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Form 990-PF

Department of the Treasury
Internal Revenue Service

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

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

OMB No. 1545-0052

2020

Open to Public Inspection

For calendar year 2020, or tax year beginning 07-01-2020

, and ending 06-30-2021

Name of foundation SEBY B JONES FAMILY FOUNDATION		A Employer identification number 31-1578859	
Number and street (or P.O. box number if mail is not delivered to street address) PO BOX 19067		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code RALEIGH, NC 27619		B Telephone number (see instructions) (919) 829-2499	
G Check all that apply: <div><input type="checkbox"/> Initial return</div> <div><input type="checkbox"/> Initial return of a former public charity</div> <div><input type="checkbox"/> Final return</div> <div><input type="checkbox"/> Amended return</div> <div><input type="checkbox"/> Address change</div> <div><input type="checkbox"/> Name change</div>		D 1. Foreign organizations, check here..... 2. Foreign organizations meeting the 85% test, check here and attach computation ...	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶\$ 19,408,913		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here	
J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)				
	2 Check ▶ <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	101,228	101,183	101,228	
	4 Dividends and interest from securities	234,898	234,898	234,898	
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10 _____	859,441			
	b Gross sales price for all assets on line 6a _____ 3,402,511				
	7 Capital gain net income (from Part IV, line 2)		859,441		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances _____				
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)	123,847	26,942	123,847		
12 Total. Add lines 1 through 11	1,319,414	1,222,464	459,973		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	0	0	0	0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	36,140	18,070	0	18,070
	c Other professional fees (attach schedule)	165,410	165,410	0	0
	17 Interest	57,690	57,690	0	0
	18 Taxes (attach schedule) (see instructions)	21,134	2,379	0	0
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	54,126	0	0	0
	24 Total operating and administrative expenses. Add lines 13 through 23	334,500	243,549	0	18,070
	25 Contributions, gifts, grants paid	682,500			682,500
	26 Total expenses and disbursements. Add lines 24 and 25	1,017,000	243,549	0	700,570
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	302,414			
	b Net investment income (if negative, enter -0-)		978,915		
	c Adjusted net income (if negative, enter -0-)			459,973	

For Paperwork Reduction Act Notice, see instructions.

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Form 990-PF (2020)

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	-1		
	2 Savings and temporary cash investments	2,330,379	1,849,623	1,849,623
	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 ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	6,202,186	7,276,093	14,861,780
	c Investments—corporate bonds (attach schedule)	1,605,837	1,232,498	1,231,524
	11 Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	1,114,304	1,194,653	1,465,986
	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 instructions. Also, see page 1, item I)	11,252,705	11,552,867	19,408,913	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds	11,597,700	11,597,700	
	27 Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	
	28 Retained earnings, accumulated income, endowment, or other funds	-344,995	-44,833	
	29 Total net assets or fund balances (see instructions)	11,252,705	11,552,867	
30 Total liabilities and net assets/fund balances (see instructions) .	11,252,705	11,552,867		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	11,252,705
2 Enter amount from Part I, line 27a	2	302,414
3 Other increases not included in line 2 (itemize) ▶ _____	3	0
4 Add lines 1, 2, and 3	4	11,555,119
5 Decreases not included in line 2 (itemize) ▶ _____	5	2,252
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	11,552,867

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a See Additional Data Table			
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a See Additional Data Table			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a See Additional Data Table			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	859,441
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8 }	3	-208,351

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**SECTION 4940(e) REPEALED ON DECEMBER 20, 2019 - DO NOT COMPLETE**

1 Reserved			
(a) Reserved	(b) Reserved	(c) Reserved	(d) Reserved
2 Reserved	2		
3 Reserved.	3		
4 Reserved	4		
5 Reserved	5		
6 Reserved	6		
7 Reserved	7		
8 Reserved ,	8		

