For Paperwork Reduction Act Notice, see instructions.



Form 990-PF

Department of the Treasury

Internal Revenue Service

## **Return of Private Foundation**

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public. ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No. 1545-0052

2017

Open to Public Inspection

For	calen	dar year 2017 or tax year beginning	, 20	17, and	ending		, 20
		indation				r identification number	er
The	lason	Project, Inc.			1	47-1943889	
Nun	nber and	street (or P O box number if mail is not delivered to street address)	Roo	m/suite	B Telephor	e number (see instructi	ions)
1016	The 18	Janes Devis				(904) 354-7371	. (
		voods Drive  , state or province, country, and ZIP or foreign postal code			-		
Oity	01 10111	, state of province, country, and any or longer postal code			C if exemp	tion application is pend	ing, cneck here ►
_	<del></del> -		of to a sile	1	<u> </u>		. —
G	Check		of a former publ	ic charity	D 1. Foreig	n organizations, check	here
		☐ Final return ☐ Amended r			2. Foreig	n organizations meeting	g the 85% test,
		Address change Name char		<u> </u>		here and attach computed foundation status was	
		type of organization Section 501(c)(3) exempt p				07(b)(1)(A), check here	terminated under
		n 4947(a)(1) nonexempt charitable trust 🔲 Other tax			4		
-		arket value of all assets at   J   Accounting method	✓ Cash	Accrual	F If the fou	ndation is in a 60-mont	h termination
		year (from Part II, col. (c), Other (specify)			under se	ction 507(b)(1)(B), chec	k here ►
	line 16	) ► \$ (Part I, column (d) must be	on cash basis )				
Pa	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	0.3.51.		(-) (-)	(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per		t investment ncome	(c) Adjusted net income	for charitable purposes
		the amounts in column (a) (see instructions) )	books				(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	20,92	23 💨 .	7 N. P.	March Charles	
Ì	2	Check ► ☐ if the foundation is <b>not</b> required to attach Sch. B	, , , , , ,	* 30 ·	, , , , , , , , , , , , , , , , , , , ,		-34
	3	Interest on savings and temporary cash investments		0		<del></del>	A -384 E.S.
l	4	Dividends and interest from securities		0		<del></del>	(34)
	5а	Gross rents		0			1 113 8
	b	Net rental income or (loss)			<u>`</u>		
•		Net gain or (loss) from sale of assets not on line 10	1 W h. 2 2/23s.		1 1/4/2		
Revenue	6a		,35 <sup>2</sup>	-, .	1 system	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
ē	_b	Gross sales price for all assets on line 6a				4 4 4 3	
ě	7	Capital gain net income (from Part IV, line 2) .				13. 3. 15.	\$790ml
ш.	8	Net short-term capital gain	3 , 2, 4,	-4			
	9	Income modifications					
	10a	Gross sales less returns and allowances			<u> </u>		· . *>*******
	b	Less Cost of goods sold	k' 14 "i		<u> </u>		
	C	Gross profit or (loss) (attach schedule)		0 ,	<u> </u>		
	11	Other income (attach schedule)		0		†	
	12	Total. Add lines 1 through 11	20,92	23		)	) 43 * 32
S	13	Compensation of officers, directors, trustees, etc		0	(	)(	0
Expenses	14	Other employee salaries and wages		0		) (	0
e	15	Pension plans, employee benefits		0	1 Ri	CENTER	0
<u>∞</u>	16a	Legal fees (attach schedule)		0	1	CLIVED	0
	b	Accounting fees (attach schedule)		0	1601		
ive	С	Other professional fees (attach schedule)		0	16 JU		0
Operatíng and Administrati	17	Interest		0		1	
sti	18	Taxes (attach schedule) (see instructions)		0	00	DEAL	∯ <b>⊆</b> 0
<u>=</u>	19	Depreciation (attach schedule) and depletion		0			A STATE OF THE
튜	20	Occupancy		0			0
Ă	21	Travel, conferences, and meetings		0			0 0
pu	22	Printing and publications	<u> </u>	0		<del></del>	0 0
ā	23	Other expenses (attach schedule)	21,4		<del></del>	<del> </del>	0 0
ij	24	Total operating and administrative expenses.	21,4			<del></del>	<del> </del>
at		Add lines 13 through 23					
ē	٥٢		21,4		- Z	\$ . · · · · ·	<del> </del>
Ö	25	Contributions, gifts, grants paid	<u> </u>				
	26	Total expenses and disbursements. Add lines 24 and 25	21,4	11		)	0 0
	27	Subtract line 26 from line 12:			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1	
	а	Excess of revenue over expenses and disbursements	-4	88 🗸 🐣	<u>, "", , , , , , , , , , , , , , , , , ,</u>	1	', ', '
	b	Net investment income (if negative, enter -0-) .				)	
		Adjusted net income (if negative, enter -0-)	<u> </u>	* - 1/4			o
For	Paper	work Reduction Act Notice, see instructions.	Cat	No 11289	X	F	orm 990-PF (2017)

