EXTENDED TO NOVEMBER 15, 2018 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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service Go to www.irs gov/Form990PF for instructions and the latest information.						
For	calendar year 2017	or tax year beginning SEP	6, 2017	, and ending	DEC 31, 2017	
Nar	me of foundation			-	A Employer identification	number
P	.D. JACKS	ON FAMILY FOUNDA	TION		82-2797338	
Nun	mber and street (or P O	box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
P	O BOX 634					
	y or town, state or pr	ovince, country, and ZIP or foreign p	ostal code		C if exemption application is p	ending, check here
	Check all that apply:	X Initial return		ormer public charity	D 1. Foreign organizations	s, check here
		Final returnX Address change	Amended return Name change		Foreign organizations me check here and attach co	eeting the 85% test, propulation
H C	Check type of organiz	`	cempt private foundation Other taxable private founds	ation DU	E If private foundation sta under section 507(b)(1)	
I Es		l assets at end of year J Account	F If the foundation is in a			
	rom Part II, col. (c), I	· —	ng method: LX Cash ther (specify)	Accrual	under section 507(b)(1)	
•	•\$	2,721,420. (Part I, colur	nn (d) must be on cash basi	s.)		,(0), 000
	Analysis of F	Revenue and Expenses ounts in columns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net	(d) Disbursements for charitable purposes
	,	al the amounts in column (a))	2,750,780.		N/A	(cash basis only)
/		gifts, grants, etc., received	2,730,700.		M/A	
	1	if the foundation is not required to attach Sch. B. gs. and temporary			· · · · · · · · · · · · · · · · · · ·	
	cash investment	Š			 	;
	1 *	interest from securities		-		
	5a Gross rents					
5	Net rental income		0.			
200	∴ Gross sales nace	from sale of assets not on line 10 e for all 750,780.	·			
e i	assets on line 6a			0.	-	
2.7 2019 Revenue		income (from Part IV, line 2)		<u> </u>	`	
	8, Net short-term	• •				
rtB	9 Income modifi				-	<u> </u>
_	10a and allowances					
þ	D Less Cost of go					
ğ	c Gross profit of	r (loss)	3,750.	3,750.	-	STATEMENT 1
5	11 Other income		2,754,530.	3,750.		DIATEMENT I
_	·	es 1 through 11	2,734,330.	3,750.	-	0.
	I	of officers, directors, trustees, etc				
	14 Other employe	ee salaries and wages				
S	15 Pension plans	RECEIVED				
enses	16a Legal fees b Accounting le				-	
ğ	D Accounting te	onaNega 23 2018				
iii o	c Other profess	ional/1684/ 63 2018				
ŧ	18 Taxes			<u> </u>		
stra	18 Taxes	INDERN. UT				
. <u>Ē</u>	19 Depreciation a	постернеция				<u> </u>
퉏	20 Occupancy	ences, and meetings				
Þ	21 Travel, confere					
ā	22 Printing and p					
Ę	23 Other expense					
Operating and Administrative Exp	24 Total operation	ng and administrative	0.	0.		0.
ŏ	expenses Ad	d lines 13 through 23	0.	<u> </u>		0.
_	25 Contributions,	, gifts, grants paid	·			1
	1	es and disbursements	0.	0.		0.
	Add lines 24 a		1	- 0.	·	
		26 from line 12.	2,754,530.	·		
	ł	ue over expenses and disbursements	4,134,330.	3,750.		
	i	nt income (if negative, enter -0-)		3,730.	N/A	
	C Adjusted net	income (if negative, enter -0-)	L		N/A	<u> </u>