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)		
b	Reserved.	1	13,607
c	All other domestic foundations enter 1.39% of line 27b. Exempt foreign organizations 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	13,607
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-.	5	13,607
6	Credits/Payments:		
a	2020 estimated tax payments and 2019 overpayment credited to 2020	6a	3,120
b	Exempt foreign organizations—tax withheld at source	6b	0
c	Tax paid with application for extension of time to file (Form 8868)	6c	0
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d.	7	3,120
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached.	8	10
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed .	9	10,497
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid .	10	
11	Enter the amount of line 10 to be: Credited to 2021 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). <i>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.</i>	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input type="text"/> \$ <u>0</u> (2) On foundation managers. <input type="text"/> \$ <u>0</u>		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="text"/> \$ <u>0</u>		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>	2	No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	Yes
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	Yes
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>	5	No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	No
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="text"/> NC		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation.</i>	8b	Yes
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2020 or the taxable year beginning in 2020? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i>	9	No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>	10	No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ <u>N/A</u>	13	Yes	
14	The books are in care of ▶ <u>SEBY RUSSELL JONES</u> Telephone no. ▶ <u>(919) 829-2499</u>			

Located at ▶ 1207 FRONT STREET RALEIGH NCZIP+4 ▶ 27609

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here ▶ <input type="checkbox"/>			
	and enter the amount of tax-exempt interest received or accrued during the year ▶ 15			
16	At any time during calendar year 2020, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶			

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

		Yes	No
1a	During the year did the foundation (either directly or indirectly):		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions <input type="checkbox"/>	1b	
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 before the first day of the tax year beginning in 2020?	1c	No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a	At the end of tax year 2020, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2020? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____		
b	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 statement—see instructions.)	2b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ▶ 20____, 20____, 20____, 20____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2020 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period?(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2020.)	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2020?	4b	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a	During the year did the foundation pay or incur any amount to:		Yes	No
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.		5b	
	Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/>		
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d).	<input type="checkbox"/> Yes <input type="checkbox"/> No		
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6b	No
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7b	
b	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?			
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000.				0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)
3 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		
Total number of others receiving over \$50,000 for professional services. ►		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ►	0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities.	1a	14,110,042
b	Average of monthly cash balances.	1b	2,194,887
c	Fair market value of all other assets (see instructions).	1c	1,405,914
d	Total (add lines 1a, b, and c).	1d	17,710,843
e	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	17,710,843
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	265,663
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	17,445,180
6	Minimum investment return. Enter 5% of line 5.	6	872,259

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	872,259
2a	Tax on investment income for 2020 from Part VI, line 5.	2a	13,607
b	Income tax for 2020. (This does not include the tax from Part VI.).	2b	20,424
c	Add lines 2a and 2b.	2c	34,031
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	838,228
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	838,228
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	838,228

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	700,570
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	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	700,570
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	700,570

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2019	(c) 2019	(d) 2020
1 Distributable amount for 2020 from Part XI, line 7				838,228
2 Undistributed income, if any, as of the end of 2020:				
a Enter amount for 2019 only.			3,445	
b Total for prior years: 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2020:				
a From 2015.				
b From 2016.				
c From 2017.				
d From 2018.				
e From 2019.				
f Total of lines 3a through e.	0			
4 Qualifying distributions for 2020 from Part XII, line 4: ► \$ <u>700,570</u>				
a Applied to 2019, but not more than line 2a			3,445	
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 2020 distributable amount.				697,125
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2020. (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
b Prior years' undistributed income. Subtract line 4b from line 2b.		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b. Taxable amount—see instructions.		0		
e Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount—see instructions.			0	
f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020.				141,103
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2015 not applied on line 5 or line 7 (see instructions).	0			
9 Excess distributions carryover to 2021. Subtract lines 7 and 8 from line 6a.	0			
10 Analysis of line 9:				
a Excess from 2016.				
b Excess from 2017.				
c Excess from 2018.				
d Excess from 2019.				
e Excess from 2020.				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2020, enter the date of the ruling. ▶