Cat No 11289X

		Attached schedules and amounts in the description column	Beginning of year	End of	year
Ľá	ırt II	Balance Sheets should be for end-of-year amounts only. (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
$\neg$	1	Cash—non-interest-bearing	12,333	11,846	11,846
	2	Savings and temporary cash investments	0	0	0
	3	Accounts receivable ▶			
ĺ		Less allowance for doubtful accounts ▶	o	0	0
	4	Pledges receivable ▶			
ļ		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
ts	8	Inventories for sale or use	0	0	0
Assets	9	Prepaid expenses and deferred charges	0	0	0
Ąŝ	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	0
	11	Investments—land, buildings, and equipment basis ▶	×		<u> </u>
		Less accumulated depreciation (attach schedule) ▶	0	0	0
	12	Investments-mortgage loans	0	0	0
	13	Investments—other (attach schedule)	0	0	0
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶	0	0	0
	15	Other assets (describe ►)	0	0	0
	16	Total assets (to be completed by all filers—see the			
		ınstructions. Also, see page 1, item l)	12,333	11,846	11,846
	17	Accounts payable and accrued expenses	0	0	
Ś	18	Grants payable	0	0	
itie	19	Deferred revenue	0	0	
Ē	20	Loans from officers, directors, trustees, and other disqualified persons	0	0	
Liabilities	21	Mortgages and other notes payable (attach schedule)	0	0	
_	22	Other liabilities (describe ► ) <b>Total liabilities</b> (add lines 17 through 22)	0		
	23	Total liabilities (add lines 17 through 22)	0		
Ś		Foundations that follow SFAS 117, check here >			
ŠČ		and complete lines 24 through 26, and lines 30 and 31.			
Balances	24	Unrestricted			
Ba	25	Temporarily restricted			
ğ	26	Permanently restricted			
ä		Foundations that do not follow SFAS 117, check here ▶ □ and complete lines 27 through 31.		-	
Net Assets or Fur	27		_	_	
S	27 28	Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg., and equipment fund	0		A. T. S.
set	28	Retained earnings, accumulated income, endowment, or other funds	0	0	
As	30	Total net assets or fund balances (see instructions)	12 222	14 S4C	
et'	31	Total liabilities and net assets/fund balances (see	12,333	11,846	
Ž	.	instructions)	12 222	11 040	
P۰	rt III	Analysis of Changes in Net Assets or Fund Balances	12,333	11,846	<u> </u>
		al net assets or fund balances at beginning of year -Part II, colu	mn (a), line 30 (must a	agree with	
		-of-year figure reported on prior year's return)			12,333
2		er amount from Part I, line 27a			-488
3		er increases not included in line 2 (itemize) ►			0
4	Add	Ilines 1, 2, and 3		4	<u></u>
_					
e	Tota	reases 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), line	30 . 6	11,846

