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### Form **.990-PF**

Department of the Treasury Internal Revenue Service

### **Return of Private Foundation**

or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
Note The foundation may be able to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0052

For	cale	ndar year 2010, or tax yea	r beginning		, and ending							
G	Chec	call that apply:	Initial return	1	Initial return of a	Initial return of a former public charity			Final return			
			Amended re	eturn	Address cha	nge		Name change				
Na	me o	f foundation				A Employerident				ication	number	
- 1		Theodore R	and.	Vivia	ın M.	n M.						
		Johnson Sc	holar	ship F	oundation,	Inc.		31-1	613	890	)	
Nu	mber	and street (or P O box number if	f mail is not de	livered to stree	t address)		Room/suite	B Telephone	numb	ег		
		505 S. Fla	gler	Drive			1460	561-0	659	-20	05	
Cit	v or t	own, state, and ZIP code	-					C if exemption a	applica	tion is p	ending, check here	ightharpoons
	•	West Palm	Beach	, FL	33401			D 1 Foreign				
Н	Chec	type of organization	X Section	1 501(c)(3) e	xempt private foundation			2 Foreign or check here	ganızat e and a	tions me	eeting the 85% test emputation	ightharpoons
	⊒ S€	ection 4947(a)(1) nonexem	pt charitable	trust 🔲	Other taxable private foun	dation					tus was terminated	
I F	aır m	arket value of all assets at e	nd of year	J Account	ing method: X Cash	Accr	ual				(A), check here	ightharpoons
(f	rom	Part II, col (c), line 16)		□ 0	ther (specify)			F If the found	lation	is in a	60-month termination	inn
	▶\$		.,047.	(Part I, colu	ımn (d) must be on cast	basis)					(B), check here	
P	art	Analysis of Revenue an	d Expenses	-1 (-1)	(a) Revenue and	(b) Net in	vestment	(c) Adjus	sted ne	et	(d) Disburseme	
		<ul> <li>(The total of amounts in colur necessarily equal the amount</li> </ul>	nns (b), (c), an ts in column (a	o (o) may not	expenses per books	ìnco	ome	inco			for charitable purp (cash basis on	
<b>1</b> 92	1	Contributions, gifts, grant	s, etc., recer	ved				N/Z	A			
	2	Check X if the foundation	n is not required to	attach Sch B								
30	3	Interest on savings and tempo cash investments	orary		858		838.				Statement	<del>t 1</del>
<i>€×3</i>	4	Dividends and interest fro		:	3,214,711	3,21	4,711.				Statement	t 2
	58	Gross rents										
2	1	Net rental income or (loss)					-					
	68	Net gain or (loss) from sale of a	assets not on I	ine 10	3,502,384							,
Revenue	1	Gross sales price for all assets on line 6a	3,502	,384.								
Se Se	7	<del></del>	Part IV, line 2)			3,50	2,384.					
SCANNED Revenue	8	Net short-term capital gail	n				-			R	ECEIVEL	<u> </u>
	9	Income modifications							l r			70
*9-7	108	Gross sales less returns and allowances							2	NIC	V 1 8 2011	18
	1	Less Cost of goods sold							Fi	H	1 × × = 6411	S
	(	Gross profit or (loss)							1			- K
	11	Other income			1,773,944	. 1,73	0,974.			00	Statement	<b>t</b> 3
	12	Total Add lines 1 through	h 11		8,491,897		8,907.					
	13	Compensation of officers, dire	ctors, trustees	, etc	498,995		4,749.				374,2	
	14	Other employee salaries a	nd wages		73,980		3,699.					281.
	15	Pension plans, employee	benefits		118,500	. 2	3,700.				94,8	800.
penses	168	Legal fees										
en G	t	Accounting fees	St	mt 4	34,850	1	7,350.				17,	500.
ĒX	ˈ  ˈ	Other professional fees	St	mt 5	291,653		1,653.					0.
Š	17	Interest			266,279		6,279.					0.
Operating and Administrative Ex	18	Taxes	St	mt 6	68,128	. 7	9,340.					0.
nist Ist	19	Depreciation and depletio	n									
Ξ	20	Occupancy			71,949		0.				71,9	949.
ĕ	21	Travel, conferences, and a	meetings		157,825		9,456.				118,	<u>369.</u>
anc	22	Printing and publications			7,248		0.					248.
ē	23	Other expenses	St	mt 7	1,214,142	. 1,10	<u>1,1</u> 76.				112,3	<u>140.</u>
rati	24	Total operating and adm	inistrative					ľ				
ā	.	expenses. Add lines 13 ti	hrough 23		2,803,549		7,402.				866,	<u>533.</u>
O	25	Contributions, gifts, grant			5,689,781	· <b>↓</b> _					5,689,	<u>781.</u>
	26	Total expenses and disb	ursements.									
_	↓_	Add lines 24 and 25			8,493,330	1,94	7,402.				6,556,3	<u> </u>
	27	Subtract line 26 from line	12:									
	1	Excess of revenue over expen-	ses and disbui	rsements	<1,433	• •	<del></del>	<u> </u>			<del>  </del>	
	1	Net investment income (				6,50	1,505.				<del>  </del>	
নকল	501 57-10	Adjusted net income (if ne			1			N/2	<u> </u>		<u> </u>	
10.0	7 40	I HA For Paperwork R	eduction Ac	t Notice, see	tne instructions.						Form 990-PF	· (2010)

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Johnson Scholarship Foundation, Inc.