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2020	(b) 2019	(c) 2018	(d) 2017	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test—enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.					
c "Support" alternative test—enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:
SEBY RUSSELL JONES
PO BOX 19067
RALEIGH, NC 27609
(919) 829-2499

b The form in which applications should be submitted and information and materials they should include:
NO SPECIAL FORM REQUIRED

c Any submission deadlines:
NONE

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:
LIMITED TO USA

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			3a	682,500
b <i>Approved for future payment</i>				
Total			3b	0

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue:						
a _____						
b _____						
c _____						
d _____						
e _____						
f _____						
g Fees and contracts from government agencies						
2 Membership dues and assessments. . . .						
3 Interest on savings and temporary cash investments				14	101,228	
4 Dividends and interest from securities. . . .				14	234,898	
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	26,942	
8 Gain or (loss) from sales of assets other than inventory				18	859,441	
9 Net income or (loss) from special events:						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue:						
a <u>PARTNERSHIP INCOME HEDGE PREMIER FUND</u>		900099	98,255			
b <u>PARTNERSHIP INCOME CAPITOL PRIVATE OPPORTUNITIES II</u>		900099	-667			
c <u>PARTNERSHIP INCOME FROM PLEXUS FUND II</u>		900099	-120			
d <u>PARTNERSHIP INCOME CAPITOL PRIVATE OPPORTUNITIES III</u>		900099	-563			
e _____						
12 Subtotal. Add columns (b), (d), and (e). . .			96,905		1,222,509	0
13 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.)				13		1,319,414

[illegible]

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of:				
(1) Cash.		1a(1)		No
(2) Other assets.		1a(2)		No
b Other transactions:				
(1) Sales of assets to a noncharitable exempt organization.		1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization.		1b(2)		No
(3) Rental of facilities, equipment, or other assets.		1b(3)		No
(4) Reimbursement arrangements.		1b(4)		No
(5) Loans or loan guarantees.		1b(5)		No
(6) Performance of services or membership or fundraising solicitations.		1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.		1c		No
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.				

[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule.		
(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here	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.		
	*****	2022-05-16	*****
	_____ Signature of officer or trustee	_____ Date	_____ Title

May the IRS discuss this return with the preparer shown below
 (see instr.) ☒ **Yes** ☐ **No**

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	DAVID A JOHNSON CPA		2022-05-16		P01301605
	Firm's name ▶ THOMAS JUDY & TUCKER PA				Firm's EIN ▶ 56-1965804
	Firm's address ▶ 4700 FALLS OF NEUSE ROAD RALEIGH, NC 27609				Phone no. (919) 571-7055

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e.g., real estate, (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
HEDGE PREMIER FUND K-1	P	2017-01-01	2021-06-30
CAPITAL PRIVATE OPPORTUNITIES II K-1	P	2017-01-01	2021-06-30
CAPITAL PRIVATE OPPORTUNITIES III K-1	P	2017-01-01	2021-06-30
PLEXUS FUND K-1	P	2017-01-01	2021-06-30
CAPITAL PRIVATE OPPORTUNITIES III K-1	P	2021-01-01	2021-06-30
ROCKEFELLER - 9083	P	2021-01-01	2021-06-30
ROCKEFELLER - 9083	P	2017-01-01	2021-06-30
ROCKEFELLER - 9084	P	2021-01-01	2021-06-30
ROCKEFELLER - 9084	P	2017-01-01	2021-06-30
ROCKEFELLER - 9086	P	2017-01-01	2021-06-30

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
5,101			5,101
42,074			42,074
15,625			15,625
172			172
36			36
70,392		113,245	-42,853
438,286		144,608	293,678
49,091		101,463	-52,372
844,249		709,147	135,102
635,130		644,657	-9,527

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
			5,101
			42,074
			15,625
			172
			36
			-42,853
			293,678
			-52,372
			135,102
			-9,527