		d(s) of property sold (for example, real est se, or common stock, 200 shs MLC Co)	ate,	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo , day, yr )
а	none/ not applicable					
<u>b</u>						
<u>с</u>				<del></del>		<del></del>
<u>d</u>						
e		(f) Depreciation allowed	(a) Co	st or other basis	(b) Gau	n or (loss)
	(e) Gross sales price	(or allowable)		expense of sale		f) minus (g))
a						
b						
С						_
d						
<u>e</u>	Complete only for accets sho	wing gain in column (h) and owned b	v the founds	tion on 12/31/60	ļ	
	Complete only for assets sno			xcess of col (i)		(h) gain minus t less than -0-) <b>or</b>
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		r col (j), if any		rom col (h))
a				<del></del>		
b b						
<del>-</del> -						
d						
е						
	Capital gain net income or	'Inet capital local / '		Part I, line 7 }	2	
	Net short-term capital day	n or (loss) as defined in sections			2	
1	If gain, also enter in Part	I, line 8, column (c). See instruc	tions. If (lo	oss), enter -0- in l		
	Part I, line 8				1 _ 1	
					131	
0	V Qualification Und	er Section 4940(e) for Reductions subject to the s	ced Tax o	n Net Investmen		
o ect	Qualification Und ptional use by domestic pri tion 4940(d)(2) applies, leave the foundation liable for the	er Section 4940(e) for Reductions subject to the s	ced Tax o ection 4940 able amour	n Net Investmen  O(a) tax on net inves  nt of any year in the	t Income tment income.)	☐ Yes ☐
ro ect st Ye:	Qualification Und ptional use by domestic prison 4940(d)(2) applies, leave the foundation liable for the s," the foundation doesn't of	er Section 4940(e) for Reductivate foundations subject to the sethis part blank.  section 4942 tax on the distribut	ced Tax o ection 4940 able amour not comple	n Net Investmen  D(a) tax on net inves  nt of any year in the ste this part.	t Income tment income.) base period?	☐ Yes ☐
oect st	Qualification Und ptional use by domestic priction 4940(d)(2) applies, leave the foundation liable for the s," the foundation doesn't of Enter the appropriate among the Base period years	er Section 4940(e) for Reductivate foundations subject to the set this part blank.  section 4942 tax on the distributivality under section 4940(e). Do bunt in each column for each year (b)	able amour not comple r; see the ir	n Net Investmen  D(a) tax on net inves  nt of any year in the ste this part.	t Income tment income.) base period? naking any entries.	(d) tribution ratio
o ect s t	Qualification Und ptional use by domestic pri- tion 4940(d)(2) applies, leave the foundation liable for the s," the foundation doesn't of Enter the appropriate amo	er Section 4940(e) for Reductivate foundations subject to the set this part blank.  section 4942 tax on the distributionality under section 4940(e). Do bunt in each column for each year (b)  Adjusted qualifying distributions	able amour not comple r; see the ir	n Net Investmen  D(a) tax on net inves  Int of any year in the lete this part.  Instructions before m	t Income tment income.) base period? naking any entries.	(d)
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cald	Qualification Und ptional use by domestic prison 4940(d)(2) applies, leave the foundation liable for the s," the foundation doesn't of Enter the appropriate amount of the sendar year (or tax year beginning in 2016 2015 2014 2013 2012  Total of line 1, column (d) Average distribution ratio the number of years the for Enter the net value of non Multiply line 4 by line 3	er Section 4940(e) for Reductivate foundations subject to the section 4942 tax on the distributional function 4940(e). Do punt in each column for each year (b)  Adjusted qualifying distributions all of part V not appliance of the 5-year base period—dividual formulation has been in existence charitable-use assets for 2017 from the column for each year base period—dividual for the 5-year b	able amour not comple r; see the ir Net valuable and the total of less than om Part X,	n Net Investmen  D(a) tax on net inves  Int of any year in the ste this part.  Instructions before m  (c)  Ilue of noncharitable-use a  Il on line 2 by 5.0, co  5 years  Iline 5	t Income trment income.) base period? making any entries. assets (col (b)  2 or by 3 . 4 . 5	(d) tribution ratio
cale	Qualification Und ptional use by domestic prison 4940(d)(2) applies, leave the foundation liable for the s," the foundation doesn't of Enter the appropriate among the period years endar year (or tax year beginning in) 2016 2015 2014 2013 2012  Total of line 1, column (d) Average distribution ratio the number of years the form the first the net value of non Multiply line 4 by line 3 Enter 1% of net investment	er Section 4940(e) for Reductivate foundations subject to the section 4942 tax on the distributional function 4940(e). Do punt in each column for each year (b)  Adjusted qualifying distributions all of part V not appliance of the 5-year base period—dividual formulation has been in existence charitable-use assets for 2017 from the column for each year base period—dividual for the 5-year b	able amour not comple r; see the ir Net valuable and the total of less than om Part X,	n Net Investmen  D(a) tax on net inves  Int of any year in the ste this part.  Instructions before m  (c)  Ilue of noncharitable-use a  Il on line 2 by 5.0, co  5 years  Iline 5	t Income trment income.) base period? making any entries. col (b)  2 or by 3 . 4 . 5 . 6	(d) tribution ratio

