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Form 990-PF

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

OMB No 1545-0052

2010

Department of the Treasury Internal Revenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements 2011 For calendar year 2010, or tax year beginning 10/01 , 2010, and ending 9/30 Final return Initial Return of a former public charity G Check all that apply Initial return Amended return Address change Name change Employer identification number THE JOSEPH AND JUDITH H 20-8086588 JOHNSON FAMILY FOUNDATION Telephone number (see the instructions) R 4441 ST. ANDREWS DRIVE (209) 951-1494 STOCKTON, CA 95219 If exemption application is pending, check here D 1 Foreign organizations, check here 2 Foreign organizations meeting the 85% test, check X Section 501(c)(3) exempt private foundation Check type of organization here and attach computation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated J Accounting method X Cash Fair market value of all assets at end of year under section 507(b)(1)(A), check here (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ► S 87,953 (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and (b) Net investment (c) Adjusted net (d) Disbursements (a) Revenue and Expenses (The total of amounts in expenses per books income for charitable income columns (b), (c), and (d) may not neces sarily equal the amounts in column (a) purposes (cash basis only) (see the instructions)) 20,792 Contributions, gifts, grants, etc, received (att sch) if the foundn is not reg to att Sch B Interest on savings and temporary cash investments Dividends and interest from securities 5a Gross rents b Net rental income or (loss) REVENU 6a Net gain/(loss) from sale of assets not on line 10. 8 **b** Gross sales price for all assets on line 6a 8 E Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns and allowances **b** Less Cost of goods sold c Gross profit/(loss) (att sch) 11 Other income (attach schedule) 0 12 Total. Add lines 1 through 11 20,792 0 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) 2,344. **b** Accounting fees (attach sch) SEE ST 1 c Other prof fees (attach sch) 17 Interest 18 Taxes (attach schedule)(see instr.) Depreciation (attach 19 sch) and depletion 20 Occupancy 21 Travel, conferences, and meetings Printing and publications 23 Other expenses (attach schedule) SEE STATEMENT 2,084 24 Total operating and administrative expenses. Add lines 13 through 23 4,428 5,300. Contributions, gifts, grants paid PART XV <u>5,300</u> Total expenses and disbursements. 5,300. 0 0 9,728 Add lines 24 and 25 ورج Subtract line 26 from line 12: a Excess of revenue over expenses 11,064 and disbursements 0. **b** Net investment income (if negative, enter -0) C Adjusted net income (if negative, enter -0-)

Par	1	Balance Sheets	column should be for end of-year amounts only	Beginning of year	End	or year
	• •		(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash — non-interest-	bearing	528.	1,665	. 1,665.
	2	Savings and tempora	ary cash investments			
	3	Accounts receivable	•			
		Less allowance for o	doubtful accounts -	The second secon		and the second s
	4	Pledges receivable		- Note annual and the second		3 Marin
		Less: allowance for o	doubtful accounts			A SAME AND A SAME
	5	Grants receivable				
	6	Receivables due from office	ers, directors, trustees, and other			
		disqualified persons (attac	h schedule) (see the instructions)			
۸	7	Other notes and loans rece	` '		- lan lataran ma	1
A S E T		Less allowance for d	loubtful accounts -			
S	8	Inventories for sale of				
Ť	9	Prepaid expenses an	d deferred charges			
S	10:	Investments – US a obligations (attach so	and state government chedule)			
	1	b Investments — corporate s	tock (attach schedule)			
	'	c Investments — corporate b	onds (attach schedule)			
	11	Investments – land, equipment basis	buildings, and			
		Less accumulated deprecta (attach schedule)	▶			
	12	Investments - mortg	age loans.			
	13	Investments - other	(attach schedule)			
	14	Land, buildings, and ed	quipment basis ►		***	¥ ,, <u>;</u>
		Less: accumulated deprecia (attach schedule)	ation •			
	15		pe►SEE STATEMENT 3)	76,361.	86,288	. 86,288.