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e.g., real estate, (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
ROCKEFELLER - 9098	P	2021-01-01	2021-06-30
ROCKEFELLER - 9098	P	2017-01-01	2021-06-30

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
359,713		472,875	-113,162
942,642		357,075	585,567

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
			-113,162
			585,567

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
ROBERT L JONES	CHAIRMAN 1.00	0	0	0
PO BOX 19067 RALEIGH, NC 27619				
JAMES R JONES	PRESIDENT 1.00	0	0	0
PO BOX 19067 RALEIGH, NC 27619				
SEBY B JONES JR	VICE PRESIDENT/TREASURER 1.00	0	0	0
PO BOX 19067 RALEIGH, NC 27619				
ALICE J HARROD	SECRETARY 1.00	0	0	0
PO BOX 19067 RALEIGH, NC 27619				
SEBY RUSSELL JONES	ASSISTANT SECRETARY 1.00	0	0	0
PO BOX 19067 RALEIGH, NC 27619				

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ABEL SPEAKS327 BROOKWOOD DRIVE RICHARDSON, TX 75080	NONE	PC	GENERAL SUPPORT	10,000
AMERICAN GOLD STAR MOTHERS 2128 LEROY PLACE WASHINGTON, DC 20008	NONE	PC	GENERAL SUPPORT	3,000
AMERICAN HONOR GUARDS PO BOX 10473 WILMINGTON, NC 28404	NONE	PC	GENERAL SUPPORT	16,500
Total ▶ 3a				682,500

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ANGUS FOUNDATION 3201 FREDERICK AVE ST JOSEPH, MO 64506	NONE	PC	GENERAL SUPPORT	2,500
BAPTIST CHILDREN'S HOMES OF NORTH CAROLINA 204 IDOL STREET THOMASVILLE, NC 27630	NONE	PC	GENERAL SUPPORT	5,000
BOYS & GIRLS CLUBSPO BOX 19999 RALEIGH, NC 27619	NONE	PC	COMMUNITY SUPPORT	21,000
Total ▶ 3a				682,500

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CAPE FEAR BACAPO BOX 3958 WILMINGTON, NC 28406	NONE	PUBLIC	COMMUNITY SUPPORT	5,000
CAROUSEL CENTER INC 1501 DOCK STREET WILMINGTON, NC 28401	NONE	PC	COMMUNITY SUPPORT	2,000
CHRISTIAN LIBRARY INTERNATIONAL PO BOX 97095 RALEIGH, NC 27624	NONE	PC	RELIGIOUS	11,000
Total ▶ 3a				682,500

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CHRISTIAN VETERINARY MISSION 19303 FREMONT AVE N SEATTLE, WA 98133	NONE	PC	GENERAL SUPPORT	2,500
COMMUNITIES OF GRACE INTERNATIONAL PO BOX 37475 RALEIGH, NC 27627	NONE	PC	GENERAL SUPPORT	25,000
DOMESTIC VIOLENCE SHELTER AND SERVICES INC PO BOX 1555 WILMINGTON, NC 28403	NONE	PC	COMMUNITY SUPPORT	2,000
Total ▶ 3a				682,500

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ECU EDUCATIONAL FOUNDATION WARD SPORTS MEDICINE BLDG STE 304 GREENVILLE, NC 27858	NONE	PC	EDUCATIONAL	5,500
FELLOWSHIP HOME OF RALEIGH 506 CUTLER STREET RALEIGH, NC 27603	NONE	PC	GENERAL SUPPORT	11,000
FELLOWSHIP OF CHRISTIAN ATHLETES 8701 LEEDS ROAD KANSAS CITY, MO 64129	NONE	PUBLIC	RELIGIOUS	6,000
Total ▶ 3a				682,500