31-1613890

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Б	Part II Balance Sheets Attached schedules and amounts in the description	Beginning of year	End	of year	
뜨	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	997,247.	1,861,077	1,861,077.
	3	Accounts receivable ►			
		Less: allowance for doubtful accounts			i
	4	Pledges receivable ▶		<del></del>	
	,	Less: allowance for doubtful accounts			1
	5	Grants receivable			<del> </del>
		Receivables due from officers, directors, trustees, and other	<del></del>		<del></del>
	۳	·			
	,	disqualified persons	<del></del>	·	<del>-</del>
i	′	Other notes and loans receivable			
		Less: allowance for doubtful accounts			<del></del>
ets		Inventories for sale or use		<del>-</del>	<del></del>
Assets		Prepaid expenses and deferred charges		<u> </u>	
•		Investments - U.S. and state government obligations	105 000 100	405 444 005	
1	b	Investments - corporate stock Stmt 8	135,980,198.	135,114,935	. 155,502,970.
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			l
		Less accumulated depreciation			<u></u>
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis			
		Less accumulated depreciation			
	15	Other assets (describe ►			
				<u> </u>	<del>                                     </del>
	16	Total assets (to be completed by all filers)	136.977.445.	136.976.012	. 157,364,047.
_		Accounts payable and accrued expenses			
		Grants payable			┥
w	19	Deferred revenue	-		
Liabilíties		Loans from officers, directors, trustees, and other disqualified persons	-		=
<u> </u>		Mortgages and other notes payable	-	-	1
≝		Other liabilities (describe )			-
					-
	23	Total liabilities (add lines 17 through 22)	0.	0	
		Foundations that follow SFAS 117, check here			7
		and complete lines 24 through 26 and lines 30 and 31			
nces	24	Unrestricted			
JE C	25	Temporarily restricted			1
ä		Permanently restricted		·	-
Net Assets or Fund Bala	-	Foundations that do not follow SFAS 117, check here		<u> </u>	1
Ξ		and complete lines 27 through 31.			
6	27	Capital stock, trust principal, or current funds	136,977,445.	136,976,012	
ets	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0	ᅴ
SS	28	Retained earnings, accumulated income, endowment, or other funds	0.	0	ᅴ
et/	29	Total net assets or fund balances	136,977,445.	136,976,012	긕
Ž	30	Total liet assets of fund balances	130,377,443.	130,370,012	4
	31	Total liabilities and net assets/fund balances	136,977,445.	136 976 012	
_			<del></del>	130,570,012	<u>·</u> l
P	art	Analysis of Changes in Net Assets or Fund B	alances		
<u>1</u>	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30	<u> </u>	
		st agree with end-of-year figure reported on prior year's return)			136,977,445.
	•	r amount from Part I, line 27a			
		r increases not included in line 2 (itemize)		3	
		lines 1, 2, and 3	<del></del>		136,976,012.
		eases not included in line 2 (itemize)		<u> </u>	0.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	-	4 4 4 4 4 4 4 4 4
					Form <b>990-PF</b> (2010)

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Part IV   Capital Gains	and Losses for Tax on I	nvestment	Income					_
							acquired day, yr.)	(d) Date sold (mo., day, yr.)
1a Short-Term Cap	ital Gains from	K-1s			P			
	tal Gains from F				P			
	le of Investment	ts			P			
d Section 1231 L					P			
e Collectibles G	ains from K-1s_				P			
(e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale (							Gain or (loss is (f) minus	(g)
a 776,967.								776,967.
b 4,388,207.		ļ						4,388,207.
c <1,662,960.	<u> </u>	<u> </u>					<	1,662,960.
d 161.		ļ						161.
e 9.	L	1						9.
Complete only for assets showing	ng gain in column (h) and owned by				0		Col. (h) gaın not less tha	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i)	ļ	C	Losses	from col. (	h))
	as 01 12/3 1/09	Over	col. (j), if any		_			776 067
<u>a</u>		<del> </del>				<del> </del>		776,967.
<u>b</u>		·		<del> </del>		. <u> </u>		4,388,207.
C		ļ				<del></del>		1,662,960.
<u>d</u>		<u> </u>				<del></del>		161.
<u>e</u>	L			<del>-</del> -}-	1			9.
2 Capital gain net income or (net ca	apital loss) $ \begin{cases} \text{If gain, also enter} \\ \text{If (loss), enter} \end{cases} $	er in Part I, line 0- in Part I, line	7 7	} 2	<u> </u>			3,502,384.
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5) a	ınd (6):		<b>ͺ</b>				
If gain, also enter in Part I, line 8,							/-	
If (loss), enter -0- in Part I, line 8 Part V   Qualification U	Index Section 4040(a) to	- Dodugod	Tow on Not	3			N/A	<u>.                                    </u>
					nent ir	icome		
(For optional use by domestic private	e foundations subject to the section	4940(a) tax on	net investment in	icome.)				
If section 4940(d)(2) applies, leave t	his part blank.							
NAC ON STANFARD AND A				. 10				Yes X No
Was the foundation liable for the sec			•	1007				Yes A No
If "Yes," the foundation does not qua  1 Enter the appropriate amount in				90			_	
(a)	·	i uctions before	making any emili			<del></del>		(d) -
Base period years	(b) Adjusted qualifying dis	stributions	Net value of no	(c) ncharitable	-use asse	ts	Distrit	oution ratio rided by col. (c))
Calendar year (or tax year beginni 2009	"'9 "'',	36,749.		31,60		I _	(cor. (b) div	·058789
2009		58,232.		58,23				.051558
2007		15,302.		75,40				.043985
2006		78,437.		58,54				.042755
2005		46,471.		42,19			<del></del>	.045336
2003	0,1	10,111		10,1.	73,31	<del></del>	Г	.043330
2 Total of line 1, column (d)						2		.242423
3 Average distribution ratio for the	5-year base period - divide the total	on line 2 by 5	or by the number	of waars		<u> </u>	<del>                                     </del>	1212123
the foundation has been in existe		on line 2 by o,	or by the number	or years		3		.048485
the foundation has been in existe	moo m loos than o yours					\ <u> </u>		
4 Enter the net value of noncharital	ble-use assets for 2010 from Part X,	, line 5				4	14	4,266,335.
5 Multiply line 4 by line 3						5		6,994,753.
5 Multiply line 4 by line 3						3		0,994,733.
6 Enter 1% of net investment incor	me (1% of Part I, line 27b)					6	-	65,015.
7 Add lines 5 and 6						7		7,059,768.
8 Enter qualifying distributions from	m Part XII, line 4					8		6,556,314.
If line 8 is equal to or greater than See the Part VI instructions.	n line 7, check the box in Part VI, line	e 1b, and comp	lete that part usin	g a 1% tax	rate.			
COO IIIO I GILL TI MORI GOROTO.								