	16	Total assets (to be on see instructions Also	ompleted by all filers — o, see page 1, item I)	76,889.	87,953	
Ļ	17	Accounts payable and	d accrued expenses			2 8 3
Å	18	Grants payable				
В	19	Deferred revenue				
Ĺ	20	Loans from officers, directo	ors, trustees, & other disqualified persons			」 . `
Ļ	21	Mortgages and other notes				
<u>i</u>	22	Other liabilities (descri	be •)			
E S	23	Total liabilities (add	lines 17 through 22)	0.1	0	
		Foundations that foll	ow SFAS 117, check here X4 through 26 and lines 30 and 31.		<u> </u>	
N F	24	Unrestricted	- through 20 and mics 30 and 31.	76,889.	87,953	
Ë U	25	Temporarily restricted	1		······································	7 .
ם	26	Permanently restricte	ed			
A B S A L T		Foundations that do and complete lines 2	not follow SFAS 117, check here Through 31.			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
ELTA	27		rincipal, or current funds			,*
SNC	28		or land, building, and equipment fund		. 	
O E R S	29		ated income, endowment, or other funds			→ , , ,
R S	30		and balances (see the instructions)	76,889.	87,953	
	31	(see the instructions)	et assets/fund balances	76,889.	87,953	
Par	t III	Analysis of Chang	ges in Net Assets or Fund Balanc		. , , , , , , , , , , , , , , , , , , ,	
	Total	net assets or fund ba	lances at beginning of year - Part II, coli			76,000
2			on prior year's return)		1	76,889.
2		r amount from Part I, I			2	11,064.
3		increases not included in line	e z (itemize)		3	07.050
4		lines 1, 2, and 3	tamiza) 🕨		4	87,953.
5		ases not included in line 2 (it			5	07.053
6	rold	THE CASSELS OF TURIO DA	lances at end of year (line 4 minus line 5)	, — marcii, col umn (b), l	ine 30 6	87,953.

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shares MLC Company)				(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a N/A			D — Donation		
b					
c					
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sal		(h) Gain or (e) plus (f) m	
a					
b					····
c					
d	 			·	
e Consolida esta for a sector plan	(h) and a column (h)				
(i) Fair Market Value	wing gain in column (h) and owned by (j) Adjusted basis	(k) Excess of column		l) Gains (Coli) A) Gains minus column	
as of 12/31/69	as of 12/31/69	over column (j), if a	1.7	an -0-) or Losses (fr	
a					
<u>b</u>		·			
	 				
e d					
				T	
2 Capital gain net income or (ne		ter -0- in Part I, line 7	2		
If gain, also enter in Part I, Iir	(loss) as defined in sections 1222(5) ne 8, column (c) (see the instructions	· · · · · · · · · · · · · · · · · · ·			
in Part I, line 8	40.404.54		3	<u> </u>	
	er Section 4940(e) for Reduce to the section of the			N/A	
	this part blank ection 4942 tax on the distributable an alify under section 4940(e) Do not co		e period?	Yes	No
1 Enter the appropriate amount	in each column for each year, see the	e instructions before makin	g any entries		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use ass	sets (col	(d) Distribution umn (b) divided	
2009					
2008					····
2007					
2006	 				
2005				, , , , , , , , , , , , , , , , , , , ,	
2 Total of line 1, column (d)			2		
	the 5-year base period – divide the to on has been in existence if less than !		3		
4 Enter the net value of noncha	ritable-use assets for 2010 from Part	X, line 5	4		
5 Multiply line 4 by line 3			5		
6 Enter 1% of net investment in	come (1% of Part I, line 27b)		6		
7 Add lines 5 and 6			7		
8 Enter qualifying distributions f	from Part XII, line 4		8		
If line 8 is equal to or greater Part VI instructions	than line 7, check the box in Part VI,	line 1b, and complete that	part using a 1%	tax rate See th	ne
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Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - sec	the instr	uctions))	
1 a	Exempt operating foundations described in section 4940(d)(2), check here				
	Date of ruling or determination letter: (attach copy of letter if necessary — see instr.)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V,	1			0.
	check here ► and enter 1% 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, column (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable	_			
_	foundations only Others enter -0-)	2			$\frac{0}{2}$
3	Add lines 1 and 2	3	·		0.
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			0.