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FIRST FRUIT MINISTRIES 2750 VANCE STREET WILMINGTON, NC 28412	NONE	PC	COMMUNITY SUPPORT	2,000
FOOD BANK OF NC1924 CAPITAL BLVD RALEIGH, NC 27604	NONE	PUBLIC	COMMUNITY SUPPORT	10,000
FOUNDATION FOR GOOD BUSINESS PO BOX 26762 RALEIGH, NC 27611	NONE	PC	COMMUNITY AWARENESS	10,000
Total ▶ 3a				682,500

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FREE WILL BAPTIST CHILDREN'S HOME PO BOX 249 MIDDLESEX, NC 27557	NONE	PUBLIC	RELIGIOUS	10,000
HAYNES-INMAN EDUCATION CENTER 200 HAYNES ROAD JAMESTOWN, NC 27282	NONE	PC	GENERAL SUPPORT	6,000
HEART OF WILMINGTONPO BOX 19067 RALEIGH, NC 27619	NONE	PC	GENERAL SUPPORT	15,000
Total ▶ 3a				682,500

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HUMAN COALITIONPO BOX 5052 FRISCO, TX 75035	NONE	PUBLIC	COMMUNITY SUPPORT	1,000
INTERACT1012 OBERLIN ROAD RALEIGH, NC 27605	NONE	PUBLIC	COMMUNITY SUPPORT	5,000
INTERFAITH FOOD SHUTTLE PO BOX 14638 RALEIGH, NC 27620	NONE	PC	COMMUNITY SUPPORT	3,500
Total ▶ 3a				682,500

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
JO ANN CARTER HARRELSON CENTER 20 NORTH 4TH STREET STE 214 WILMINGTON, NC 28401	NONE	PC	GENERAL SUPPORT	5,000
JUDICIAL WATCH INC 425 THIRD ST SW STE 800 WASHINGTON, DC 20024	NONE	PC	GENERAL SUPPORT	2,000
KELLY HOUSE 1390 S SIXTEENTH STREET WILMINGTON, NC 28401	NONE	PC	COMMUNITY SUPPORT	8,000
Total ▶ 3a				682,500

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LOUISBURG COLLEGE 501 N MAIN STREET LOUISBURG, NC 27549	NONE	PC	EDUCATION	10,000
MEALS ON WHEELSPO BOX 37639 RALEIGH, NC 27627	NONE	PC	COMMUNITY SUPPORT	5,000
NATIONAL MS SOCIETY 3101 INDUSTRIAL DRIVE SUITE 210 RALEIGH, NC 27609	NONE	PC	MEDICAL	2,500
Total ▶ 3a				682,500

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NC COMMUNITY FOUNDATION PO BOX 2828 RALEIGH, NC 27602	NONE	PC	COMMUNITY SUPPORT	6,000
NC HOSPITALITY EDUCATION FOUNDATION 6036 SIX FORKS ROAD RALEIGH, NC 27609	NONE	PC	COMMUNITY SUPPORT	2,500
NC MUSEUM OF NATURAL SCIENCES 11 WEST JONES STREET RALEIGH, NC 27601	NONE	PC	COMMUNITY SUPPORT	3,500
Total ▶ 3a				682,500

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NEW LIFE CAMP 9927 FALLS OF NEUSE ROAD RALEIGH, NC 27614	NONE	PC	COMMUNITY SUPPORT	5,000
OCCONEECHEE COUNCIL BOY SCOUTS 3231 ATLANTIC AVENUE RALEIGH, NC 27604	NONE	PC	GENERAL SUPPORT	10,000
OPEN DOORS USAPO BOX 27001 SANTA ANA, CA 92799	NONE	RELIGIOUS	COMMUNITY SUPPORT	11,000
Total ▶ 3a				682,500

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PASSAGE HOMEPO BOX 10347 RALEIGH, NC 27605	NONE	PC	COMMUNITY SUPPORT	5,000
RALEIGH CHARTER SCHOOL 1307 GLENWOOD AVE RALEIGH, NC 27605	NONE	PC	GENERAL SUPPORT	2,500
RALEIGH RESCUE MISSION PO BOX 27391 RALEIGH, NC 27611	NONE	PC	COMMUNITY SUPPORT	6,000
Total ▶ 3a				682,500