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	-see i	nstru	ction	าร)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and enter "N/A" on line 1.				i i
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)				
ь	(1)	1		_n/a	
С	here \( \bigcup \) and enter 1% of Part I, line 27b				
2		2			
3	· · · · · · · · · · · · · · · · · · ·	3		- 0	
4		4			
5	taran da antara da a	5		0	
6	Credits/Payments				
а	2017 estimated tax payments and 2016 overpayment credited to 2017   6a				
b	Exempt foreign organizations—tax withheld at source 6b				
С	Tax paid with application for extension of time to file (Form 8868) . 6c 6c				
d	Backup withholding erroneously withheld 6d		;		
7		7		0	
8	· · · · · · · · · · · · · · · · · · ·	В		0	
9		9		0	
10 11		0		0	
	Enter the amount of line 10 to be Credited to 2018 estimated tax   Refunded   1  VII-A Statements Regarding Activities	1		0	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or	r did it	م ر عر	Yes	No
	participate or intervene in any political campaign?		1a	163	110
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? Sinstructions for the definition	ee the	1b		<del></del>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mapublished or distributed by the foundation in connection with the activities.	aterials	¥	·	-
С	Did the foundation file Form 1120-POL for this year?		1c		
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year  (1) On the foundation. ▶ \$  (2) On foundation managers. ▶ \$		10		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imp on foundation managers. > \$	osed	, , ,		
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	Alexan with:	<b>✓</b>
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	cles of	3	Landing me	<b>✓</b>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		<b>√</b>
b	If "Yes," has it filed a tax return on Form 990-T for this year?		4b		<b>√</b>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		✓
_	If "Yes," attach the statement required by General Instruction T.			, 251	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				' - 1
	By state logislation that offectively amonds the governing unstrument as that as mandature directively.	414		. Ž	163
	• By state legislation that effectively amends the governing instrument so that no mandatory direction conflict with the state law remain in the governing instrument?	ns tnat			
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 F		7	/	
, 8a	Enter the states to which the foundation reports or with which it is registered. See instructions.	-an XV	<u></u>	<b>✓</b>	· * t
<b>J</b> u	Florida and North Carolina		10/4 20/4	33 ·	, cramera
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney G	Seperal	1 2	1.5	
~	(or designate) of each state as required by General Instruction G? If "No," attach explanation	·	8b	· · · ·	ئـــــــــــــــــــــــــــــــــــــ
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942			-	* [
J	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If complete Part XIV		9		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listin	a their			<del></del>
	names and addresses		10		1
			,		

Part	VII-A	Statements Regarding Activities (continued)			
	<b>-</b> -			Yes	No
11	meaning	time during the year, did the foundation, directly or indirectly, own a controlled entity within the g of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		<b>✓</b>
12		foundation make a distribution to a donor advised fund over which the foundation or a disqualified had advisory privileges? If "Yes," attach statement. See instructions	12		<b>✓</b>
13	Did the	foundation comply with the public inspection requirements for its annual returns and exemption application?	13	<b>\</b>	
	Website	e address ▶ none / n/a	- 		
14	The boo	oks are in care of ▶ James L. Nipper Telephone no. ▶ 904	354-	7378	
		d at ► 1818 The Woods Drive, Jacksonville, FI ZIP+4 ►	3224	6	
15		4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> — check here		•	▶ □
16		ter the amount of tax-exempt interest received or accrued during the year		Yes	No
10		pank, securities, or other financial account in a foreign country?	16	103	
		e instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of		1	Ť
	the fore	eign country ►			
Part	VII-B	Statements Regarding Activities for Which Form 4720 May Be Required			
-	File Fo	rm 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	_	the year, did the foundation (either directly or indirectly)		•	į.
		age in the sale or exchange, or leasing of property with a disqualified person? Yes		(1)	,
		row money from, lend money to, or otherwise extend credit to (or accept it from) a qualified person?	,	٠, '. د '	د
		qualified person?	<b>3</b> .	8.	
		compensation to, or pay or reimburse the expenses of, a disqualified person?   Yes   No	* *		- -,
		nsfer any income or assets to a disqualified person (or make any of either available for	ž.	- 28.	". "J.
		benefit or use of a disqualified person)?	۶.	ļ., '	
	(6) Agr	ee to pay money or property to a government official? (Exception. Check "No" if the	,	100	\$. '
		ndation agreed to make a grant to or to employ the official for a period after	,	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	<b>1</b>
		mination of government service, if terminating within 90 days)	30.00		\$ 19
b		nswer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	<u> </u>	
	-	zations relying on a current notice regarding disaster assistance, check here ▶ □	ı	100 PM	(
С	were no	e foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that of corrected before the first day of the tax year beginning in 2017?	1c	نسندنا	1
2	operati	on failure to distribute income (section 4942) (does not apply for years the foundation was a private ng foundation defined in section 4942(j)(3) or 4942(j)(5)).	١.		
а		end of tax year 2017, did the foundation have any undistributed income (lines 6d and			
		t XIII) for tax year(s) beginning before 2017?	3.2		
L		" list the years ► 20 , 20 , 20 , 20 , 20 ere any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)		3/1/	
D		g to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		, °, °,	3
		rs listed, answer "No" and attach statement—see instructions)	2b		1
С	If the p	rovisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	**,	প্র	
	▶ 20	, 20 , 20 , 20	1	, , ,	
3a		foundation hold more than a 2% direct or indirect interest in any business enterprise	, , ,		* ×
	at any t	time during the year?	13.7	'	9
b		," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or	14.	. ,	t.
		lified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the	k: ,	1.	
		issioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of -, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	Ľ	1: 55	10
		tion had excess business holdings in 2017.)	3b	\ <u>-~</u>	<u> </u>
4a		foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	†	1
b	Did the	foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charital	ble purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		1