Theodore	R.	and	Vivian	М.
		_		_

	m 990-PF (2010) Johnson Scholarship Foundation, Inc. 31-1	613890		Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - s	see instru	uctio	ns)
18	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.			
•	Date of ruling or determination letter. (attach copy of letter if necessary-see instructions)			
t	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1%	13	0,0	30.
	of Part I, line 27b	-		
C	: All other domestic foundations enter 2% 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-)			0.
3	1 <del></del>	13	0,0	30.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	13	0,0	30.
6	Credits/Payments:			
	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 207,717.			
	Exempt foreign organizations - tax withheld at source			
	: Tax paid with application for extension of time to file (Form 8868)  6c 50,000.			
	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d	25	7,7	17.
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached		1,8	30.
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	12	5,8	57.
	Enter the amount of line 10 to be: Credited to 2011 estimated tax ► 125,857. Refunded ► 11			0.
	art VII-A Statements Regarding Activities			
18	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
	any political campaign?	1a		X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	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?	1c		X
C	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ► \$ 0 • (2) On foundation managers. ► \$ 0 •			
•	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ 0 •			1
2	managers. ► \$ 0 .  Has the foundation engaged in any activities that have not previously been reported to the IRS?			х
2	If "Yes," attach a detailed description of the activities	2		<u> </u>
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
Ū	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		x
42	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	X	
	of "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	4b	X	<del> </del>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	<del></del> -	X
	If "Yes," attach the statement required by General Instruction T.			<del> </del>
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	X	ľ
7	Did the foundation have at least \$5,000 in assets at any time during the year?	7	X	$\vdash$
	If "Yes," complete Part II, col. (c), and Part XV			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	FL	-		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	-		
	of each state as required by General Instruction G? If "No," attach explanation	8b	X	
9				T
	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X
		Form QQA	DE	20101

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

b If "Yes," did it have excess business holdings in 2010 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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

Form 4720, to determine if the foundation had excess business holdings in 2010)

had not been removed from jeopardy before the first day of the tax year beginning in 2010?

X

3b

4a

Yes X No

N/A

during the year?

Theodore R. and Vivian M					
Form 990-PF (2010) Johnson Scholarship Foun	dation, Inc.		31-16138	390	Page 6
Part VII-B   Statements Regarding Activities for Which I	Form 4720 May Be	Required (contin	nued)		
5a During the year did the foundation pay or incur any amount to:	10/5/ 110	<u> </u>	[ <del>2</del> ]		1
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	, ,,		es X No	İ	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indir		( <del>1</del>		
any voter registration drive?	_		es X No	ł	
(3) Provide a grant to an individual for travel, study, or other similar purposes		Y	es X No	ŀ	
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section			i	
509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or			ŀ	İ
the prevention of cruelty to children or animals?			es X No		
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify und		ın Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see instru	•		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi				l	
expenditure responsibility for the grant?		I/A	es L. No		
If "Yes," attach the statement required by Regulations section 53 494	5-5(d)				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				1
a personal benefit contract?		Y <sub>0</sub>	es 🗶 No		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Yo	es X No		
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attribu	table to the transaction?		N/A	7b	
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly	у	•	•
Faid Employees, and Contractors					
1 List all officers, directors, trustees, foundation managers and their					
	(L) Title and everence				
(a) Name and address	hours per week devoted	(c) Compensation	employee benefit plans	(e) Exp	oense Lother
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	(e) Exp account allowa	cense t, other inces
(a) Name and address	hours per week devoted to position	(If not paid,	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp account allowa	oense , other inces
	hours per week devoted to position	(If not paid, enter -0-)		(e) Exp account allowa	inces
(a) Name and address  See Statement 9	hours per week devoted to position	(If not paid,	Contributions to employee benefit plans and deterred compensation	(e) Exp account allowa	oense t, other inces
	hours per week devoted to position	(If not paid, enter -0-)		(e) Exp account allowa	inces
	hours per week devoted to position	(If not paid, enter -0-)		(e) Ex account allowa	inces
	hours per week devoted to position	(If not paid, enter -0-)		(e) Ex account allowa	inces
	hours per week devoted to position	(If not paid, enter -0-)		(e) Ex account allowa	inces
	hours per week devoted to position	(If not paid, enter -0-)		(e) Ex account allowa	inces
	hours per week devoted to position	(If not paid, enter -0-)		(e) Ex account allowa	inces
	hours per week devoted to position	(If not paid, enter -0-)		(e) Ex account allowa	inces
	hours per week devoted to position	(If not paid, enter -0-)		(e) Ex account allowa	inces
See Statement 9	to position	(If not paid, enter -0-)		(e) Ex account allowa	inces
	to position	(If not paid, enter -0-)	42,847.	allowa	0.
See Statement 9  2 Compensation of five highest-paid employees (other than those inc	to position  luded on line 1). If none,  (b) Title, and average	(If not paid, enter -0-) 498, 995.	42,847.	(e) Ext	O.
See Statement 9  2 Compensation of five highest-paid employees (other than those inc  (a) Name and address of each employee paid more than \$50,000	luded on line 1). If none,  (b) Title, and average hours per week devoted to position	enter "NONE."  (c) Compensation	42,847.	allowa	O .
2 Compensation of five highest-paid employees (other than those inc.  (a) Name and address of each employee paid more than \$50,000  Sharon Wood - 505 S. Flagler Drive,	luded on line 1). If none,  (b) Title, and average hours per week	enter "NONE."  (c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Ext	O .
See Statement 9  2 Compensation of five highest-paid employees (other than those inc  (a) Name and address of each employee paid more than \$50,000	luded on line 1). If none,  (b) Title, and average hours per week devoted to position	enter "NONE."  (c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Ext	O .
2 Compensation of five highest-paid employees (other than those inc.  (a) Name and address of each employee paid more than \$50,000  Sharon Wood - 505 S. Flagler Drive,	luded on line 1). If none,  (b) Title, and average hours per week devoted to position  Grants Admini	enter "NONE."  (c) Compensation  strator	(d) Contributions to employee benefit plans and deterred compensation	(e) Ext	O .
2 Compensation of five highest-paid employees (other than those inc.  (a) Name and address of each employee paid more than \$50,000  Sharon Wood - 505 S. Flagler Drive,	luded on line 1). If none,  (b) Title, and average hours per week devoted to position  Grants Admini	enter "NONE."  (c) Compensation  strator	(d) Contributions to employee benefit plans and deterred compensation	(e) Ext	O .
2 Compensation of five highest-paid employees (other than those inc.  (a) Name and address of each employee paid more than \$50,000  Sharon Wood - 505 S. Flagler Drive,	luded on line 1). If none,  (b) Title, and average hours per week devoted to position  Grants Admini	enter "NONE."  (c) Compensation  strator	(d) Contributions to employee benefit plans and deterred compensation	(e) Ext	O .
2 Compensation of five highest-paid employees (other than those inc.  (a) Name and address of each employee paid more than \$50,000  Sharon Wood - 505 S. Flagler Drive,	luded on line 1). If none,  (b) Title, and average hours per week devoted to position  Grants Admini	enter "NONE."  (c) Compensation  strator	(d) Contributions to employee benefit plans and deterred compensation	(e) Ext	O .
2 Compensation of five highest-paid employees (other than those inc.  (a) Name and address of each employee paid more than \$50,000  Sharon Wood - 505 S. Flagler Drive,	luded on line 1). If none,  (b) Title, and average hours per week devoted to position  Grants Admini	enter "NONE."  (c) Compensation  strator	(d) Contributions to employee benefit plans and deterred compensation	(e) Ext	O .
2 Compensation of five highest-paid employees (other than those inc.  (a) Name and address of each employee paid more than \$50,000  Sharon Wood - 505 S. Flagler Drive,	luded on line 1). If none,  (b) Title, and average hours per week devoted to position  Grants Admini	enter "NONE."  (c) Compensation  strator	(d) Contributions to employee benefit plans and deterred compensation	(e) Ext	O .
2 Compensation of five highest-paid employees (other than those inc.  (a) Name and address of each employee paid more than \$50,000  Sharon Wood - 505 S. Flagler Drive,	luded on line 1). If none,  (b) Title, and average hours per week devoted to position  Grants Admini	enter "NONE."  (c) Compensation  strator	(d) Contributions to employee benefit plans and deterred compensation	(e) Ext	O .