6	Credits/Payments 2010 estimated tax pmts and 2009 overpayment credited to 2010 6a				:
	Exempt foreign organizations — tax withheld at source 6b	1			
	Tax paid with application for extension of time to file (Form 8868) 6c	1			
	Backup withholding erroneously withheld 6d	1			;
7	Total credits and payments. Add lines 6a through 6d	₇ -		-	
8	Enter any penalty for underpayment of estimated tax. Check here	8			
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9			0.
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 2011 estimated tax	11			
Par	t VII-A Statements Regarding Activities	1 1			
1 2	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
	participate or intervene in any political campaign?		1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		1ь		x
		ام مطمراط،	1.5		
	If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materials properties or distributed by the foundation in connection with the activities	ibiisnea			
	Did the foundation file Form 1120-POL for this year?		1 c		X
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation (2) On foundation managers	C	,		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				1
	foundation managers • \$ 0.				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
	If 'Yes,' attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, article	s		- 4	
_	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes		3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a	NT	X
	of 'Yes,' has it filed a tax return on Form 990-T for this year?		4b	N	/A
Э	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If 'Yes,' attach the statement required by General Instruction T) 3		X
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				,
O	By language in the governing instrument, or				,
					;
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that c with the state law remain in the governing instrument? 	onflict	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV		7	Х	
	Enter the states to which the foundation reports or with which it is registered (see the instructions)				-
	CA				j
b	of 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 <i>General Instruction G² If 'No,' attach explanation</i>		8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) o	r 49 42(n/9	5)		
-	for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If 'Yes,' complete	e Part XI	ν̈́ <u> </u>		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their and addresses SEE STATEMENT	names : 4	10	х	
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Par	VII-A Statements Regarding Activities (Continued)			1	
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		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?		12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption	application?	13	Х	
14	The books are in care of ► JOSEPH H. JOHNSON Telephone		51-14	94	- <i></i>
15	Located at • 4441 ST. ANDREWS PLACE STOCKTON CA ZIP + 4 • Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the year	95219 ► 15	N/A	-	N/A
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other acbank, securities, or other financial account in a foreign country?	uthority over a	16	Yes	No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If 'Yes,' enter the national foreign country. ▶	ame of the		,	
Par	t 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
1:	During the year did the foundation (either directly or indirectly)	m. 📻	[]	.	,, ,,,
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No	15%		36
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes X No	,	ž	Ž.
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No			1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No		(, y,)	.4
	(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)?	Yes X No			. 1864 1874 1884 1884
	(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)	Yes X No		, ; , ;	Service of the servic
I	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 the instruction Organizations relying on a current notice regarding disaster assistance check here	ons)² ► □	1 b	N	/A
			S		,
	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 2010?		1с	,	<u>X</u>
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))				, 10 m
	a At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010? If 'Yes,' list the years 20, 20, 20, 20	Yes X No			
	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942) all years listed, answer 'No' and attach statement — see the instructions)	(a)(2) a)(2) to	2b	N	/A
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years l 20 , 20 , 20 , 20, 20	nere			**************************************
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes X No			<i>y</i> ,
	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 approve 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 2010)	d	3b	N	/A
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a	70	х
	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 2010?		4b		X
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Part VII-B Statements Regarding Activit		n 4720 May Be Req	uired (continued)		
5a During the year did the foundation pay or incu	-		<u></u>		
(1) Carry on propaganda, or otherwise attemption	J		Yes _X	No	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	ation drive?	•	Yes X	No	
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	Yes X	No	
(4) Provide a grant to an organization other to in section 509(a)(1), (2), or (3), or section	han a charitable, etc, o 4940(d)(2)? (see instr	rganization described uctions)	Yes X	No	
(5) Provide for any purpose other than religio educational purposes, or for the prevention	us, charitable, scientific in of cruelty to children	c, literary, or or animals?	Yes X	No	***************************************
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regar	qualify under the excep ding disaster assistance	tions	5 b	N/A
Organizations relying on a current notice rega	rding disaster assistani	ce check here	▶		1,
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	the foundation claim ex sibility for the grant?	emption from the	N/A Yes	No	Principle of the Princi
If 'Yes,' attach the statement required by Reg	ulations section 53 494	5-5(d)			
6a Did the foundation, during the year, receive at on a personal benefit contract?			∐ Yes X	No .	
b Did the foundation, during the year, pay prem	iums, directly or indirec	tly, on a personal bene	fit contract?	6b	X
If 'Yes' to 6b, file Form 8870				.]	