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Part	VII-B Statements Regarding Activities	s for W	hich Form	4720 I	May Be R	equire	<b>d</b> (contin	ued)			
5a	During the year, did the foundation pay or incur  (1) Carry on propaganda, or otherwise attempt (2) Influence the outcome of any specific public directly or indirectly, any voter registration directly.	to influe c electio	nce legislatio	on 495	5), or to ca	arry on,	☐ Yes	☑ No ☑ No		Yes	No
	<ul><li>(3) Provide a grant to an individual for travel, stu</li><li>(4) Provide a grant to an organization other that section 4945(d)(4)(A)? See instructions</li></ul>	n a char	ritable, etc.,	organiza	ation desci	ribed in	☐ Yes	☑ No			
	(5) Provide for any purpose other than religious purposes, or for the prevention of cruelty to				-		□Yes	☑ No			
b	If any answer is "Yes" to 5a(1)–(5), did any of th Regulations section 53.4945 or in a current notice								5b		
С	Organizations relying on a current notice regard If the answer is "Yes" to question 5a(4), does because it maintained expenditure responsibility	the four	idation claim	n exemp	otion from	the tax		<ul><li>▶ □</li><li>No</li></ul>			
6a	If "Yes," attach the statement required by Regul Did the foundation, during the year, receive any on a personal benefit contract?					emiums	_	☑ No	''		
b	Did the foundation, during the year, pay premium of "Yes" to 6b, file Form 8870.	ms, dıre	ctly or indire	ctly, on	a personal	benefit	contract	7	6b		<b>✓</b>
	At any time during the tax year, was the foundation If "Yes," did the foundation receive any proceed		•				Yes	_	7b		a
	Information About Officers, Direct and Contractors									ees,	
1	List all officers, directors, trustees, and found	dation n	nanagers ar	nd their	compens	ation. S	See instru	ctions	·•		
	(a) Name and address	(b) Title	e, and average rs per week ed to position	(c) Cor (If n	npensation ot paid, ter -0-)	(d) ( emplo	Contributions byee benefit erred compe	s to plans	(e) Expe	ense ac allowar	
James	s L. Nipper										
1818 7	The Woods Drive Jacksonville, FL 32246	Preside	ent/ 15	ļ	0			0			0
	I L. Nipper										
1818 7	The Woods Drive Jacksonville, FL 32246	Vice Pr	esident/ 5		0			0			0
	s M Nipper										
	orth Mitchell Ave. Bakersville, NC 28705	Sec/ Tr	ea / .25		0			0			0
								0			
2	Compensation of five highest-paid employe "NONE."	es (oth	er than tho	se incl	uded on li	ine 1—	see ınstr	uction	s). If n	one,	enter
	(a) Name and address of each employee paid more than \$50,0	000	(b) Title, and hours per devoted to p	week	(c) Compe	nsation	(d) Contribution (d) Co	benefit deferred	(e) Expe	ense ac allowa	
none											
			1		L				1		

Total number of other employees paid over \$50,000 . . . . . .

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Par	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Em	ployees,
	and Contractors (continued)  Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE	. "
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
		,
none		
<b>-</b>		
Total	I number of others receiving over \$50,000 for professional services	0
Par	t IX-A Summary of Direct Charitable Activities	<u></u>
	st the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ganizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	The Jason Project, Inc. has served at-risk students from Avery, Caldwell, Catawba, North Lincoln, and Gaston, NC	
	middle schools and high schools by hosting "The Grandfather Challenge" series of hikes that take place on	
٥	Grandfather Mountain in Linville, NC. We have hosted 45 individual hikes, with a total of 65 hike participants, at	
2	a total cost of \$21,411 as shown in the full accounting attached	
3		
4		
7		
		21,41
Par	t IX-B Summary of Program-Related Investments (see instructions)	
De	escribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	not applicable / please see statement above	
2		
-		

All other program-related investments. See instructions

Total. Add lines 1 through 3 . . . .

