	0	0	0
1 PRIMERICA PARKWAY DULUTH, GA 300990001					
WILLIAM J NEMETZ		ASURER	0	0	0
1 PRIMERICA PARKWAY DULUTH, GA 300990001	5 00				
MARGARET HALBERT	SECF	RETARY	0	0	0
1 PRIMERICA PARKWAY	20 0	0			
DULUTH, GA 300990001 2 Compensation of five highest-pa	id er	nnlovees (other than th	ose included on line 1	—see instructions). If no	e. enter "NONF."
(a) Name and address of each employee pa		Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred	Expense account, (e) other allowances
NONE				(a) compensation	
]			
		_			
		-			
Total number of other employees paid ov	er \$5	50 000		•	0
3 Five highest-paid independent co					
(a) Name and address of each perso				e of service	(c) Compensation
NONE					
			_		
			-		
Total number of others receiving over \$50	2 000) for professional services			
Part IX-A Summary of Direct					
List the foundation's four largest direct charitable			ude relevant statistical inform	nation such as the number of	F
organizations and other beneficiaries served, con					Expenses ————
1					
2					_
3					
4					
Part IX-B Summary of Program	m-R	elated Investments	(see instructions)		
Describe the two largest program-related inve	estme	nts made by the foundation d	uring the tax year on lines 1	and 2	Amount
1					
2					
All other program-related investments	See	ınstructions			
3					
Total. Add lines 1 through 3 .					C

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

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

Adjusted qualifying distributions. Subtract line 5 from line 4.

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

2

3

4

5

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

1a

1b

2

3a 3h

4

5

1,056,478

1.056.478

1,056,478

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(d)

2017

Page 9

39,344

39.344

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0

b Total for prior years

From 2012.

b From 2013. . . . c From 2014. . .

d From 2015.

e From 2016.

4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ 1,056,478 a Applied to 2016, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election

d Applied to 2017 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a))

5 Excess distributions carryover applied to 2017

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b 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. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2012 not

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2018.

10 Analysis of line 9

a Excess from 2013. . .

c Excess from 2015. . . .

d Excess from 2016. . . e Excess from 2017. . .

b Excess from 2014. .

(If an amount appears in column (d), the

6 Enter the net total of each column as

indicated below:

Form 990-PF (20	· · · · · · · · · · · · · · · · · · ·	
Part XIII	Undistributed Income	(see instructions)

1 Distributable amount for 2017 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2017 a Enter amount for 2016 only.

Excess distributions carryover, if any, to 2017

684.276 979,542 941 727 922,448 1,028,945

f Total of lines 3a through e.

(a)

Corpus

4.556.938

1,017,134

5,574,072

684.276

4,889,796

979.542

941,727

922,448

1,028,945

1,017,134

(b)

Years prior to 2016

(c)

2016

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Part XV Supplementary Informa	ation (continued)			
3 Grants and Contributions Paid D	uring the Year or Approv	ed for Future	Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount
a Paid during the year See Additional Data Table				
Total			▶ 3a	1,010,000
b Approved for future payment JUNIOR ACHIEVEMENT OF GEORGIA INC 460 ABERNATHY ROAD NE ATLANTA, GA 30328	NONE	PC	SUPPORT THE MISSION OF JUNIOR ACHIEVEMENT	75,000
UNITED WAY OF GREATER ATLANTA 100 EDGEWOOD AVENUE NE ATLANTA, GA 30303	NONE	PC	SUPPORT FOR SOCIAL SERVICES FOR LMI POPULATION IN GREATER ATLANTA	75,000
Total			▶ 3b	150,000
				Form 990-PF (2017)