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions

Г	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
F	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments		2,000,000.	2,000,000.
	3	Accounts receivable			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
	i .	Less: allowance for doubtful accounts ▶	· · ·		
	5	Grants receivable	 		
	٦	Receivables due from officers, directors, trustees, and other			
	"	· · · · · · · · · · · · · · · · · · ·			
		disqualified persons			
	′	Other notes and loans receivable			
	١.	Less: allowance for doubtful accounts			
ets	1	Inventories for sale or use			
Assets	ı	Prepaid expenses and deferred charges			
•	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock STMT 2	0.	754,530.	721,420.
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
	l	Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation			
	15	Other assets (describe ►	·-·		
		Total assets (to be completed by all filers - see the			
	1	Instructions. Also, see page 1, item I)	0.	2,754,530.	2,721,420.
_	_	Accounts payable and accrued expenses			
	J	Grants payable			
ø	ŀ	Deferred revenue	· · · · · ·		
abilities	l	Loans from officers, directors, trustees, and other disqualified persons			
ξ		Mortgages and other notes payable			
ڌ	1	Other liabilities (describe)			
	23	- Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26, and lines 30 and 31.			
Ses	24	Unrestricted			
Balances	25	Temporarily restricted			
	ı	Permanently restricted			
n		Foundations that do not follow SFAS 117, check here		-	
Ţ	l	and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds	0.	0.	
šet	l	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
As	29	Retained earnings, accumulated income, endowment, or other funds	0.	2,754,530.	
Net Assets or Fund	30	Total net assets or fund balances	0.	2,754,530.	
_					ļ
_	31	Total liabilities and net assets/fund balances	0.	2,754,530.	
Ta	art	Analysis of Changes in Net Assets or Fund B	alances		
=					
1		net assets or fund balances at beginning of year - Part II, column (a), line	30		•
	•	t agree with end-of-year figure reported on prior year's return)		11	0.
		amount from Part I, line 27a		2	2,754,530.
		increases not included in line 2 (itemize)		3	0.
		ines 1, 2, and 3		4	2,754,530.
		eases not included in line 2 (itemize)		5	0.
<u>6</u> _	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	[6]	2,754,530.
					Form 990-PF (2017)

	JACKSON FAMILY					8	2-279	7338	Page 3
	and Losses for Tax on I			1761	low acquired	1 () 0.4			
2-story brick war	he kind(s) of property sold (for exa rehouse; or common stock, 200 sh		ate, 	ν _β ,	low acquired - Purchase - Donation	` (mo., c	acquired lay, yr.)	(d) Dat (mo., da	ау, уг.)
1a GPT PROPERTY TE	RUST, LP			_	D	12/1	5/17	12/1	5/17
<u>b</u>	. 					ļ			
<u>C</u>			-			 			
<u>d</u>			.,	\vdash		 			
(e) Gross sales price	(f) Depreciation allowed		st or other basis		=		ain or (loss)		
750 700	(or allowable)	pius	expense of sale		 	((e) piu	s (f) minus ((9))	
a 750,780.			750,78	٠.	 .				0.
b c	·	_		\dashv					
d	· · · · · · · · · · · · · · · · · · ·	 							
e		 							
Complete only for assets showing	g gain in column (h) and owned by	the foundation	n on 12/31/69.	\dashv			Col. (h) gain		
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		xcess of col. (i) r col. (j), if any			col. (k), but Losses	not less that (from col. (
a									0.
b									
С									
d	 	ļ							
e		ــــــــــــــــــــــــــــــــــــــ		_					
2 Capital gain net income or (net cap	oital loss) $ \begin{cases} \text{ If gain, also enter -0} \\ \text{ If (loss), enter -0} \end{cases} $	er in Part I, line 0- in Part I, line	7 27	}	2_				0.
3 Net short-term capital gain or (loss		nd (6):		٦					
If gain, also enter in Part I, line 8, o	column (c).			- }]			N/A		
If (loss), enter -0- in Part I, line 8 Part V Qualification Ur	nder Section 4940(e) for	r Reduced	Tax on Net	Inv	estment l	ncome	N/A	-	
(For optional use by domestic private								N/A	
	•	(-)			,			·	
If section 4940(d)(2) applies, leave th	is part blank.								
Was the foundation liable for the secti			•	lods				Yes	No No
If "Yes," the foundation doesn't qualify									
1 Enter the appropriate amount in e		instructions be	fore making any e					(d)	
(a) Base period years Calendar year (or tax year beginnin	g in) Adjusted qualifying di	stributions	Net value of no	(c) nchar		ets		ution ratio ided by col.	(c))
2016		<u>.</u> .			 .				
2015									
2014			 			- 			
2013									
2012						- 	<u> </u>		
2 Total of line 1, column (d)						2	1		
3 Average distribution ratio for the 5	-year base period - divide the total	on line 2 by 5.	O, or by the numbe	er of y	/ears				
the foundation has been in existen	•		, ,	•	•	3			
4 Enter the net value of noncharitable	e-use assets for 2017 from Part X,	, line 5				4			
5 Multiply line 4 by line 3						5			
6 Enter 1% of net investment income	e (1% of Part I, line 27b)					6_		-	
7 Add lines 5 and 6						7			
B Enter qualifying distributions from	Part XII line 4					8			
	,	a 1h and	alata that nart	0 2 10	/ tou sata	L_ <u>0</u> _	L		
If line 8 is equal to or greater than See the Part VI instructions	ine 7, check the box in Part VI, line	e iu, ano comp	piete triat part usini	ya 17	o lax rate.				