7a At any time during the tax year, was the found	· · · · · · · · · · · · · · · · · · ·			No	
b If yes, did the foundation receive any proceed				M/A 7b	
Part VIII Information About Officers, D and Contractors	irectors, Trustees,	Foundation Manag	gers, Highly Paid E	mployees	,
	n managana and thair				
1 List all officers, directors, trustees, foundation	(b) Title and average			(a) Evanas	
(a) Name and address	hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allow	
JOSEPH H. JOHNSON	CHAIRMAN	0.	0.		0
4441 ST. ANDREWS PLACE	0				
STOCKTON, CA 95219					
_JUDITH_HJOHNSON	VICE CHAIRMN	0.	0.		0
4441 ST. ANDREWS DRIVE	0				
STOCKTON, CA 95219					
BRETT A. JOHNSON	TREASURER	0.	0.		0
2972 GREENLEAF DRIVE	0				
SAINT CHARLES, MO 63303					
BROOKE E. KLEIN	SECRETARY	0.	0.		0
3307 SW VERMONT STREET	0				
PORTLAND, OR 97219-1056					
2 Compensation of five highest-paid employee	s (other than those inc	luded on line 1— see ir	structions). If none, e	nter '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 other allow	
NONE			- January Company		
			~~~		
			<del></del>		
	-		-		
<b>7</b> -1-1					
Total number of other employees paid over \$50,000	]		<b>•</b>		0

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Total. Add lines 1 through 3

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see instructions.)	t. Foreign fol	indations,
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.	1 a	95,794.
<b>b</b> Average of monthly cash balances	1b	3,691.
c Fair market value of all other assets (see instructions)	1c	
d Total (add lines 1a, b, and c)	1 d	99,485.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	99,485.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	1,492.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	97,993.
6 Minimum investment return. Enter 5% of line 5	6	4,900.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private of	perating four	
and certain foreign organizations check here ► and do not complete thi		
1 Minimum investment return from Part X, line 6	1	4,900.
2a Tax on investment income for 2010 from Part VI, line 5	777	
<b>b</b> Income tax for 2010 (This does not include the tax from Part VI)  2b		
c Add lines 2a and 2b	2 c	
3 Distributable amount before adjustments Subtract line 2c from line 1	3	4,900.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	4,900.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	4,900.
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	5,300.
<b>b</b> Program-related investments — total from Part IX-B	1 b	
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>b</b> Cash distribution test (attach the required schedule)	3Ь	
4 Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	5,300.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	5,300.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating when qualifies for the section 4940(e) reduction of tax in those years	ether the founda	ation
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# Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	<b>(c)</b> 2009	<b>(d)</b> 2010
1 Distributable amount for 2010 from Part XI, line 7	,			4,900.
2 Undistributed income, if any, as of the end of 2010:		·· <u></u>		
a Enter amount for 2009 only			0.	
<b>b</b> Total for prior years: 20, 20, 20		0.	,	
3 Excess distributions carryover, if any, to 2010:				
<b>a</b> From 2005				
<b>b</b> From 2006 1, 021.				
c From 2007 330.	<b>&gt;</b> >			
d From 2008 2, 637.	, ,			``
e From 2009 484.				
f Total of lines 3a through e	4,472.			
4 Qualifying distributions for 2010 from Part		\$2.		<b>y</b>
XII, line 4 ► \$ 5,300.	^ `			<i>(</i> )
a Applied to 2009, but not more than line 2a	· · · · · · · · · · · · · · · · · · ·		0.	
<ul> <li>Applied to undistributed income of prior years (Election required — see instructions)</li> </ul>		0.		
		0.		
c Treated as distributions out of corpus (Election required — see instructions)	0.	•		
d Applied to 2010 distributable amount	0.			4,900.
e Remaining amount distributed out of corpus	400.			4, 500.
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) )	,			4
6 Enter the net total of each column as				
indicated below:		>		
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	4,872.	, ×,		*
<b>b</b> Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut-	<i>a</i> 1			
ed income for which a notice of deficiency has been issued, or on which the section	\$1 \$1			· .