Enter gros	s amounts unless otherwise indicated	Unrelated b	usiness income	Excluded by section	n 512, 513, or 514	(e) Related or exempt
1 Progra	m service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
g Fees	and contracts from government agencies					
3 Inter	ership dues and assessments est on savings and temporary cash					
	tments			14	4,094	
	ntal income or (loss) from real estate					
	:-financed property					
	debt-financed property					
6 Net r	ental income or (loss) from personal property					
	investment income					
	or (loss) from sales of assets other than					
	ntory					
	profit or (loss) from sales of inventory					
	revenue a					
e			0		4.004	
e			0	1	4,094 3	
e 12 Subto 13 Total (See w	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcu	lations)		1	4,094 3	4,094
e 12 Subto 13 Total (See w	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcu 1-B Relationship of Activities to th	e Accomplisi	hment of Exem	pt Purposes	3	4,094
e 12 Subto 13 Total (See w	tal Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Vorksheet in line 13 instructions to verify calculus and the second seco	e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XVI-A contribu	3ited importantly to	4,094
e 12 Subto 13 Total. (See w Part XV Line No.	tal Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). vorksheet in line 13 instructions to verify calcu (I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XVI-A contribu	3ited importantly to	4,094
e 12 Subto 13 Total. (See w Part XV Line No.	tal Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). vorksheet in line 13 instructions to verify calcu (I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XVI-A contribu	3ited importantly to	4,094
e 12 Subto 13 Total (See w Part XV Line No.	tal Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). vorksheet in line 13 instructions to verify calcu (I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XVI-A contribu	3ited importantly to	4,094
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e 12 Subto 13 Total. (See w Part XV Line No.	tal Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). vorksheet in line 13 instructions to verify calcu (I-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XVI-A contribu	3ited importantly to	4,094
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Foi	rm 990-PF	(2017)			Pa	ge 13
	Part XVI:	Information Re Exempt Organia	egarding Transfers To and Transactions and Relationships With Nonchari zations	table		
1			directly engage in any of the following with any other organization described in section 501 or 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
а	Transfers	from the reporting foun	dation to a noncharitable exempt organization of			
	(1) Cash	1		1a(1)		No
				1a(2)		No
b	Other tra	nsactions				
	(1) Sale	s of assets to a nonchari	itable exempt organization	1b(1)		No
	(2) Purc	hases of assets from a n	noncharitable exempt organization	1b(2)		No
	(3) Rent	cal of facilities, equipmer	nt, or other assets	1b(3)		No
	(4) Rein	nbursement arrangemen	ts	1b(4)		No
	(5) Loar	ns or loan guarantees.		1b(5)		No
	(6) Perfo	rmance of services or m	embership or fundraising solicitations	1b(6)		No
c	: Sharing o	of facilities, equipment, n	nailing lists, other assets, or paid employees	1c		No
d	of the go	ods, other assets, or ser	ers "Yes," complete the following schedule. Column (b) should always show the fair market vices given by the reporting foundation. If the foundation received less than fair market valuingement, show in column (d) the value of the goods, other assets, or services received			
(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sha	rıng arra	ngemer	its

) Line No	(b) Amount involved	(c) Name of noncha	aritable exempt organization	(d) Desc	cription of transfers, transactions, and sharing arrangem	ents
i) Line No	(B) Amount involved	(c) Nume of Horiene	intable exempt organization	(d) Desi	cription of transfers, transactions, and sharing arrangement	31103
Is the fou	ındatıon dırectly or ındır	ectly affiliated with	, or related to, one or mor	e tax-exem		
described	I in section 501(c) of the	e Code (other than :	section 501(c)(3)) or in se	ction 527?	🗆 Yes 🕟	☑No
If "Yes."	complete the following s	schedule				
	(a) Name of organizati		(b) Type of organiza	tion	(c) Description of relationship	
	(-)		(-) .,,,		(-,	
					1	

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Sign May the IRS discuss this return with the preparer shown 2018-11-06 Here Signature of officer or trustee Title Date (see instr)? 🗹 Yes 🗆 No Print/Type preparer's name Preparer's Signature PTIN Date Check if self-P00292964 employed ▶ □ CARLYE W DOOLEY 2018-11-06 Paid **Preparer** Firm's name ▶ WINDHAM BRANNON PC Fırm's EIN ▶58-1763439 **Use Only**