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Part VI)48 - see	instructi	ons)
1a Exempt operating foundations described in section 4940(d)(2), check here	l l			1
Date of ruling or determination letter: (attach copy of letter	er if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check h	nere 🕨 🔛 and enter 1%	1		75.
of Part I, line 27b	1 1	- 1		
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, of	enter 4% of Part I, line 12, col. (b). 🔰 📗	_		
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations	only; others, enter -0-)	2		0.
3 Add lines 1 and 2		3		75.
4 Subtitle A (income) tax (democtic section 4947(a)(1) trusts and taxable foundations	only; others, enter 0)	1		0.
Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter	-0-	5		75.
6 Credits/Payments:				- 1
a 2017 estimated tax payments and 2016 overpayment credited to 2017	6a 0.			- }
b Exempt foreign organizations - tax withheld at source	6b O.			
Tax paid with application for extension of time to file (Form 8868)	6c 0.			İ
d Backup withholding erroneously withheld	6d 0.			
Total credits and payments. Add lines 6a through 6d		7		0.
Enter any penalty for underpayment of estimated tax. Check here if Form 2220	0 is attached	8		0.
Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	. ▶↑	9		<u> </u>
Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount over	rpaid ►	10		₹2
Enter the amount of line 10 to be: Credited to 2018 estimated tax	Refunded▶	11		
art VII-A Statements Regarding Activities				
a During the tax year, did the foundation attempt to influence any national, state, or loc	cal legislation or did it participate or intervene in	n	··· Yc	s No
any political campaign?			1a	X
Did it spend more than \$100 during the year (either directly or indirectly) for politica	il purposes? See the instructions for the definit	ion	1b	X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	copies of any materials published or			
distributed by the foundation in connection with the activities.				_
Did the foundation file Form 1120-POL for this year?			10	X
Enter the amount (if any) of tax on political expenditures (section 4955) imposed du	iring the year:			
(1) On the foundation. > \$ 0 • (2) On foundation ma	anagers.▶ \$ 0.			
Enter the reimburcement (if any) paid by the foundation during the year for political	expenditure tax imposed on foundation		-	1 [
managers. ► \$ 0.				
Has the foundation engaged in any activities that have not previously been reported	to the IRS?		2	X
If "Yes," attach a detailed description of the activities.				\Box
Has the foundation made any changes, not previously reported to the IRS, in its gov	erning instrument, articles of incorporation, or		<u> </u> _	
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	jes		3	X
Did the foundation have unrelated business gross income of \$1,000 or more during	the year?		4a	X
o If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b	
Was there a liquidation, termination, dissolution, or substantial contraction during the	he year?		5	X
If "Yes," attach the statement required by General Instruction T				
Are the requirements of section 508(e) (relating to sections 4941 through 4945) sat	tisfied either:			
By language in the governing instrument, or				
By state legislation that effectively amends the governing instrument so that no management is a state of the state o	andatory directions that conflict with the state	aw	_	
remain in the governing instrument?	•		6 X	
Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes	s," complete Part II, col. (c), and Part XV		7 X	
. ,				
a Enter the states to which the foundation reports or with which it is registered. See in	istructions.			
MT				
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990 PF	to the Attorney General (or designate)].	1
of each state as required by General Instruction G? If "No," attach explanation	(0. 200.3)		8b X	
Is the foundation claiming status as a private operating foundation within the meaning	na of section 4942(1)(3) or 4942(1)(5) for calen	dar	 	. 1
year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Ye			9	_ <u>_X</u> _
Did any persons become substantial contributors during the tax year? Himles, attach		г м т 3	10 X	: +===
and persons second appointment contribution during the My Year. [] 162, diden-	a sensees using mer names and addresses 😽 🖻	, , n , , , , , , , , , , , , , , , , ,	1 .0 1 44	