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

Form **990-PF** (2010)

0.

N/A

Total, Add lines 1 through 3

All other program-related investments. See instructions.

Р	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndation	s, see instructions.)
ī	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	Т	
a	Average monthly fair market value of securities	1a	144,243,081.
	Average of monthly cash balances	1b	2,220,203.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	146,463,284.
е	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	146,463,284.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	2,196,949.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	144,266,335.
6	Minimum investment return Enter 5% of line 5	6	7,213,317.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certaii	
1	Minimum investment return from Part X, line 6	1	7,213,317.
2a	Tax on investment income for 2010 from Part VI, line 5 Income tax for 2010. (This does not include the tax from Part VI.)  2a 130,030. 2b 6,265.		
b	Income tax for 2010. (This does not include the tax from Part VI.)  2b 6, 265.		
C	Add lines 2a and 2b	2c	136,295.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	7,077,022.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	7,077,022.
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	7,077,022.
Ρ	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		<del> </del>
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	6,556,314.
b	Program-related investments - total from Part IX-B	1b	6,556,314.
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	6,556,314.
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	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	6,556,314.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q 4940(e) reduction of tax in those years.	ualifies	for the section

Form 990-PF (2010)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,		- · - · · · · · · · · · · · · · · · · ·		
line 7				7,077,022.
2 Undistributed income, if any, as of the end of 2010				<u> </u>
a Enter amount for 2009 only			6,461,471.	
<b>b</b> Total for prior years			<u> </u>	
,		0.		
3 Excess distributions carryover, if any, to 2010.				
a From 2005				
<b>b</b> From 2006				
<b>c</b> From 2007				
<b>d</b> From 2008				
e From 2009			i	
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2010 from				
Part XII, line 4: ▶\$ 6,556,314.				
a Applied to 2009, but not more than line 2a			6,461,471.	
<b>b</b> Applied to undistributed income of prior			· · · · · · · · · · · · · · · · · · ·	
years (Election required - see instructions)		0.1		
c Treated as distributions out of corpus				· · · · · · · · · · · · · · · · · · ·
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount				94,843.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2010	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))	_			
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
<b>b</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				<del></del>
amount - see instructions		0.		
e Undistributed income for 2009. Subtract line		-		
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010. Subtract	****		_	
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				6,982,179.
7 Amounts treated as distributions out of				•
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2011.				<del></del>
Subtract lines 7 and 8 from line 6a	0.			
O Analysis of line 9				<del></del>
a Excess from 2006				
<b>b</b> Excess from 2007				
c Excess from 2008				
d Excess from 2009				
e Excess from 2010				

Theodore R. and Vivian M.
Johnson Scholarship Foundation. Inc.

TOTHISON	Scholarshi	p roundation	on, inc.		13890 Page 10
Part XIV Private Operating F			I-A, question 9)	N/A	
1 a If the foundation has received a ruling o					
foundation, and the ruling is effective fo	•	•	▶		
<b>b</b> Check box to indicate whether the found		ng foundation described		4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		<u> </u>
income from Part I or the minimum	(a) 2010	<b>(b)</b> 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for					
each year listed					
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not				i	
used directly for active conduct of					
exempt activities				ļ	
<ul> <li>Qualifying distributions made directly</li> </ul>	i I				
for active conduct of exempt activities.				ı	
Subtract line 2d from line 2c 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:					
<ol> <li>Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)</li> </ol>					
(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		<u></u>			
(4) Gross investment income		<u> </u>			
Part XV Supplementary Info			if the foundation	had \$5,000 or m	ore in assets
at any time during t	<del></del>	mstructions.)	· · · · · · · · · · · · · · · · · · ·		
Information Regarding Foundation     List any managers of the foundation whyear (but only if they have contributed means to the second se	o have contributed more		ributions received by the	foundation before the clo	se of any tax
None		_			
b List any managers of the foundation who other entity) of which the foundation has	o own 10% or more of th s a 10% or greater intere:	e stock of a corporation st.	(or an equally large portio	on of the ownership of a p	artnership or
None					
2 Information Regarding Contribution Check here  If the foundation of the foundation makes gifts, grants, etc.	nly makes contributions	to preselected charitable	organizations and does n		
a The name, address, and telephone num	ber of the person to who	n applications should be	addressed:		
See Statement 10					
b The form in which applications should b	e submitted and informat	tion and materials they s	nould include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographica	al areas, charitable fields,	kinds of institutions, or o	other factors.	· <del>-</del>

Theodore R. and Vivian M.