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SAMARITAN'S PURSEPO BOX 3000 BOONE, NC 28607	NONE	PC	GENERAL SUPPORT	20,000
SECOND BREATH CENTER 215 W FISHER AVE GREENSBORO, NC 27401	NONE	PC	GENERAL SUPPORT	6,000
SHAW UNIVERSITY 118 EAST SOUTH STREET RALEIGH, NC 27610	NONE	PUBLIC	GENERAL SUPPORT	1,000
Total ▶ 3a				682,500

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SHEPHERD'S RANCH 3017 BRASSFIELD RD CREEDMOOR, NC 27522	NONE	PC	GENERAL SUPPORT	25,000
SHEPHERD'S TABLEPO BOX 28024 RALEIGH, NC 27611	NONE	PC	COMMUNITY SUPPORT	5,000
SHIP OF ZION CHURCH 924 S BLOUNT ST RALEIGH, NC 27601	NONE	PC	GENERAL SUPPORT	2,000
Total ▶ 3a				682,500

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SHRINERS HOSPITALS FOR CHILDREN 2900 N ROCKY POINT DRIVE TAMPA, FL 33607	NONE	PC	GENERAL SUPPORT	2,000
SIGMA NU EDUCATIONAL FOUNDATION INC PO BOX 1869 LEXINGTON, VA 24450	NONE	PC	GENERAL SUPPORT	2,000
SOUTHEAST NORTH CAROLINA VETERANS DAY PARADE FRONT STREET WILMINGTON, NC 28401	NONE	PUBLIC	GENERAL SUPPORT	5,000
Total ▶ 3a				682,500

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SOUTHEASTERN BAPTIST THEOLOGICAL SEMINARY 222 N WINGATE STREET WAKE FOREST, NC 27587	NONE	PC	RELIGIOUS	28,000
SPCA OF WAKE COUNTY 200 PETFINDER LANE RALEIGH, NC 27603	NONE	PC	COMMUNITY SUPPORT	5,000
SPECIAL OLYMPICS INC 1133 19TH ST NW WASHINGTON, DC 20036	NONE	PC	GENERAL SUPPORT	1,500
Total ▶ 3a				682,500

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TAMMY LYNN CENTER 739 CHAPPELL DRIVE RALEIGH, NC 27606	NONE	PC	COMMUNITY SUPPORT	24,000
THE CENTRE OF REDEMPTION 20 N 4TH STREET WILMINGTON, NC 28401	NONE	PUBLIC	COMMUNITY SUPPORT	2,000
THE EASY DOES IT RANCH AND RIDING ACADEMY 3581 MUDDY CREEK ROAD VIRGINIA BEACH, VA 23456	NONE	PC	COMMUNITY SUPPORT	45,000
Total ▶ 3a				682,500

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THE HERITAGE FOUNDATION 214 MASSACHUSETTS AVE NE WASHINGTON, DC 20002	NONE	PC	GENERAL SUPPORT	2,000
THE JOSHUA FUNDPO BOX 2589 MONUMENT, CO 80132	NONE	PUBLIC	COMMUNITY SUPPORT	25,000
THE MISSION CINCINNATIPO BOX 6006 CINCINNATI, OH 45206	NONE	PC	GENERAL SUPPORT	10,000
Total ▶ 3a				682,500

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
THE SALVATION ARMY 215 SOUTH PERSON STREET RALEIGH, NC 27601	NONE	PC	COMMUNITY SUPPORT	25,000
TIGER CREEK ANIMAL SANCTUARY 17552 FM14 TYLER, TX 75706	NONE	PC	GENERAL SUPPORT	1,500
TRANSITIONS LIFE CARE 250 HOSPICE CIRCLE RALEIGH, NC 27607	NONE	PC	GENERAL SUPPORT	8,500
Total ▶ 3a				682,500