Form **990-PF** (2017)

Form 990-PF (2017) P.D. JACKSON FAMILY FOUNDATION

Part VII-A | Statements Regarding Activities (continued)

Г	Statements negaring Activities (continued)			
		<u></u>	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	۱.,		v
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		<u> </u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	۱.,		v
	If "Yes," attach statement. See instructions	12		<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ► THE FOUNDATION Located at ► PO BOX 634, LAKESIDE, MT Telephone no. ► ZIP+4 ►59	022		
		922		т
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	N	/ ⊅	
	and enter the amount of tax-exempt interest received or accrued during the year	14	/ <u>\</u>	Na
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,	, ,	Yes	No X
	securities, or other financial account in a foreign country?	16		
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	1		
D,	foreign country ► art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>		'
<u> </u>		Γ.	Yes	No
4.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		163	140
16	a During the year, did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X Nu	ı.		44
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	١.		
	a disqualified person?	ľ		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			-
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available	,		
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	, y 43	,	ļ.
	If the foundation agreed to make a grant to or to employ the official for a period after			1
	termination of government service, if terminating within 90 days.)			
,	o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	١.		
•	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b		
	Organizations rolying on a current notice regarding disaster assistance, check here			
,	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			l l
•	before the first day of the tax year beginning in 2017?	10		<u> </u>
2	Taxes on failure to distribute income (section 4042) (does not apply for years the foundation was a private operating foundation	e	-	- 4
-	defined in section 4942(j)(3) or 4942(j)(5)):			
:	1 At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(9) beginning		1%	{
	before 2017? Yes X No			
	If "Yes," list the years ▶ , , , ,			1
ı	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect		,	. (
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	<u>. </u>	_ · •	
	statement - see instructions.) N/A	2b		
ι	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		,	
	• , , , , , , , , , , , , , , , , , , ,			
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			1
	during the year?			
t	o If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,	<u> </u>		
	Form 4720, to determine if the foundation had excess business holdings in 2017.) N/A	3b		<u> </u>
40	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
ı	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	, u.	* 1	خواسيدان
	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		X_
	Fo	m 99 1)-PF	(2017)

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

Part VIII Information About Officers, Directors, Trustees, I Paid Employees, and Contractors (continued)	Foundation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If no	one, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		• (
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rele number of organizations and other beneficiaries served, conferences convened, research p	vant statistical information such as the papers produced, etc.	Expenses
1 N/A		<u> </u>
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tr	ax year on lines 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
Total. Add lines 1 through 3	>	0.

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	ria.	
а	Average monthly fair market value of securities	1a	180,355.
	Average of monthly cash balances	1b	500,000.
	Fair market value of all other assets	1c	0.
d	Total (add lines 1a, b, and c)	1d	680,355.
	Reduction claimed for blockage or other factors reported on lines 1a and		**
	1c (attach detailed explanation) 1e 0		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	680,355.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	10,205.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	670,150.
6	Minimum investment return Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	10,740.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations, check here and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	10,740.
2a	Tax on investment income for 2017 from Part VI, line 5		
	Income tax for 2017. (This does not include the tax from Part VI.)		
	Add lines 2a and 2b	2c	75.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	10,665.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	10,665.
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	10,665.
=	art XII Qualifying Distributions (see instructions)	· ·	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	1a	0.
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1b	0.
	Program-related investments - total from Part IX-B	2	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	-	
3	Amounts set aside for specific charitable projects that satisfy the:	3a	
a		3b	
	Cash distribution test (attach the required schedule)	4	0.
1	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	 	
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		0.
	Income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4		
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	Angiiiis2 10	1 1110 20011011
	4940(e) reduction of tax in those years.		<u> </u>