Part	X Minimum Investment Return (All domestic foundations must complete this part. Forei	gn founda	ations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	1 1	
	purposes		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	12,402
С	Fair market value of all other assets (see instructions)	1c	0
d	<b>Total</b> (add lines 1a, b, and c)	1d	12,402
е	Reduction claimed for blockage or other factors reported on lines 1a and	1	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 asset,	2	0
3	Subtract line 2 from line 1d	3	12,402
4	Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	186
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	_12,216
6	Minimum investment return. Enter 5% of line 5	6	611
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.)	oundation	ıs
1	Minimum investment return from Part X, line 6	1	611
2a	Tax on investment income for 2017 from Part VI, line 5 2a	*	
b	Income tax for 2017. (This does not include the tax from Part VI.) 2b 0	- I	
C	Add lines 2a and 2b	2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	611
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	611
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	611
Dart	XII Qualifying Distributions (see instructions)		<u> </u>
T GIL	Au Qualifying Distributions (See instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.	16 · 1	
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	21,411
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the	1	
а	Suitability test (prior IRS approval required)	3a	0
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	21,411
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b. See instructions	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	21,411
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whether	the foundation

Part	XIII Undistributed Income (see instruction	ons)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2017 from Part XI,	Corpus	Years prior to 2016	2016	2017
_	line 7				0
2	Undistributed income, if any, as of the end of 2017				ı
a	Enter amount for 2016 only		_	0	
ь	Total for prior years 20,20,20		0		
3	Excess distributions carryover, if any, to 2017 From 2012				
a b	From 2012				
C	From 2014				
ď	From 2015				
e	From 2016				
f	Total of lines 3a through e	·			li i
4	Qualifying distributions for 2017 from Part XII,	1			
	line 4. ▶ \$	1			٢
а	Applied to 2016, but not more than line 2a .	i '		0	l l
b	Applied to undistributed income of prior years	·, t			
	(Election required—see instructions)		0		
С	Treated as distributions out of corpus (Election				A
	required—see instructions)	0	1		
d	Applied to 2017 distributable amount .			······································	0
e	Remaining amount distributed out of corpus	0	· · · · · · · · · · · · · · · · · · ·		;
5	Excess distributions carryover applied to 2017	0	- 13		0
	(If an amount appears in column (d), the same amount must be shown in column (a).)	C. S. Marine A. A.	, '	4 30 1	
6	Enter the net total of each column as			1.	j
·	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e Subtract line 5	0			
b	Prior years' undistributed income. Subtract	, 1		. 14.14	
	line 4b from line 2b		0	·	
С	Enter the amount of prior years' undistributed	,		3434	\$ 18 m - 50 m 1 1
	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	٠			~.;
_	Undistributed income for 2016. Subtract line	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	· · · · · · · · · · · · · · · · · · ·	,,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,	
е	4a from line 2a. Taxable amount—see				
	instructions	(A. 1)		0	
f	Undistributed income for 2017. Subtract lines				**************************************
	4d and 5 from line 1. This amount must be		٠ ,		
	distributed in 2018	P .			О
7 -	Amounts treated as distributions out of corpus				~
	to satisfy requirements imposed by section	-	,		0
	170(b)(1)(F) or 4942(g)(3) (Election may be		,		a -
_	required—see instructions)	0			
8	Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions).	_	ر ب		,
9	Excess distributions carryover to 2018.	0	٤		
J	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9	0			
а	Excess from 2013				•
a b	Excess from 2014	<u> </u>		υ	
c	Excess from 2015	<del> </del> 	,		
ď	Excess from 2016	ol l			
_	Excess from 2017	1			

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Part	XIV Private Operating Foundation	tions (see ınstru	ctions and Par	t VII-A, question 9	)	
1a	If the foundation has received a ruling					
	foundation, and the ruling is effective for		-			
b	Check box to indicate whether the four	<del></del>	operating found		ection	)(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years	<del></del>	(e)/Total
	investment return from Part X for	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
_	each year listed	<del></del>				
	85% of line 2a .	Part XIV n/a				
С	Qualifying distributions from Part XII, line 4 for each year listed .			Ì	f.	
А	Amounts included in line 2c not used directly			<del></del>		
đ	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		K	A .		1
	alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under	/	*		·····	
	section 4942(j)(3)(B)(i)					
þ	"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 .					
Dod	(4) Gross investment income			1	1.05.000	<u> </u>
Part				the foundation h	ad \$5,000 or r	nore in assets at
	any time during the year—		15.)			
1 a	Information Regarding Foundation I List any managers of the foundation v		itad mara than 3	004 of the total cont	ributiono roccuio	d bu the foundation
a	before the close of any tax year (but o	inly if they have co	ntributed more	than \$5 000) (See s	ection 507(d)(2)	o by the foundation
lamas		any a may mave oc		40,000). (000 0	0011011 007 (0)(2).	
b	L. Nipper / \$6,000  List any managers of the foundation	who own 10% or	more of the sto	nck of a corporation	n (or an equally	large portion of the
_	ownership of a partnership or other er					large portion of the
none		3,				
2	Information Regarding Contribution	. Grant. Gift. Loa	n. Scholarship.	etc Programs:		
	Check here ▶ ☑ If the foundation				organizations an	d does not accent
	unsolicited requests for funds. If the fo					
	complete items 2a, b, c, and d. See in		, ,		<b>Q</b>	
а	The name, address, and telephone nu	mber or email add	dress of the pers	on to whom applica	itions should be	addressed:
	·		•	,,		
This s	ection n/a					
b	The form in which applications should	be submitted and	d information and	d materials they sho	uld include.	
C	Any submission deadlines					
		<del></del>				
d	Any restrictions or limitations on aw	ards, such as by	y geographical	areas, charitable fi	elds, kinds of ir	istitutions, or other
	factors					