Supplementary Information (continued)

Johnson Scholarship Foundation, Inc.

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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 Recipient Foundation status of recipient Purpose of grant or contribution Amount Name and address (home or business) a Paid during the year See Statement 11  $\triangleright$  3a 5,689,781. Total **b** Approved for future payment None Total

Form 990-PF (2010)

Part XV

#### **Analysis of Income-Producing Activities**

nter gross amounts unless otherwise indicated		business income		ed by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code		code	Amount	
å	<del></del>		<del> </del>		
D	<del></del>	·	$\vdash$		
<u> </u>	<b> </b>		$\vdash$		
d	<b>——</b>	<del></del>	-		·
e			┼╌┼		
g Fees and contracts from government agencies		<del></del>	$\vdash$		
2 Membership dues and assessments	<del>                                     </del>		<del>                                     </del>		<del></del>
3 Interest on savings and temporary cash					
investments	1		14	858.	
4 Dividends and interest from securities	<u> </u>	<del></del> -	14	3,214,711.	<del> </del>
5 Net rental income or (loss) from real estate.					<u>.</u>
a Debt-financed property					<del></del>
b Not debt-financed property					
6 Net rental income or (loss) from personal		-			
property					
7 Other investment income	900099	42,970.	15	1,730,974.	
8 Gain or (loss) from sales of assets other					
than inventory			18	3,502,384.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a					
b			igspace		
c	<u> </u>		$\longmapsto$		
d	$\vdash$	<del></del>	<b>├</b> ──┼		
e	<del></del>	42,970.	<del>                                     </del>	0 440 007	
2 Subtotal. Add columns (b), (d), and (e)	<u> </u>	42,970.		8,448,927.	8,491,897
3 Total Add line 12, columns (b), (d), and (e)				13	8,491,897
See worksheet in line 13 instructions to verify calculations )					<del></del>
Part XVI-B Relationship of Activities to	the Acco	mplishment of Ex	empt	Purposes	
Line No Explain below how each activity for which incon	no io raportad in	column (a) of Dart V/I A	oontribus	tod (magriculty to the cooper	lighment of

.iiie No	the foundation's exempt purposes (other than by providing funds for such purposes).
	Not applicable
	<u>L</u>

the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of

Page 13

Yes No

0) Johnson Scholarship Foundation, Inc. 31-1613890 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Part XXVII **Exempt Organizations** 

a transfers	s trom the reporting tound	ation to a noncharita	Die exempt of	rganization of:			<u> </u>	
(1) Cash	1						1a(1)	X
(2) Othe	r assets						1a(2)	X
<b>b</b> Other trai								
(1) Sales	s of assets to a noncharita	ible exempt organiza	tion				1b(1)	Х
	hases of assets from a no						1b(2)	X
. ,	al of facilities, equipment,	•	<b>g</b> u <b>.</b>				1b(3)	X
	ibursement arrangements						1b(4)	X
	is or loan guarantees	1					1b(5)	X
	<del>-</del>	ambarahin ar fundrai	ouna colicitatio	200				X
	ormance of services or me	· ·	-				1b(6)	X
-	of facilities, equipment, ma	= :			humus about the form	morket value of the goods	1c	<u> </u>
	•	•	-	edule. Column (b) should a				
				ed less than fair market val	ue in any transactio	n or snaring arrangement,	SHOW IN	
	d) the value of the goods,				(4) =			
a) Line no	(b) Amount involved	(c) Name of		e exempt organization	(0) Description	n of transfers, transactions, and	sharing arrangem	1ents
			N/A					
		_						
_								
		<del> </del>						
	<del></del>	<del></del>					<del></del>	
		<del></del>						
		<del>-</del>				<del></del>		
					<del></del>			
_[								
		T		<u> </u>				
	· · · · · · · · · · · · · · · · · · ·							
2a Is the fou	ndation directly or indirect	tly affiliated with or r	elated to one	or more tax-exempt organ	uzations described			
	501(c) of the Code (other	-			IZELIONO GOOGI IDOG	Г	Yes 🔀	K No
		* *	(3)) 01 111 366	uun 327 '		L	165	2 140
b ii res, c	omplete the following sch (a) Name of org			(b) Type of organization	<del></del>	(c) Description of relations	hin	
	<u>``</u>	janization		(b) Type of Organization	<del> </del>	(c) Description of relations	111h	
	<u> </u>				<u></u>			
				<u> </u>				
		<del></del>			<u> </u>			
				ling accompanying schedules ar			elief, it is true, corr	ect,
Sign and	complete Declaration of prepa	erer (other than taxpayer	or fiduciary) is b	ased on all information of which	preparer has any know	ledge		
Here	12H Da	auel.		Nov 4	1.2011	hearner		
	Signature of officer or tru					Title		
			Drongratic o	Date	Date	Check If PTIN		
	Print/Type preparer's na	אוווג	Preparer's s	ywaluic / //	Date	self- employed		
D - 1-4	Isabella	_	$\mid \not V \sim V$	m And		sen- embiosed		
Paid -	LunsfordCP			/ /	10/03/11			
Preparer	Firm's name ► Tem	pleton &	Compan	y, L <b>LP</b>		Firm's EIN		
Use Only						<u> </u>		
	Firm's address ▶ 22	2 Lakevie	w Aven	ue, Suite 12	200			
		st Palm B			-	Phone no. 561-	798-998	38
	, <u> </u>						rm 990-PF	