Firm's address ▶ 3630 PEACHTREE RD NE SUITE 600 ATLANTA, GA 30326

Phone no (404) 898-2000

orm 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	any foundation manager or substantial contributor	recipient						
a Paid during the year								
100 BLACK MEN OF AMERICA 141 AUBURN AVENUE ATLANTA, GA 30303	NONE	PC	SUPPORT FOR TALENTED YOUNG LMI AMERICANS PURSUING HIGHER EDUCATION	10,000				
ALZHEIMER'S ASSOCIATION GEORGIA CHAPTER 41 PERIMETER CENTER EAST SUITE 550 ATLANTA, GA 30346	NONE	PC	FUNDING RESEARCH TO END THE DISEASE, ENHANCED CARE & SUPPORT FOR THOSE W/DEMENTIA	10,000				
AMERICAN RED CROSS 1955 MONROE DRIVE NE ATLANTA, GA 30324	NONE	PC	HOME FIRE PREVENTION AND SAFETY CAMPAIGN	10,000				

ALZHEIMER'S ASSOCIATION GEORGIA CHAPTER 41 PERIMETER CENTER EAST SUITE 550 ATLANTA, GA 30346	NONE	PC	FUNDING RESEARCH TO END THE DISEASE, ENHANCED CARE & SUPPORT FOR THOSE W/DEMENTIA	10,000
AMERICAN RED CROSS 1955 MONROE DRIVE NE	NONE	PC	HOME FIRE PREVENTION AND SAFETY CAMPAIGN	10,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount			
Name and address (home or business)	any foundation manager or substantial contributor	recipient					
a Paid during the year							
AMERICAN RED CROSS 1955 MONROE DRIVE NE ATLANTA, GA 30324	NONE	PC	HURRICAN HARVEY RELIEF	25,000			
ATLANTA CHILDREN'S SHELTER 607 PEACHTREE STREET NE ATLANTA, GA 303080322	NONE	PC	SUPPORT FOR HOMELESS FAMILIES WITH CHILDREN	25,000			
AURORA THEATRE128 E PIKE STREET LAWRENCEVILLE. GA 30046	NONE	PC	SUPPORT FOR LEARNING LIBRARY EDUCATIONAL PLAY	15,000			

ATLANTA, GA 303080322				
AURORA THEATRE128 E PIKE STREET LAWRENCEVILLE, GA 30046	NONE	PC	SUPPORT FOR LEARNING LIBRARY EDUCATIONAL PLAY SERIES & TEATRO AURORA	

Total.....

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Form 990PF Part XV Line 3 - Grant	Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment					
Recipient	If recipient is an individual, show any relationship to		Amount			
Name and address (home or business)	any foundation manager or substantial contributor	recipient	nt			
a Paid during the year						
BOYS & GIRLS CLUBS OF METRO ATL 1275 PEACHTREE STREET NE SUITE 500 ATLANTA, GA 30309	NONE	PC	SUPPORT FOR LMI YOUTH FOR ACADEMIC SUCCESS, HEALTHY LIFESTYLES AND LEADERSHIP DEV	15,000		
COMMUNITY FOUNDATION FOR NORTHEAST GEORGIA 6500 SUGARLOAF PARKWAY SUITE 220 DULUTH, GA 30097	NONE	PC	COMMUNITY DEVELOPMENT	25,000		
COOL GIRLS 621 NORTH AVENUE NE SUITE A 220 ATLANTA, GA 30308	NONE	PC	ACADEMIC SUPPORT, FINANCIAL EDUCATION & LIFE SKILLS DEVELOPMENT FOR LMI GIRLS	25,000		

DULUTH, GA 30097				
COOL GIRLS 621 NORTH AVENUE NE SUITE A 220 ATLANTA, GA 30308	NONE	PC	ACADEMIC SUPPORT, FINANCIAL EDUCATION & LIFE SKILLS DEVELOPMENT FOR LMI GIRLS	25,000

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Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	show any relationship to status	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)		recipient		
a Paid during the year				
CURE CHILDHOOD CANCER 200 ASHFORD CENTER N SUITE 250 ATLANTA, GA 30338	NONE	PC	FUNDING RESEARCH FOR CHILDHOOD CANCER, SUPPORT FOR FAMILIES W/CHILDREN W/CANCER	10,000
DIRECT SELLING EDUCATION FOUNDATION 1667 K STREET NW SUITE 1100 WASHINGTON, DC 20006	NONE	PC	SUPPORT FOR COMMUNITY COLLEGE ENTREPRENEURIAL PROGRAM	10,000
		1		