4942(a) tax has been previously assessed	,	0.		·
d Subtract line 6c from line 6b Taxable		_		
amount — see instructions		0.	-	
e Undistributed income for 2009 Subtract line 4a from		·/·		<
line 2a Taxable amount — see instructions		**	0.	
f Undistributed income for 2010 Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2011.	·			0.
7 Amounts treated as distributions out of				0.
corpus to satisfy requirements imposed		• ′		
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
·				
8 Excess distributions carryover from 2005 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	4,872.			
10 Analysis of line 9	,	**************************************		
<b>a</b> Excess from 2006 1,021.				
<b>b</b> Excess from 2007 330.				
<b>c</b> Excess from 2008 2, 637.				
d Excess from 2009 484.				
<b>e</b> Excess from 2010 400.				

Form 990-PF (2010) THE JOSEPH AND J				20-8086588	
Part XIV Private Operating Foundation				·	N/A
1a If the foundation has received a ruling or is effective for 2010, enter the date of the	ruling	that it is a private	operating foundation	n, and the ruling	
<b>b</b> Check box to indicate whether the founda	ion is a private ope	erating foundation	described in section	4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		
investment return from Part X for each year listed	(a) 2010	<b>(b)</b> 2009	(c) 2008	(d) 2007	(e) Total
<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 used directly for active conduct of exempt activities					
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c</li> </ul>					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter					
(1) Value of all assets					<del></del>
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					-
<b>b</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					
(4) Gross investment income					
Part XV Supplementary Information assets at any time during the	(Complete this	part only if the	organization ha	d \$5,000 or mor	e in
1 Information Regarding Foundation Mana	_ <del>_</del>	structions.)			
a List any managers of the foundation who leads of any tax year (but only if they have SEE STATEMENT 5	nave contributed m	ore than 2% of the than \$5,000) (See	total contributions re section 507(d)(2))	eceived by the found	ation before the
· · · · · · · · · · · · · · · · · · ·		<del></del>		<del></del>	
b List any managers of the foundation who a partnership or other entity) of which the NONE	foundation has a 1	of the stock of a col 0% or greater inter	rporation (or an equa rest	illy large portion of t	he ownership of
2 Information Regarding Contribution, Gran	nt Gift Loan Scho	Jarchin etc Progr	ame:		
Check here I If the foundation only requests for funds If the foundation make	nakes contributions	to preselected cha	arıtable organizations		
complete items 2a, b, c, and d  a The name, address, and telephone number	er of the nerson to	whom applications	should be addressed		
a mo name, address, and telephone name	or the person to	whom applications	should be addressed	•	
SEE STATEMENT 6		<del>.</del> .,			
<b>b</b> The form in which applications should be	submitted and infor	mation and materia	als they should inclu	de	
SEE STATEMENT FOR LINE 2A					
c Any submission deadlines					
SEE STATEMENT FOR LINE 2A					
d Any restrictions or limitations on awards,	such as by geograp	hical areas, charita	able fields, kinds of i	nstitutions, or other	factors.
SEE STATEMENT FOR LINE 2A					
DAA					000 PF (0010)

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

3 Grants and Contributions Paid During the Te				
Recipient	If recipient is an individual, show any relationship to any foundation manager or	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient		
a Paid during the year CLAREMONT MCKENNA COLLEGE BAUER CENTER 500 E. NINTH ST CLAREMONT, CA 91711	N/A	EXEMPT	GENERAL OPERATING BUDGET	3,200.
MUJERES DE MAIZ OPPORTUNITY FOUNDATION P.O. BOX 1954 SEQUIM, WA 98382	N/A	EXEMPT	GENERAL OPERATING BUDGET	1,000.
HABITAT FOR HUMANITY 121 HABITAT STREET AMERICUS, GA 31709	N/A	EXEMPT	GENERAL OPERATING BUDGET	100.
GLOBAL CENTER FOR SOCIAL ENTREPENEURSHIP 3601 PACIFIC AVE STOCKTON, CA 95211	N/A	EXEMPT	GENERAL OPERATING BUDGET	1,000.