<u> </u>							
Form 990-PF Interest on Savi	ngs and	Tempor	cary C	ash :	Investments	Statement	1
Source						Amount	
SunTrust Bank Tax-Exempt Interest Income fr	om K-1s				•		38. 20.
Total to Form 990-PF, Part I,	line 3	, Colum	nn A		-	8	58.
Form 990-PF Dividend	s and I	nterest	from	Seci	urities	Statement	2
Source	G	ross An	nount		pital Gains Dividends	Column (A Amount	)
Dividend Income from K-1s Interest Income from K-1s			1,356. 0,355.		0.	2,604,3 610,3	
Total to Fm 990-PF, Part I, 1	n 4	3,214	711.		0.	3,214,7	11.
Form 990-PF	Othe	er Inco	ome			Statement	3
Description			(a) evenue Book		(b) Net Invest- ment Income	(c) Adjuste Net Inco	
Other Investment Income from Royalty Income from K-1's Cost Depletion from K-1's Ordinary Income from K-1's	K-1's	1	,273,6 637,8 <179,9	845.	637,845	• •>	
Total to Form 990-PF, Part I,	line 1	1 1	.,773,	944.	1,730,974		
Form 990-PF	Accou	unting	Fees			Statement	4
Description	(a) Expense Per Boo		(b) et Inve		(c) Adjusted Net Incom		
Templeton & Company, LLP	34,8	350.	17	,350.	•	17,5	00.
	34,8	——— — 350.	17	,350.	<u> </u>	17,5	00.
				_	_		

Form 990-PF O	ther Profes	sional Fees	S	tatement 5
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Other Professional Fees	291,653.	291,653.		0.
To Form 990-PF, Pg 1, ln 16c	291,653.	291,653.		0.
Form 990-PF	Tax	es	S	tatement 6
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
State Excise Taxes Foreign Taxes	<11,212. 79,340.			0.
To Form 990-PF, Pg 1, ln 18 =	68,128.	79,340.		0.
Form 990-PF	Other E	xpenses	S	tatement 7
Description	(a) Expenses Per Books		(c) Adjusted Net Income	(d) Charitable Purposes
Grant Admin Fees	112,140.	0.		112,140.
Portfolio Deductions from K-1's Other Deductions from K-1's Non-Deductible Expenses from	906,497. 194,679.			0. 0.
K-1's	826.	0.		0.
To Form 990-PF, Pg 1, 1n 23	1,214,142.	1,101,176.		112,140.

Form 990-PF	Corporate Stock		Stat	ement 8
Description		Book Valu		Market alue
United States Equity Non-United States Equity Alternative Marketable Equity En Private Equity Entities and Vent Fixed Income Other		17,647,0 39,860,3 18,394,2 15,542,3 23,053,3 20,617,6	55. 35 44. 21 01. 19 43. 32	,286,147, ,892,705, ,118,593, ,843,680, ,339,937,
Total to Form 990-PF, Part II, 1	ine 10b =	135,114,9	35. 155	,502,970
	st of Officers, Did d Foundation Manag		Stat	ement S
Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Contrib	
Richard Krause 505 S. Flagler Drive, Ste. 1460 West Palm Beach, FL 33401	Treasurer/CFO 28.00	133,975.	14,877.	0.
R. Malcolm Macleod 505 S. Flagler Drive, Ste. 1460 West Palm Beach, FL 33401	Chairman/CEO 32.00	243,084.	27,970.	0.
Diane N. Johnson 505 S. Flagler Drive, Ste. 1460 West Palm Beach, FL 33401	Vice President 3.00	10,000.	0.	0.
Hugh Brown 505 S. Flagler Drive, Ste. 1460 West Palm Beach, FL 33401	Secretary 4.00	25,484.	0.	0.
Sherry Salway Black 505 S. Flagler Drive, Ste. 1460 West Palm Beach, FL 33401	Director 2.00	25,484.	0.	0.
David Rinker 505 S. Flagler Drive, Ste. 1460 West Palm Beach, FL 33401	Director 2.00	10,000.	0.	0.

Theodore R. and Vivian M. Johns	on Schola		31-	1613890
David Blaikie 505 S. Flagler Drive, Ste. 1460 West Palm Beach, FL 33401	Director 2.00	25,484.	0.	0.
I. King Jordan 505 S. Flagler Drive, Ste. 1460 West Palm Beach, FL 33401	Director 2.00	25,484.	0.	0.
Totals included on 990-PF, Page 6	, Part VIII	498,995.	42,847.	0.

Form 990-PF Grant Application Submission Information Statement 10
Part XV, Lines 2a through 2d

Name and Address of Person to Whom Applications Should be Submitted

Ms. Sharon Wood 505 S. Flagler Drive, Ste. 1460 West Palm Beach, FL 33401

Telephone Number

561-659-2005

Form and Content of Applications

Typewritten letters detailing the educational purpose the funds will be used in, the ultimate beneficiaries of the funds, etc.

Any Submission Deadlines

None

Restrictions and Limitations on Awards

Funds will be provided to institutions for educational-related purposes.

	and Contributions During the Year	Statement 11
Recipient Name and Address	Recipient Relationship and Purpose of Grant	Recipient Status Amount
Albany Education Foundation 1320 Solano Avenue, Ste. 203 Albany, CA 94706	Educational Grant	1,000.
Berklee College of Music 1140 Boylston Street Boston, MA 02215	Educational Grant	50,000.
Blackfeet Community College 504 SE Boundry Street Browning, MT 59417	Educational Grant	48,722.
CAPE Fund L.P. 759 Square-Victoria Montreal, CANADA	Mission Related Grant	131,345.
Chair Scholars Foundation 16101 Carencia Lane Odessa, FL 33556-3278	Educational Grant	12,000.
Clarke School for the Deaf Round Hill Road Northampton, MA 01060	Educational Grant	108,390.
College of Menominee Nation P.O. Box 1179 Keshena, WI 54135	Educational Grant	125,000.
Council on Foundations 2121 Crystal Drive, Ste. 700 Arlington, VA 22202	Educational Grant	5,000.