ATLANTA, GA 30338			W/CANCER	
DIRECT SELLING EDUCATION FOUNDATION 1667 K STREET NW SUITE 1100 WASHINGTON, DC 20006	NONE	PC	SUPPORT FOR COMMUNITY COLLEGE ENTREPRENEURIAL PROGRAM	10,000
EAGLE RANCHPO BOX 7200 CHESTNUT MOUNTAIN, GA 30502	NONE	PC	SUPPORT FOR CHILDREN IN CRISIS	10,000

1,010,000 Total

Form 990PF Part XV Line 3 - Gran	ts and Contributions Paid	During the	Year or Approved for Future	Payment
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
ECONOMIC EMPOWERMENT INITIATIVECENTERS OF HOPE 250 GEORGIA AVENUE SUITE 203 ATLANTA, GA 30312	NONE	PC	FINANCIAL LITERACY AND TRAINING PROGRAM FOR LMI YOUTH	25,000
FERNBANK MUSEUM OF NATIONAL HISTORY 767 CLIFTON ROAD NE ATLANTA, GA 303071221	NONE	PC	SCIENCE & ENVIRONMENTAL EDUCATION FOR LMI YOUTH	10,000
FOUNDATION FOR PUERTO RICO PO BOX 364029 SAN JUAN, PR 009364029	NONE	PC	HURRICANE MARIA RELIEF & RECOVERY	50,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
FRIENDS OF GWINNETT COUNTY SENIORS 75 LANGLEY DRIVE LAWRENCEVILLE, GA 30046	NONE	PC	SUPPORT & PROMOTION OF HEALTH, WELL-BEING AND PERSONAL SAFETY FOR SENIORS	10,000
GRIPUNITED WAY 100 EDGEWOOD AVENUE NE ATLANTA, GA 30303	NONE	PC	SUPPORT FOR STRUCTURED RE- ENTRY PROGRAM FOR INCARCERATED INDIVIDUALS	15,000
GATEWAY DOMESTIC VIOLENCE CENTER PO BOX 2962	NONE	PC	SUPPORT FOR NEW SHELTER FOR SURVIVORS OF DOMESTIC VIOLENCE	25,000

GRIPUNITED WAY 100 EDGEWOOD AVENUE NE ATLANTA, GA 30303	NONE	PC	SUPPORT FOR STRUCTURED RE- ENTRY PROGRAM FOR INCARCERATED INDIVIDUALS	
GATEWAY DOMESTIC VIOLENCE CENTER PO BOX 2962	NONE	PC	SUPPORT FOR NEW SHELTER FOR SURVIVORS OF DOMESTIC VIOLENCE	

GAINESVILLE, GA 30503

1,010,000

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Form 990PF Part XV Line 3 - Gran	Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
GEORGIA CENTER FOR NONPROFITS 100 PEACHTREE STREET NW SUITE 1500 ATLANTA, GA 30303	NONE	PC	SUPPORT FOR BUILDING CAPACITY FOR NPSS SERVING LMI COMMUNITY IN ATLANTA	25,000	
GEORGIA COUNCIL ON ECONOMIC EDUCATION PO BOX 1619 ATLANTA, GA 303011619	NONE	PC	SUPPORT FOR PROGRAM FOR HIGH SCHOOL ECONOMICS TEACHERS TEACHING PERSONAL FINANCE	20,000	
GEORGIA GWINNETT COLLEGE 1000 UNIVERSITY CENTER LANE LAWRENCEVILLE, GA 30043	NONE	PC	EDUCATIONAL SUPPORT FOR LMI COLLEGE STUDENTS	10,000	
Total				1,010,000	