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
Distributable amount for 2017 from Part XI, line 7				10,665.
				10,003.
2 Undistributed income, if any, as of the end of 2017			0.	
a Enter amount for 2016 only				
b Total for prior years		0		
		0.		
Excess distributions carryover, if any, to 2017:				
a From 2012	_			ļ
b From 2013	<u> </u>			
c From 2014				
dFrom 2015	_			
e From 2016				
f Total of lines 3a through e	0.			_
4 Qualifying distributions for 2017 from				
Part XII, line 4: ►\$ 0.	,			
a Applied to 2016, but not more than line 2a			0.	. [
b Applied to undistributed income of prior				
years (Election required - see instructions)	{	0.		
c Treated as distributions out of corpus		· · · ·	·	
(Election required - see instructions)	0.			
d Applied to 2017 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
	0.			0.
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))	- 0.			
Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
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		0.		
assessed		0.	···	
d Subtract line 6c from line 6b. Taxable	[0.		į
amount - see instructions				
e Undistributed income for 2016. Subtract line			0.	
4a from line 2a. Taxable amount - see instr.			- 0.	• ==
1 Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must				10 665
be distributed in 2018				10,665.
Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
3 Excess distributions carryover from 2012				
not applied on line 5 or line 7	0.			
Excess distributions carryover to 2018				
Subtract lines 7 and 8 from line 6a	0.			
Analysis of line 9:				
a Excess from 2013				
b Excess from 2014]			1
c Excess from 2015	1			1
d Excess from 2016	1			
e Excess from 2017]			ļ

	CKSON FAMIL				<u>97338 Page 10</u>
Part XIV Private Operating F	oundations (see in	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter that	t it is a private operating		/	
foundation, and the ruling is effective fo	•	•	>		
b Check box to indicate whether the found	dation is a private operatii	ng foundation described i		4942(j)(3)_/or49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	 	Prior 3 years]
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
investment return from Part X for					
each year listed				/ _	
b 85% of line 2a			7	7	
c Qualifying distributions from Part XII,			7	T	
line 4 for each year listed	ĺ	ĺ	/		
d Amounts included in line 2c not					
used directly for active conduct of					,
exempt activities			/		
e Qualifying distributions made directly					
for active conduct of exempt activities.			/		}
Subtract line 2d from line 2c			/		
3 Complete 3a, b, or c for the	· · · · · · · · · · · · · · · · · · ·	7			
alternative test relied upon:		/			
a "Assets" alternative test - enter: (1) Value of all assets					ļ
		/			
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)		/	1		ì
b "Endowment" alternative test - enter		/			
2/3 of minimum investment return		/			
shown in Part X, line 6 for each year listed		/			
c "Support" alternative test - enter:		/			
(1) Total support other than gross			J		Ì
investment income (interest,	1		İ		
dividends, rents, payments on	 	Y	1		
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)	<u> </u>	<u> </u>			
(3) Largest amount of support from		ļ			
an exempt organization		<u> </u>		·· ·	
(4) Gross investment income Part XV Supplementary Info	rmotion (Comple	to this part only	if the foundation	n had \$5 000 ar m	oro in cocoto
at any time during t			ir the loundatio	n nau \$5,000 or m	ore in assets
	_ _	detions.)			
1 Information Regarding Foundation	•				
a List any managers of the foundation wh year (but only if they have contributed in			ributions received by th	e foundation before the clo	Se OI ārīy tax
	nore than 40,000). (See a	ecuon 507 (u)(2).)			
PHILIP D. JACKSON					
b List any managers of the foundation wh other entity) of which the foundation ha			or an equally large por	tion of the ownership of a p	artnership or
	s a 1076 or greater interes	5 L			
NONE					
2 Information Regarding Contribut					
Check here X if the foundation of					iests for funds. If
the foundation makes gifts, grants, etc.,					
a The name, address, and telephone num	ber or email address of th	ne person to whom applic	ations should be addre	ssed:	
	 				
b The form in which applications should b	e submitted and informa	tion and materials they st	nould include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographica	al areas, charitable fields,	kınds of institutions, or	other factors	

Form 990-PF (2017) P.D. JACKSON FAMILY FOUNDATION
Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Purpose of grant or contribution Foundation status of recipient Amount Name and address (home or business) a Paid during the year NONE ٥. ▶ 3a b Approved for future payment NONE **▶** 3b 0. Total