Theodore R. and Vivian M. Johns	son Schola	31-1613890
Cumberland Health Care Fdn. 19428 Highway 2 RR6 Amherst, Nova Scotia, CANADA	Educational Grant	15,000.
Dalhousie University 6385 South Street Halifax, Nova Scotia, CANADA	Educational Grant	237,402.
East Stroudsberg Area School District 50 Vine Street East Stroudsberg, PA 18301	Educational Grant	100.
East Stroudsberg University Foundation 200 Prospect Street East Stroudsberg, PA 18301	Educational Grant	50.
First People's Fund P.O. Box 2977 Rapid City, SD 57709	Educational Grant	13,250.
Flagler College P.O. Box 1027 St Augustine, FL 32085-1027	Educational Grant	50.
Florida State University System Tallahassee, FL 32306	Educational Grant	500,000.
Fort Peck Community College 605 Indian Avenue Poplar, MT 59255	Educational Grant	7,000.
Friends of the Beau School for the Deaf, Inc. P.O. Box 8625 Silver Springs, MD 20907-8625	Educational Grant	37,500.
Gallaudet University 800 Florida Avenue, NE Washington, DC 20002	Educational Grant	460,000.

Theodore R. and Vivian M. Johns	on Schola		31-1613890
Gonzaga University 502 East Boone Avenue Spokane, WA 992580102	Educational	Grant	130,000.
Harvard University Massachusetts Hall Cambridge, MA 02138	Educational	Grant	1,000.
Heritage University 3240 Fort Road Toppenish, WA 98948	Educational	Grant	50,000.
Institute of American Indian Art 83 Avan Nupo Road Santa Fe, NM 87508	Educational	Grant	30,000.
Landmark East School 708 Main Street Wolfville, Nova Scotia, CANADA	Educational	Grant	50,000.
Little Big Horn College 8645 S. Weaver Drive Crow Agency, MT 59022	Educational	Grant	50,911.
Mesa Community College 1833 West Southern Mesa, AZ 85202	Educational	Grant	20,000.
Mitchell College 437 Pequot Avenue New London, CT 06320	Educational	Grant	75,000.
Mocean Dance Society P.O. Box 783 Halifax, Nova Scotia, CANADA	Educational	Grant	5,000.
Mount Saint Vincent University 166 Bedford Highway Halifax, Nova Scotia, CANADA	Educational	Grant	5,000.

Theodore R. and Vivian M. Johns	on Schola		31-1613890
National Congress of American Indians 1516 P Street NW Washington, DC 20005	Educational	Grant	250.
National Indian Child Welfare Association 5100 S.W. Macadam Ave. #300 Portland, OR 97239	Educational	Grant	1,250.
Northeastern State University 812 N. Adar Ave. Tahlequah, OK 74464	Educational	Grant	62,500.
Northern Arizona University Foundation, Inc. PO Box 4094, Bldg. 10, Old Main Flagstaff, AZ 86011	Educational	Grant	63,626.
Oglala Lakota College 490 Piya Wiconi Road Kyle, ND	Educational	Grant	100.
Paden City Foundation, Inc. P.O. Box 233 Paden City, WV 26159	Educational	Grant	150.
Palm Beach Atlantic University 1301 S. Olive Avenue West Palm Beach, FL 33401	Educational	Grant	425,000.
Partners in the Horn of Africa 9333-37 Avenue NW Edmonton, Alberta, CANADA T6E 5N4	Educational	Grant	10,000.
Project Eye to Eye 30 Tompkins Place Brooklyn, NY 11231	Educational	Grant	25,000.
Providence-St. Mel School 119 South Central Park Avenue Chicago, IL 60624	Educational	Grant	15,000.

Theodore R. and Vivian M. Johns	on Schola		31-1613890
Rochester Institute of Technology - Nat'l Technical Institute for the Deaf - 52 Lomb Memorial Drive Rochester, NY 14623	Educational	Grant	27,978.
Scholarship America 4960 Viking Drive, Ste. 110 Edina, MN 55435-5314	Educational	Grant	1000000.
Sinte Gleska University 101 Antelope Lake Circle Mission, SD 57555	Educational	Grant	68,750.
Stetson University 421 N. Woodland Blvd. DeLand, FL 32723	Educational	Grant	22,500.
Take Stock in Children 8600 NW 36th Street, Ste. 500 Miami, FL 33166	Educational	Grant	600,000.
The Dr. & Mrs. H. E. Christie Community Foundation P.O. Box 986 Amherst, Nova Scotia, CANADA	Educational	Grant	22,500.
The Florida School for the Deaf & the Blind 207 N. San Marco Avenue St Augustine, FL 32084	Educational	Grant	460,000.
The Hopi Tribe Education Endowment Fund P.O. Box 605 Kykotsmovi, AZ 86039	Educational	Grant	250.
The King's Academy 8401 Belvedere Road West Palm Beach, FL 33411	Educational	Grant	7,500.
The School District of Palm Beach County 1790 N.W. Spanish River Blvd. Boca Raton, FL 33431	Educational	Grant	32,457.

Theodore R. and Vivian M. Johns	on Schola		31-1613890
Transcen Inc. 451 Hugerford Drive, Ste. 700 Rockville, MD 20850	Educational G	Grant	75,000.
Turtle Mountain Community College P.O. Box 340 Belcourt, ND 58316	Educational G	Frant	135,000.
United Tribes Technical College 3315 University Drive Bismarck, ND 58504	Educational G	Grant	116,250.
University of New Mexico 200 College Road Gallup, NM 87301	Educational G	Frant	30,000.
University of South Florida 4202 East Fowler Ave, ADM 241 Tampa, FL 33620	Educational G	Frant	120,000.
University of Washington 022 Odegaard Seattle, WA 98195-5502	Educational G	Grant	50,000.
University of West Florida 11000 University Parkway Pensacola, FL 32514	Educational G	Frant	150,000.
Total to Form 990-PF, Part XV, li	ne 3a		5,689,781.