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
GEORGIA PARTNERSHIP FOR EXCELLENCE IN EDUCATION 270 PEACHTREE STREET SUITE 2200 ATLANTA, GA 30303	NONE	PC	SUPPORT FOR EXCELLENCE & EQUITY IN EDUCATION FOR LMI HIGH SCHOOL STUDENTS	10,000
GEORGIA RIVER NETWORK 126 S MILLEDGE AVENUE SUITE E3 ATHENS, GA 30605	NONE	PC	SUPPORT FOR PROGRAM TO PROTECT AND RESTORE GEORGIA RIVERS	10,000
GLEANERS FOOD BANK OF INDIANA 3737 WALDEMERE AVENUE INDIANAPOLIS, IN 46241	NONE	PC	SUPPORT OF COMMUNITY ACTION RELIEF MOBILE AND SCHOOL-BASED FOOD PANTRIES	50,000

GLEANERS FOOD BANK OF INDIANA	NONE	PC	SUPPORT OF COMMUNITY	5
3737 WALDEMERE AVENUE			ACTION RELIEF MOBILE AND	
INDIANAPOLIS, IN 46241			SCHOOL-BASED FOOD	
			PANTRIES	

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orm 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
GWINNETT CHILDREN'S SHELTER PO BOX 527 BUFORD, GA 305150527	NONE	PC	SUPPORT FOR SHELTER PROGRAM FOR HOMELESS WOMEN & CHILDREN	10,000
GWINNETT COALITION FOR HEALTH & HUMAN SERVICES 750 S PERRY STREET SUITE 312 LAWRENCEVILLE, GA 30046	NONE	PC	SUPPORT FOR COMPREHENSIVE HEALTH IMPROVEMENT PLAN FOR LMI POPULATION	25,000
GWINNETT COUNCIL FOR THE ARTSHUDGENS ART CENTER 6400 SUGARLOAF PARKWAY BLDG 300	NONE	PC	SUPPORT FOR VISUAL & COMMUNITY ARTS INITIATIVES FOR ALL	25,000

LAWRENCEVILLE, GA 30046				
GWINNETT COUNCIL FOR THE ARTSHUDGENS ART CENTER 6400 SUGARLOAF PARKWAY BLDG 300 DULUTH, GA 30097	NONE	PC	SUPPORT FOR VISUAL & COMMUNITY ARTS INITIATIVES FOR ALL	25,000

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
GWINNETT COUNTY PUBLIC LIBRARY FOUNDATION 1001 LAWRENCEVILLE HIGHWAY LAWRENCEVILLE, GA 30046	NONE	PC	SUPPORT OF EDUCATION & WORKFORCE DEVELOPMENT THROUGH MULTI-MEDIA COMMONS	25,000
GWINNETT COUNTY PUBLIC SCHOOLS FOUNDATION 437 OLD PEACHTREE ROAD NW SUWANEE, GA 300242978	NONE	PC	SUPPORT OF COMMUNITY- BASED MENTORING PROGRAM FOR AT-RISK STUDENTS	25,000
GWINNETT ENVIRONMENTAL & HERITAGE CENTER 2020 CLEAN WATER DRIVE BUFORD, GA 30519	NONE	PC	SUPPORT OF K-12 EDUCATIONAL PROGRAMMING FOR LMI STUDENTS	10,000
Total				1,010,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
GWINNETT TECHNICAL FOUNDATION 5150 SUGARLOAF PARKWAY LAWRENCEVILLE, GA 30043	NONE	PC	HIGHER EDUCATIONAL SUPPORT FOR LMI STUDENTS	25,000
HISPANIC ORGANIZATION PROMOTING EDUCATION (HOPE) 490 BRISCOE BLVD LAWRENCEVILLE, GA 30046	NONE	PC	SUPPORT FOR SINGLE MOTHER'S TRANSITIONING FROM HOMELESSNESS	10,000
HOPE ANIMAL-ASSISTED CRISIS RESPONSE 1292 HIGH STREET 182 EUGENE, OR 97401	NONE	PC	ANIMAL-ASSISTED SUPPORT FOR INDIVIDUALS AFFECTED BY CRISIS & DISASTERS	10,000
Total				1,010,000