Part XVI-A	Analysis of	Income-Producing	Activities
FaitAtia	Alialy 313 Ul	IIICOILIC-F TOUGGING	ACUTICO

<u> </u>	•				
Enter gross amounts unless otherwise indicated.	Unrelate (a) Business	d business income (b)	(C) Exclu-	by section 512, 513, or 514 (d)	(e) Related or exempt
1 Program service revenue;	code	Amount	sion code	Amount	function income
a					
b					···
C					
d					
e					
f					
g Fees and contracts from government agencie	es				
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal			-		
property					
7 Other investment income .			14	3,750.	
8 Gain or (loss) from sales of assets other					
than inventory .					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
C					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)	<u> </u>	0.	<u> </u>	3,750.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	3,750.
(See worksheet in line 13 instructions to verify calcu	ulations.)				
Part XVI-B Relationship of Act	tivities to the Acco	omplishment of Ex	cempt F	Purposes	
Line No. Explain below how each activity for	which income is reported i	n column (e) of Part XVI-A			plishment of
the foundation's exempt purposes (other than by providing fui	nds for such purposes).			
		····			
-					
					
	_,				
					<u>_</u> .
	=				·
· · · · · · · · · · · · · · · · · · ·					

Part XVII	Information Regarding	Transfers to and	Transactions	and Relationships Wit	h Noncharitable
	Exempt Organizations				

1 Did the d	organization directly or indir	rectly ongago in any	of the followin	g with any other organizati	on described in sect	tion 501(c)		Yeε	No
(other th	nan section 501(c)(3) organ	iizations) or in sectio	n 527, relating	g to political organizations?	•		1		İ
a Transfer	s from the reporting founda	ation to a noncharita	ble exempt or	ganization of:			l		
(1) Cas	h						1a(1)		X
(2) Oth	er assets						1a(2)		X
b Other tra	ansactions:								
(1) Sale	es of assets to a noncharital	ble exempt organizat	tion				16(1)		X
(2) Pur	chases of assets from a noi	ncharitable exempt o	organization				1b(2)		X
(3) Ren	ital of facilities, equipment,	or other assets					1b(3)		X
(4) Reii	mbursement arrangements					•	1b(4)		X
	ns or loan guarantees						1b(5)		X
(6) Peri	formance of services or me	mbership or fundrais	sıng solıcıtatıo	ns			1b(6)		X
-	of facilities, equipment, ma	- :		· ·			10		X
						market value of the goods, o		els,	
				ed less than fair market val	ue in any transactioi	n or sharing arrangement, sh	iow in		
	(d) the value of the goods,				1 (4)				
(a)Line no	(b) Amount involved	(c) Name of		exempt organization	(d) Description	n of transfers, transactions, and s	naring an	rangeme	nts
			N/A						
 +				- 					
					 				
+						·			
				·					
									
	·								
									
-+									
$\overline{}$					•				
						<u>-</u>			
									
2a Is the fo	undation directly or indirect	tly affiliated with, or i	related to, one	or more tax-exempt organ	izations described				
	n 501(c) (other than section	-	-	or more and sharing a gam			Yes	X	No
	complete the following sche								
	(a) Name of org			(b) Type of organization	1	(c) Description of relationsh	ıp		
	N/A								
					1	· · · · · · · · · · · · · · · · · · ·			
· · ·					1				
		1							
	er penalties of perjury, indeclare to belief, it is true, correct, and con-			ig accompanying schedules and in taxpayer) is based on all infor			the IRS o	discuss 1	his
Sign 📜	beller, it is true, correct, and con	inplete Decaration of bi	eparer (outer tha	n taxpayer) is based on all lillor	mation of which prepare	show	n with the	? See in:	
Here	Truly NX	Tush	sor	11/12/18	DIRECT	ror X	Yes		No
Sı	gnature of officer of trustee			Date '	Title				
	Print/Type preparer's na	ime	Preparer's s	gnature	Date	Check if PTIN			
			,	1.		self- employed			
Paid	DON RYU	<u>-</u>	Nov	you theyer	11/09/18		435		
Preparer		RIN COOPE	RMAN &	CO, VLLP		Firm's EIN ► 22-24	289	65	-
Use Only				· · .		<u> </u>			
	Firm's address ▶ 52]			
	NE'	W YORK, N	Y 1001	7-4683		Phone no. 212-69			
						_	001	DE	10047