3 Grants and Contributions Paid During	ule fear or Approv	ea for Futt	ure Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
This section not applicable				
Total			<b>▶</b> 3	Ba
<b>b</b> Approved for future payment				
This section not applicable				
Total	· · · · · · · · · · · · · · · · · · ·	·		+

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nter gross amounts unless otherwise indicated.	Unrelated bus	iness income	Excluded by secti	on 512, 513, or 514	{ (e)
	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	Related or exempt function income (See instructions)
1 Program service revenue			<del> </del>		
a no income producing activities b	<del> </del>			<del></del> _	<del></del>
c	<del> +</del>		<del> </del>		<del></del>
d	<del> </del>		· <del> </del>		<del> </del>
	<del></del>		ļ — — — — — — — — — — — — — — — — — — —		
·	<del></del>		<del> </del>		
g Fees and contracts from government agencies	<del></del>				
<ul><li>g Fees and contracts from government agencies</li><li>2 Membership dues and assessments</li></ul>	<del></del>				
3 Interest on savings and temporary cash investments					<del>                                     </del>
4 Dividends and interest from securities	<del></del>		<del> </del>		<del> </del>
5 Net rental income or (loss) from real estate	<del></del>		1		
a Debt-financed property			1	·	·
<b>b</b> Not debt-financed property			<del> </del>		
6 Net rental income or (loss) from personal property	<del></del>		<del> </del>		<del> </del>
7 Other investment income			<del>                                     </del>		<del></del>
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events			<del>-</del>		
O Gross profit or (loss) from sales of inventory			<del> </del>		
1 Other revenue a					<del> </del>
b	1		1		
С					
d			1		
e					
Subtotal Add columns (b), (d), and (e)	11 24 1 1 1 March		. ***		
13 Total. Add line 12, columns (b), (d), and (e)				13	(
ee worksheet in line 13 instructions to verify calculation	ns.)			13	(
Part XVI-B Relationship of Activities to the	ns.) <b>Accomplishm</b> e	ent of Exemp	t Purposes		
ee worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activities to the	ns.) <b>Accomplishm</b> e	ent of Exemp	t Purposes		
ee worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activities to the	ns.) <b>Accomplishm</b> e	ent of Exemp	t Purposes		
ee worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activities to the	ns.) <b>Accomplishm</b> e	ent of Exemp	t Purposes		
ee worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activities to the	ns.) <b>Accomplishm</b> e	ent of Exemp	t Purposes		
Part XVI-B Relationship of Activities to the	ns.) <b>Accomplishm</b> e	ent of Exemp	t Purposes		
ee worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activities to the	ns.) <b>Accomplishm</b> e	ent of Exemp	t Purposes		
ee worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activities to the	ns.) <b>Accomplishm</b> e	ent of Exemp	t Purposes		
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		Organizati	ons											
1	ın se	•	directly or indirectly other than section		•		•	•					Yes	No
а	Trans	fers from the re	porting foundation	to a nonch	arıtable exer	npt orga	nization o	f				İ		,
		ash										1a(1)		<b>✓</b>
		ther assets .										1a(2)		1
b	٠.	r transactions				•		• • • •	•	•	• •	1.5(-,	-	<u> </u>
			a noncharitable ex	ompt orga	ruzation							1b(1)		<b>-</b>
									• •	• •				
			ets from a nonchari		_	lon .					• •	1b(2)		
			, equipment, or oth				•	• •	•	• •		1b(3)		<b>*</b>
			rrangements			•	•					1b(4)	_	<b>✓</b>
		oans or loan gua										1b(5)		
	(6) P	erformance of se	ervices or members	ship or fun	draising solic	itations						1b(6)		✓
С		_	equipment, mailing				-			•		1c		✓_
d			of the above is "Y											
			other assets, or sen											
	value	ın any transactı	on or sharing arran	gement, s	how in colum	ın <b>(d)</b> th	e value of	the goods,	other	asset	ts, or s	ervices	rece	ved.
(a) Lin	e no	(b) Amount involved	(c) Name of non	charitable ex	empt organizatio	n	(d) Descrip	tion of transfe	rs, trans	saction	s, and sh	arıng arr	angem	ents
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2a b	desc	ribed in section	ectly or indirectly a 501(c) (other than s e following schedul	section 50°				tax-exem	pt org	janiza 	tions	Ye	s 🗌	No
		(a) Name of organ	nization		(b) Type of orga	anization			(c) Des	cription	of relati	onship		
							1							
							-							
	Unde	er penalties of perjury,	I declare that I have exami	ned this return	n, including accom	npanying so	hedules and s	tatements, and	to the l	best of r	ny knowle	edge and	belief, i	t is true,
Sign			laration of preparer (other							ſ	<del></del>	IRS disc		_
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. 1 <del>.</del>		nature of officer or tru	Istee		Date	7 Pres	idenio sign	eu 3/28/18				uctions		
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Prep	arer							L	ـــــا	self-er	nployed			
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Z		Firm's address ▶							Phone	no				
												- 00	N DE	1004=

## Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

## **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2017

Employer identification number

The Jason Project, Inc.	47-1943889							
Organization type (check one)								
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 organiza	tion is covered by the General Rule or a Special Rule.							
	01(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See							
General Rule								
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								
For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% 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, c	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.							
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year								
Caution: An organizat	ion that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, ut it <b>must</b> 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							

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

Employer identification number

The Jason Project, Inc. 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				
	Mrs. Delores Barr Weaver 2525 College St., Suite 1122  Jacksonville, FL 32204	\$ 9,000	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. Robert Schupp  9745 Touchton Road, Unit 2803  Jacksonville, FL	\$ 2,500	Person				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
3	Mr. Jerry J. & Rosalind S. Richardson 7544 Morrocroft Farms Lane Charlotte, NC 28211-5013	\$	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. Steven P. Frizzell  11363 San Jose Blvd. Suite 301  Jacksonville, Florida 32223	\$\$	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	Mr. Talmadge Stuckey P.O. Box 13526  Macon, Georgia 31208-3526	\$ 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				
6	Kingdom Foundation c/o Paul Robbins  1117 Shipwatch Drive East  Jacksonville, Florida 32225	\$ 4,500	Person  Payroll  Noncash  (Complete Part II for noncash contributions.)				

Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Name of organization Employer identification number SCHEDULE B / PAGE 2 OF LIST OF CONTRIBUTORS The Jason Project, Inc. 47-1943889 Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (c) (d) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person ...7  $\overline{\mathcal{L}}$ Mr. Frank Edward Nipper Payroll Noncash 1,000 1107 Rigdon Road (Complete Part II for noncash contributions.) Jacksonville, Florida 32220-1123 (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** No. Type of contribution 8 Person  $\overline{\mathbf{V}}$ Dr. Richard Newman Payroll Noncash 500 6711 Santona Street (Complete Part II for noncash contributions) (b) (c) (d) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person  $\Box$ Payroll Noncash (Complete Part II for noncash contributions.) (c) (d) (a) (b) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person Payroll Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 Total contributions No. Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (d) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person

Payroll

Noncash (Complete Part II for noncash contributions.)

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Name of c	rganization		Employer identification number
This Jasoi	n Project, Inc.	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 NON-CASH 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
		\$	

Name of c	organization	<del></del>			Employer identification number				
	n Project, Inc.				47-1943889				
Part III	(10) that total more than \$1,000 for the following line entry. For organizate contributions of \$1,000 or less for the	r the year from any tions completing Pa ne year. (Enter this in	one contriburt III, enter the offermation one	<b>tor.</b> Complete total of <i>exclusi</i>	columns (a) through (e) and vely religious, charitable, etc.,				
7-VN- 1	Use duplicate copies of Part III if add	ditional space is nee	ded.						
(a) No. from Part I	(b) Purpose of gift	(c) Use	(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, a	nd ZIP + 4	Rei	lationship of tra	ionship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	of gift	of gift (d) Description of how gift is held						
	(e) Transfer of gift								
	Transferee's name, address, a	Relationship of transferor to transferee							
(a) No. from Part I	(b) Purpose of gift (c)		c) Use of gift (d) De		scription of how gift is held				
	(e) Transfer of gift								
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee						
(a) No.	(b) Purpose of gift	(c) Use	(c) Use of gift		scription of how gift is held				
Part I	(a) / a / pood o / g			(0) 20	sorption of now gire to note				
			·						
	(e) Transfer of gift								
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee								
				·····					