orm 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
INTERLOCKING COMMUNITIES 5170 EDINBOROUGH PL SUGAR HILL, GA 305187811	NONE	PC	SUPPORT FOR "READY BY FIVE" PROGRAM TO PREPARE LMI CHILDREN FOR KINDERGARTEN	10,000
JEWISH FAMILY & CAREER SERVICES 4549 CHAMBLEE DUNWOODY ROAD ATLANTA, GA 30338	NONE	PC	SUPPORT FOR FINANCIAL LITERACY PROJECT FOR LMI & UNEMPLOYED INDIVIDUALS	15,000
JEWISH FAMILY & CAREER SERVICES 4549 CHAMBLEE DUNWOODY ROAD ATLANTA, GA 30338	NONE	PC	SUPPORT FOR INDIVIDUALS AND THEIR FAMILIES AFFECTED BY ADDICTION	10,000
Total				1,010,000

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
JUNIOR ACHIEVEMENT OF GEORGIA INC 460 ABERNATHY ROAD NE ATLANTA, GA 30328	NONE	PC	SUPPORT FOR INTERACTIVE JA FINANCE PARK EDUCATIONAL PROJECT FOR MIDDLE SCHOOLERS	25,000
JUNIOR ACHIEVEMENT OF GEORGIA INC 460 ABERNATHY ROAD NE ATLANTA, GA 30328	NONE	PC	SUPPORT FOR JA ACADEMY THAT PROVIDES SKILLS NEEDED FOR CAREERS & LIFE SUCCESS	25,000
LEADERSHIP GWINNETT FOUNDATION 6500 SUGARLOAF PARKWAY DULUTH, GA 30097	NONE	PC	SUPPORT FOR EDUCATING DIVERSE COMMUNITY LEADERSHIP	10,000
Total				1,010,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		1
a Paid during the year				
MUST MINISTRIES 1407 COBB PARKWAY N MARIETTA, GA 30061	NONE	PC	SUPPORT FOR HOMELESS SHELTER & EMPLOYMENT PROGRAMS FOR HOMELESS & UNEMPLOYED	10,000
NATIONAL CENTER FOR CIVIL & HUMAN RIGHTS 250 WILLIAMS STREET NW SUITE 2322 ATLANTA, GA 30303	NONE	PC	SUPPORT FOR SPONSORSED ADMISSIONS FOR ECONOMICALLY CHALLENGED STUDENTS & SCHOOLS	10,000
NOTHING BUT THE TRUTHPO BOX 845 DACULA, GA 30019	NONE	PC	SUPPORT FOR WEEKEND FOOD PROGRAM FOR FOOD INSECURE CHILDREN	10,000
Total				1,010,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
OPERATION HOPE 707 WILSHIRE BLVD SUITE 3030 LOS ANGELES, CA 90017	NONE	PC	SUPPORT FOR FINANCIAL LITERACY/ENTREPRENEURSHIP CLASSES FOR UNDERSERVED YOUTH	20,000
ORANGE DUFFEL BAG INITIATIVE 1801 PEACHTREE STREET NE SUITE 300 ATLANTA, GA 30309	NONE	PC	SUPPORT FOR FINANCIAL LITERACY/ENTREPRENEURSHIP CLASSES FOR UNDERSERVED YOUTH	25,000
PARTNERSHIP AGAINST DOMESTIC VIOLENCE P O BOX 170225	NONE	PC	SUPPORT FOR EMERGENCY SHELTER, BASIC NEEDS & SUPPORT FOR DOMESTIC	25,000

300 ATLANTA, GA 30309			CLASSES FOR UNDERSERVED YOUTH	
PARTNERSHIP AGAINST DOMESTIC VIOLENCE P O BOX 170225	NONE	PC	SUPPORT FOR EMERGENCY SHELTER, BASIC NEEDS & SUPPORT FOR DOMESTIC	25,000

ATLANTA, GA 30317 VIOLENCE VICTIMS

Total .