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.rs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Employer identification number

82-2797338 JACKSON FAMILY FOUNDATION P.D. Organization type (check one) Filers of: Section: 501(c)() (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions **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 33 1/3% 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 ☐ 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 General Rule applies to this organization because it received nonexclusively religious, chantable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF),

but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization

Employer identification number

P.D. JACKSON FAMILY FOUNDATION

82-2797338

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	onal space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PHILIP D. JACKSON C/O CITRIN COOPERMAN, 529 FIFTH AVE NEW YORK, NY 10017	\$ <u>2,000,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	PHILIP D. JACKSON C/O CITRIN COOPERMAN, 529 FIFTH AVE NEW YORK, NY 10017	\$ 750,780.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - - -	Person Payroli Noncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - - -	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - - -	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
723452 11-0		\$Schedule B (Form	Person Payroll Noncash (Complete Part II for noncash contributions) 990, 990-EZ, or 990-PF) (2017)

Employer identification number

P.D. JACKSON FAMILY FOUNDATION

82-2797338

Part II	Noncash Property (see instructions) Use duplicate copies of P	art 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
	INVESTMENT IN GPT OPERATING		
_2	PARTNERSHIP, LP		
		\$750,780.	12/15/17
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate)	(d) Date received
Part I		(See instructions.)	
		\$	
(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
		<u> </u>	
		 \$	
(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
—			
453 11-01		Schodula B (Farm 9	90, 990-EZ, or 990-PF) (2

Page	4
- aue	

Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Employer identification number Name of organization P.D. JACKSON FAMILY FOUNDATION 82-2797338 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for Part III the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No from Part I (d) Description of how gift is held (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF	OTHER	INCOME		STATEMENT 1	
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME		
GPT K-1 INCOME	•	3,750.	3,750	•	
TOTAL TO FORM 990-PF,	PART I, LINE 11	3,750.	3,750	•	
FORM 990-PF	CORPOR	ATE STOCK		STATEMENT 2	
DESCRIPTION		В	OOK VALUE	FAIR MARKET VALUE	
GPT SECURITIES			754,530.	721,420.	
TOTAL TO FORM 990-PF,	PART II, LINE 10	В	754,530.	721,420.	
FORM 990-PF	LIST OF SUBSTANT PART VII-A		RS	STATEMENT 3	
NAME OF CONTRIBUTOR	AD	DRESS			
PHILIP D. JACKSON		C/O CITRIN COOPERMAN, 529 FIFTH AVE NEW YORK, NY 10017			

FORM 990-PF PART VIII - LIST TRUSTEES AND	OF OFFICERS, D		STATI	EMENT 4
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
PHILIP D. JACKSON C/O CITRIN COOPERMAN, 529 FIFTH	DIRECTOR			
AVE NEW YORK, NY 10017	0.10	0.	0.	0.
ELIZABETH JACKSON-PETTINE C/O CITRIN COOPERMAN, 529 FIFTH	DIRECTOR	•		
AVE NEW YORK, NY 10017	0.10	0.	0.	0.
CHELSEA A. SACHS C/O CITRIN COOPERMAN, 529 FIFTH	DIRECTOR			
AVE NEW YORK, NY 10017	0.10	0.	0.	0.
BROOKE S. SEARS C/O CITRIN COOPERMAN, 529 FIFTH	DIRECTOR			
AVEC/O CITRIN COOPERMAN, 529 FIFTH AVE NEW YORK, NY 10017	0.10	0.	0.	0.
CHARLES A. JACKSON C/O CITRIN COOPERMAN, 529 FIFTH	DIRECTOR			
AVE NEW YORK, NY 10017	0.10	0.	0.	0.
BENJAMIN P. JACKSON C/O CITRIN COOPERMAN, 529 FIFTH	DIRECTOR			
AVE NEW YORK, NY 10017	0.10	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII	0.	0.	0.