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TRIANGLE FAMILY SERVICES INC 3937 WESTERN BLVD RALEIGH, NC 27606	NONE	PC	COMMUNITY SUPPORT	23,000
WAKE EDUCATION PARTNERSHIP 706 HILLSBOROUGH ST SUITE A RALEIGH, NC 27603	NONE	PC	EDUCATION	6,000
WAKEMED FOUNDATION 3000 NEW BERN AVENUE RALEIGH, NC 27610	NONE	PUBLIC	MEDICAL	5,500
Total ▶ 3a				682,500

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
WATERMARK COMMUNITY CHURCH 7504 LYNDON B JOHNSON FREEWAY DALLAS, TX 75251	NONE	PUBLIC	COMMUNITY SUPPORT	10,000
WHITE MEMORIAL PRESBYTERIAN CHURCH 1704 OBERLIN ROAD RALEIGH, NC 27608	NONE	PC	RELIGIOUS	5,000
WREATHS ACROSS AMERICA 4 POINT STREET COLUMBIA FALLS, ME 04623	NONE	PC	GENERAL SUPPORT	1,500
Total ▶ 3a				682,500

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
YATES MILL ASSOCIATES 4620 LAKE WHEELER ROAD RALEIGH, NC 27603	NONE	PC	GENERAL SUPPORT	1,000
YMCA 980 MARTIN LUTHER KING JR BLVD CHAPEL HILL, NC 27514	NONE	PC	COMMUNITY SUPPORT	30,000
BOYS & GIRLS HOMES OF NORTH CAROLINA 400 FLEMINGTON DRIVE LAKE WACCAMAW, NC 28450	NONE	PUBLIC	GENERAL SUPPORT	10,000
Total ▶ 3a				682,500


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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BRUNSWICK SHERIFF'S CHARITABLE FOUNDATION PO BOX 10820 SOUTHPORT, NC 28461	NONE	PUBLIC	GENERAL SUPPORT	3,000
CALABASH AMERICAN LEGION 10277 BEACH DRIVE SW CAROLINA SHORES, NC 28467	NONE	PUBLIC	GENERAL SUPPORT	1,000
CHRISTIAN MOTORCYCLISTS ASSOCIATION PO BOX 9 HATFIELD, AR 71945	NONE	PUBLIC	GENERAL SUPPORT	2,000
Total ▶ 3a				682,500

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CHURCH OF THE REDEEMER 19425 WOODFIELD ROAD GAITHERSBURG, MD 20879	NONE	PUBLIC	GENERAL SUPPORT	6,000
FED IS BEST FOUNDATION PO BOX 241736 LITTLE ROCK, AR 72223	NONE	PUBLIC	GENERAL SUPPORT	15,000
FIVE14 REVOLUTION101 N KERR AVE WILMINGTON, NC 28405	NONE	PUBLIC	GENERAL SUPPORT	10,000
Total ▶ 3a				682,500

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
GATEWAY WOMEN'S CARE 1306 HILLSBOROUGH STREET RALEIGH, NC 27605	NONE	PUBLIC	GENERAL SUPPORT	1,000
GREENSBORO SCIENCE CENTER 4301 LAWDALE DRIVE GREENSBORO, NC 27455	NONE	PUBLIC	GENERAL SUPPORT	6,000
HEALING TRANSITIONS1251 GOODE ST RALEIGH, NC 27603	NONE	PUBLIC	GENERAL SUPPORT	10,000
Total ▶ 3a				682,500

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HONOR FLIGHT NETWORK 4601 NORTH FAIRFAX DRIVE SUITE 1200 ARLINGTON, VA 22203	NONE	PUBLIC	GENERAL SUPPORT	7,000
PARA ROWING FOUNDATION 71 MONMOUTH ST BROOKLINE, MA 02446	NONE	PUBLIC	GENERAL SUPPORT	6,000
SPCA OF FRANKLIN COUNTY PO BOX 1194 YOUNGSVILLE, NC 27596	NONE	PUBLIC	GENERAL SUPPORT	2,500
Total ▶ 3a				682,500