1,010,000 За

orm 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
RAINBOW VILLAGE 3427 DULUTH HIGHWAY 120 DULUTH, GA 30096	NONE	PC	SUPPORT FOR HOMELESS FAMILIES TRANSITIONING INTO SOCIETY	25,000
SAFE AMERICA FOUNDATION 2000 FIRST DRIVE SUITE 310 MARIETTA, GA 30062	NONE	PC	SUPPORT FOR VETERANS ASSISTANCE PROGRAMS & VETS TRANSISITION INTO CIVILIAN LIFE	10,000
			· ·	

2000 FIRST DRIVE SUITE 310 MARIETTA, GA 30062			ASSISTANCE PROGRAMS & VETS TRANSISITION INTO CIVILIAN LIFE	
UNITED SERVICES ORGANIZATION (USO) 6000 N TERMINAL PARKWAYSUITE 320 ATLANTA, GA 30320	NONE	PC	SUPPORT FOR PATHFINDER PROGRAM FOR SERVICE MEMBERS TRANSITIONING TO CIVILIAN LIFE	25,000
Total				1,010,000

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orm 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
VETERANS RESOURCE CENTER (FISCAL AGENTGW COAL) 750 S PERRY STREET SUITE 312 LAWRENCEVILLE, GA 30046	NONE	PC	SUPPORT FOR CRITICAL SERVICES FOR VETERANS & THEIR FAMILIES	10,000
WILL TO LIVE FOUNDATION 5805 STATE BRIDGE RD SUITE G-212 JOHNS CREEK, GA 30097	NONE	PC	TEEN SUICIDE PREVENTION PROGRAM	10,000
WOODRUFF ARTS CENTER 1280 PEACHTREE STREET NE ATLANTA, GA 30309	NONE	PC	ARTS ACCESS PROGRAM FOR LMI STUDENTS	50,000

WILL TO LIVE FOUNDATION 5805 STATE BRIDGE RD SUITE G-212 JOHNS CREEK, GA 30097	NONE	PC	TEEN SUICIDE PREVENTION PROGRAM	10,000
WOODRUFF ARTS CENTER 1280 PEACHTREE STREET NE ATLANTA, GA 30309	NONE	PC	ARTS ACCESS PROGRAM FOR LMI STUDENTS	50,000

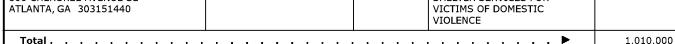
orm 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment						
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount		
Name and address (home or business)	any foundation manager or substantial contributor	recipient				
a Paid during the year						
YEAR UP 730 PEACHTREE STREET NE SUITE 900 ATLANTA, GA 30308	NONE	PC	SUPPORT FOR EDUCATIONAL AND PROFESSIONAL DEVELOPMENT FOR LMI STUDENTS	25,000		
YMCA OF METRO ATLANTA 2985 SUGARLOAF PARKWAY LAWRENCEVILLE, GA 30045	NONE	PC	SUPPORT FOR SUMMER CAMP FOR UNDERSERVED CHILDREN	10,000		
YMCA OF NORTHWEST NORTH CAROLINA 301 N MAIN STREET SUITE 1900 WINSTONSALEM NC 27101	NONE	PC	SUPPORT FOR AFTER-SCHOOL ENRICHMENT PROGRAM FOR LMI YOUTH	10,000		

LAWRENCEVILLE, GA 30045				
YMCA OF NORTHWEST NORTH CAROLINA 301 N MAIN STREET SUITE 1900 WINSTONSALEM, NC 27101	NONE	PC	SUPPORT FOR AFTER-SCHOOL ENRICHMENT PROGRAM FOR LMI YOUTH	10,00

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Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
ZOO ATLANTA 800 CHEROKEE AVENUE SE ATLANTA, GA 303151440	NONE	PC	SUPPORT OF EMERGENCY SHELTER SERVICES FOR VICTIMS OF DOMESTIC VIOLENCE	25,000



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Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

efile GRAPHIC print - DO NOT PRO	D	LN: 93491312009528					
TY 2017 Accounting Fee	s Schedule			_			
Name: THE PRIMERICA FOUNDATION INC							
	EIN : 27-46	89647					
Accounting Fees Schedule							
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable			

12,150

1,215

Purposes

10,935

Accounting Fees Schedule	
Category	Amount

AUDIT FEES

efile GRAPHIC print - DO NOT PROCES	S As Filed Data	-	DLI	N: 93491312009528
TY 2017 Legal Fees Schedu	le			
_				
	ne: THE PRIMER N: 27-4689647	ICA FOUNDATION	INC	
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