Form **8868** 

· 11.3

'(Rev. January 2011)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

Form 8868 (Rev. 1-2011)

•	u are filing for an Automatic 3-Month Extension, complet	_				X
	u are filing for an Additional (Not Automatic) 3-Month Ex					
	complete Part II unless you have already been granted a					
	onle filing (e-file). You can electronically file Form 8868 if y					
	d to file Form 990-T), or an additional (not automatic) 3-mor					
	to file any of the forms listed in Part I or Part II with the exc					
	al Benefit Contracts, which must be sent to the IRS in pap		(see instructions). For more details on th	ne elec	tronic filing of this	form,
	ww.irs.gov/efile and click on e-file for Charities & Nonprofits				<del></del>	
Part				<del></del>	- <del></del>	
•	oration required to file Form 990-T and requesting an auton	natic 6-mo	onth extension - check this box and com	plete		
Partic	• • • • • • • • • • • • • • • • • • • •					· Ш
	er corporations (including 1120-C filers), partnerships, REM ncome tax retums.	ius, and t	rusts must use Form 7004 to request an	extens	SION OF TIME	
Туре о				Empl	oyer identification	number
print	Theodore R. and Vivian M.	_				
File by th	Johnson Scholarship Foundat	cion,	Inc.	3:	<u>1-1613890</u>	
due date	for Number, street, and room or suite no. If a P.O. box, so		tions.			
filing you return Se	Be Jos D. Lindier Dille.				· · · · · · · · · · · · · · · · · · ·	
Instructio		reign add	lress, see instructions.			
	West Palm Beach, FL 33401					
Enter t	he Return code for the return that this application is for (file	a separa	te application for each return)			0 4
		I	T		<del></del>	Т=
Application Return Application						Return
Is For Code Is For				<del></del>	Code	
Form 9		01	Form 990-T (corporation)			07
Form 9		02	Form 1041-A			08
	990-EZ	03	Form 4720			09
	990-PF	04	Form 5227 Form 6069		· · · · · · · · · · · · · · · · · · ·	10
	990-T (sec. 401(a) or 408(a) trust)	05_ 06	Form 8870		<del></del>	11 12
rorm s	990-T (trust other than above)		- 505 S. Flagler Dri	370	Sto 1460	
• The	books are in the care of <b>West Palm Beach</b>		<del>-</del>	ve,	Dre. 140(	
Tele	ephone No. ► <u>561-659-2005</u>		FAX No. 🕨		···	
● If th	ne organization does not have an office or place of business	s in the Ur	nted States, check this box			· 🔲
<ul><li>If the</li></ul>	nis is for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN) If thi	s is for	the whole group, o	check this
box 🕨			ch a list with the names and EINs of all		ers the extension is	for.
1	I request an automatic 3-month (6 months for a corporation					
		t organiza	tion return for the organization named a	bove.	The extension	
	is for the organization's return for:					
	X calendar year 2010 or					
	tax year beginning	, an	id ending		<b>-</b> ·	
_	If the tay year entered in line 1 is for loss than 10 months.	book maa	on: Initial return Fina	ıl returr	_	
2	If the tax year entered in line 1 is for less than 12 months, c	HECK I Cas	on ritia	li i Etuii	1	
	Change in accounting period					
	If this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069 e	enter the tentative tax less any			
Ja	nonrefundable credits. See instructions.	o, 0005, c	and the terraine tax, lose they	3a	s 97	7,717.
b	If this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and		<del> </del>	, <u>, , 4 , 6</u>
	estimated tax payments made. Include any prior year over			зь	s 47	7,717.
С	Balance due, Subtract line 3b from line 3a. Include your pa				<u> </u>	,
•	by using EFTPS (Electronic Federal Tax Payment System).			3c	s 50	0,000.
Cauti	on. If you are going to make an electronic fund withdrawal					
	The state of the s					

LHA For Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 1-2011)					Page 2
• If you are filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II and check this b	ox		X
Note. Only complete Part II if you have already been granted an a			Form 88	368.	
If you are filing for an Automatic 3-Month Extension, complete					
Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the original (no c	opies ne	eded).	
Name of exempt organization			Emplo	yer identification	number
Type or Theodore R. and Vivian M.					
Johnson Scholarship Foundat:	ion, :	Inc.	31	<u>-1613890</u>	
File by the extended Number, street, and room or suite no. If a P.O. box, so		tions.			
due date for filling your 505 S. Flagler Drive, No. 14			_		
return. See City, town or post office, state, and ZIP code. For a fo	oreign add	ress, see instructions.			
West Palm Beach, FL 33401					
Enter the Return code for the return that this application is for (file	e a separa	te application for each return)			0 4
				·	
Application	Return	Application			Return
ls For	Code	Is For	diales es	Code	
Form 990	01				
Form 990-BL	02	Form 1041-A			08
Form 990-EZ	03	Form 4720			09
Form 990-PF	04	Form 5227			10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069		<del></del>	11
Form 990-T (trust other than above)	06	Form 8870		. <u></u>	12
STOP! Do not complete Part II if you were not already granted					
		- 505 S. Flagler Dr:	.ve,	Ste. 1460	-
<ul> <li>The books are in the care of ► West Palm Beacl</li> <li>Telephone No. ► 561-659-2005</li> </ul>	п, ғь		<del></del>		
<ul> <li>If the organization does not have an office or place of business</li> </ul>	n in tha l le	FAX No.			
<ul> <li>If this is for a Group Return, enter the organization's four digit</li> </ul>					
box . If it is for part of the group, check this box					
		ber 15, 2011.	rriembe	rs the extension is	tor.
5 For calendar year 2010, or other tax year beginning	иолен	, and ending			
6 If the tax year entered in line 5 is for less than 12 months, or	hock mas		Final ref	tum	<del></del>
Change in accounting period	niock icas	on mida return	i i i iai i <del>o</del> i	tuiii	
7 State in detail why you need the extension					
Information necessary to file	a co	mplete return is un	ava i 1	able at t	hia
time.	<del>u 00.</del>	mprove a court in the		tabac ac c	1110
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any			
nonrefundable credits. See instructions.	·	,	8a	s 124	,227.
b If this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated			<u>,</u>
tax payments made. Include any prior year overpayment a	-				
previously with Form 8868.		•	8b	s 257	,717.
c Balance due. Subtract line 8b from line 8a. Include your pa	ayment wr	th this form, if required, by using			
EFTPS (Electronic Federal Tax Payment System). See instr	ructions.		8c	\$	_ 0.
Sign	ature ar	nd Verification			
Under penalties of perjury, I declare that I have examined this form, include	ding accom	panying schedules and statements, and to t	ne best of	my knowledge and b	elief,
it is true, correct, and complete, and that I am authorized to prepare this f	orm.			$\mathcal{A}_{-}$ $\mathcal{A}_{-}$	
Signature Title	CPA		Date	► 8/12/11	<u> </u>
* / J				Form 8868 (Re	av 1.2011\