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
VETERANS MEMORIAL PARK 6354 JAMES B WHITE HWY S WHITEVILLE, NC 28472	NONE	PUBLIC	GENERAL SUPPORT	1,000
Total  3a				682,500

TY 2020 Accounting Fees Schedule**Name:** SEBY B JONES FAMILY FOUNDATION**EIN:** 31-1578859

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MANAGEMENT FEE	29,640	14,820	0	14,820
TAX PREPARATION FEES	6,500	3,250	0	3,250

TY 2020 Investments Corporate Bonds Schedule

Name: SEBY B JONES FAMILY FOUNDATION

EIN: 31-1578859

Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
CORPORATE BONDS	1,232,498	1,231,524

TY 2020 Investments Corporate Stock Schedule

Name: SEBY B JONES FAMILY FOUNDATION

EIN: 31-1578859

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
MUTUAL FUNDS	60,121	30,614
STOCKS	7,215,972	14,831,166

TY 2020 Investments - Other Schedule**Name:** SEBY B JONES FAMILY FOUNDATION**EIN:** 31-1578859**Investments Other Schedule 2**

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
INVESTMENT IN PLEXUS FUND	AT COST	6,385	69,583
INVESTMENT IN MS HEDGE PREMIER FUND	AT COST	773,296	812,724
INVESTMENT IN CAPITOL PRIV OPP FD	AT COST	414,972	583,679

TY 2020 Other Decreases Schedule

Name: SEBY B JONES FAMILY FOUNDATION
EIN: 31-1578859

Description	Amount
DISALLOWED WASH SALE LOSSES	2,252

TY 2020 Other Expenses Schedule**Name:** SEBY B JONES FAMILY FOUNDATION**EIN:** 31-1578859**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OTHER DEDUCTIONS FROM CAPITOL PRIVATE OPPORTUNITIES II	10,142	0	0	0
OTHER DEDUCTIONS FROM HEDGE PREMIER FUND	2,896	0	0	0
MISCELLANEOUS	32,057	0	0	0
OTHER DEDUCTIONS FROM PLEXUS FUND II, LLC	287	0	0	0
MISCELLANEOUS EXPENSE FROM HEDGE PREMIER FUND	62	0	0	0
MISCELLANEOUS EXPENSE FROM CAPITOL PRIVATE OPPORTUNITIES II	17	0	0	0
OTHER DEDUCTIONS FROM CAPITOL PRIVATE OPPORTUNITIES III	8,665	0	0	0

TY 2020 Other Income Schedule**Name:** SEBY B JONES FAMILY FOUNDATION**EIN:** 31-1578859**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
PARTNERSHIP INCOME IN HEDGE PREMIER	16,589	16,589	16,589
PARTNERSHIP INCOME IN CAPITOL PRIVATE OPPORTUNITIES II FUND	9,816	9,816	9,816
PARTNERSHIP INCOME IN CAPITOL PRIVATE OPPORTUNITIES III FUND	537	537	537
PARTNERSHIP INCOME HEDGE PREMIER FUND	98,255		98,255
PARTNERSHIP INCOME CAPITOL PRIVATE OPPORTUNITIES II	-667		-667
PARTNERSHIP INCOME FROM PLEXUS FUND II	-120		-120
PARTNERSHIP INCOME CAPITOL PRIVATE OPPORTUNITIES III	-563		-563

TY 2020 Other Professional Fees Schedule**Name:** SEBY B JONES FAMILY FOUNDATION**EIN:** 31-1578859

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEES	165,410	165,410	0	0

TY 2020 Taxes Schedule**Name:** SEBY B JONES FAMILY FOUNDATION**EIN:** 31-1578859**Taxes Schedule**

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAXES	18,755	0	0	0
FOREIGN TAXES PAID ON INVESTMENTS	2,379	2,379	0	0