16,138

16,138

LEGAL FEES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491312009528			
TY 2017 Other Expenses Schedule							
Name:	Name: THE PRIMERICA FOUNDATION INC						
EIN:	27-4689647						
Other Expenses Schedule							
Description	Revenue and	Net Investment	Adjusted Net	Disbursements for			

Other Expenses Schedule				
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursem Charita Purpo

Other Expenses Schedule			
Description	Revenue and Expenses per	Net Investment Income	

BUSINESS LICENSES AND FEES

CORPORATE RELATIONS

OFFICE SUPPLIES

Description	Expenses per Books	Income	Income	Charitable Purposes
BANK FEES	2,888	2,888		0
		_		

	Books		Purposes
BANK FEES	2,888	2,888	0
SOFTWARE FEE	15,803	0	15,803
MEALS AND ENTERTAINMENT	93	0	93

350

148

1,456

350

148

1,456

efile GRAPHIC print - D	O NOT PROCESS	As Filed Data -				DLN: 93491312009528	
Schedule B		Schedu	ule of Contributo	rs		OMB No 1545-0047	
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Information a	about Schedule B (F	Attach to Form 990, 990-EZ, or 990-PF dule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990				
Name of the organizati					Employer id	dentification number	
Organization type (che	ck one)				27-4689647		
	,						
Filers of:	Section:						
Form 990 or 990-EZ	☐ 501(c)() (enter number) c	rganization				
	☐ 4947(a)(1) nonexempt char	rtable trust not treated a	s a private founda	tion		
	☐ 527 politi	cal organization					
Form 990-PF	✓ 501(c)(3)	exempt private fo	undation				
4947(a)(1) nonexempt charitable trust treated as a private foundation							
501(c)(3) taxable private foundation							
			PF that received, during t omplete Parts I and II S				
Special Rules							
under sections 5 received from an	09(a)(1) and 170(b)	(1)(A)(vı), that che luring the year, tota	g Form 990 or 990-EZ the cked Schedule A (Form to al contributions of the gre plete Parts I and II	990 or 990-EZ), P	art II, line 13,	, 16a, or 16b, and that	
during the year,	total contributions o	f more than \$1,000	or (10) filing Form 990 o Dexclusively for religious animals Complete Parts	, charitable, scien			
during the year, If this box is che purpose Don't c	contributions <i>exclus</i> cked, enter here the omplete any of the p	eively for religious, total contributions parts unless the G o	or (10) filing Form 990 of charitable, etc., purposes that were received during eneral Rule applies to the or more during the year	s, but no such con ng the year for an is organization be	ntributions tota exclusively re ecause it recei	aled more than \$1,000 eligious, charitable, etc , ived <i>nonexclusively</i>	
990-EZ, or 990-PF), but	ıt must answer "No	o" on Part IV, line 2	le and/or the Special Rul , of its Form 990, or chec t it doesn't meet the filing	k the box on line	H of its		
For Paperwork Reduction A for Form 990, 990-EZ, or 99		ructions	Cat No 30613X	Schedu	ıle B (Form 990	0, 990-EZ, or 990-PF) (2017)	

Name of organization THE PRIMERICA FOUNDATION INC		Employer identification 27-4689647	Employer identification number 27-4689647	
Part I	Contributors (See instructions) Use duplicate copies of Part I if ad	ditional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
1	BUISSON FOUNDATION		Person 🗸	
	6354 J F JAY ROAD	\$ 25,000	Noncash	
	GAINESVILLE, GA 305063420		(Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4 PRIMERICA	(c) Total contributions	(d) Type of contribution	
2			Person 🗸	
	1 PRIMERICA PARKWAY	\$ 1,023,576	Noncash	
	DULUTH, GA300990001		(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	
(a)	(b)	(c)	contributions) (d)	
No.	Name, address, and ZIP + 4	Total contributions	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	
		<u> </u>	Noncash	
			(Complete Part II for noncash contributions)	

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)