	<u> </u>			
Total	T	1	<b>&gt;</b>	3a 5,300.
b Approved for future payment  Total				

# Part XVI-A Analysis of Income-Producing Activities

Enter	gross amounts unless otherwise indicated	Unrelate	Unrelated business income Ex		section 512, 513, or 514	<u> </u>	
	Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (see the instructions)	
				Loue			
b.		<del>                                      </del>	-				
		<del></del>		†···			
ď				<del>                                     </del>			
e e				† <u> </u>			
f							
q	Fees and contracts from government agencies						
	Membership dues and assessments						
	Interest on savings and temporary cash investments						
	Dividends and interest from securities						
5	Net rental income or (loss) from real estate		<del>'   F</del>				
а	Debt-financed property						
b	Not debt-financed property						
6	Net rental income or (loss) from personal property						
7	Other investment income						
8	Gain or (loss) from sales of assets other than inventory						
	Net income or (loss) from special events.						
10	Gross profit or (loss) from sales of inventory						
11	Other revenue	α.	,		Y.,	, <b>:</b> >	
a							
b _.			······································	<u> </u>			
c_							
d_				ļ		- · · · · · · · · · · · · · · · · · · ·	
е_			<del></del>	<u> </u>			
12	Subtotal Add columns (b), (d), and (e)						
				<del></del>			
13	Total. Add line 12, columns (b), (d), and (e).				13	0.	
13 (See v	Total. Add line 12, columns (b), (d), and (e). worksheet in line 13 instructions to verify calculate				•	0.	
13 (See v	Total. Add line 12, columns (b), (d), and (e).		shment of Exemp	t Purpose	•	0.	
13 (See v	Total. Add line 12, columns (b), (d), and (e). worksheet in line 13 instructions to verify calculat  XVI-B Relationship of Activities to th	e Accompli	·		es		
13 (See v	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activities to the No. Explain below how each activity for which	e Accompli	·		es		
13 (See v	Total. Add line 12, columns (b), (d), and (e).  worksheet in line 13 instructions to verify calculat  XVI-B Relationship of Activities to th  No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli	·		es		
13 (See v	Total. Add line 12, columns (b), (d), and (e).  worksheet in line 13 instructions to verify calculat  XVI-B Relationship of Activities to th  No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli	·		es		
13 (See v	Total. Add line 12, columns (b), (d), and (e).  worksheet in line 13 instructions to verify calculat  XVI-B Relationship of Activities to th  No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli	·		es		
13 (See v	Total. Add line 12, columns (b), (d), and (e).  worksheet in line 13 instructions to verify calculat  XVI-B Relationship of Activities to th  No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli	·		es		
13 (See v	Total. Add line 12, columns (b), (d), and (e).  worksheet in line 13 instructions to verify calculat  XVI-B Relationship of Activities to th  No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli	·		es		
13 (See v	Total. Add line 12, columns (b), (d), and (e).  worksheet in line 13 instructions to verify calculat  XVI-B Relationship of Activities to th  No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli	·		es		
13 (See v	Total. Add line 12, columns (b), (d), and (e).  worksheet in line 13 instructions to verify calculat  XVI-B Relationship of Activities to th  No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli	·		es		
13 (See v	Total. Add line 12, columns (b), (d), and (e).  worksheet in line 13 instructions to verify calculat  XVI-B Relationship of Activities to th  No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli	·		es		
13 (See v	Total. Add line 12, columns (b), (d), and (e).  worksheet in line 13 instructions to verify calculat  XVI-B Relationship of Activities to th  No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli	·		es		
13 (See v	Total. Add line 12, columns (b), (d), and (e).  worksheet in line 13 instructions to verify calculat  XVI-B Relationship of Activities to th  No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli	·		es		
13 (See v	Total. Add line 12, columns (b), (d), and (e).  worksheet in line 13 instructions to verify calculat  XVI-B Relationship of Activities to th  No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli	·		es		
13 (See v	Total. Add line 12, columns (b), (d), and (e).  worksheet in line 13 instructions to verify calculat  XVI-B Relationship of Activities to th  No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli	·		es		
13 (See v	Total. Add line 12, columns (b), (d), and (e).  worksheet in line 13 instructions to verify calculat  XVI-B Relationship of Activities to th  No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli	·		es		
13 (See v	Total. Add line 12, columns (b), (d), and (e).  worksheet in line 13 instructions to verify calculat  XVI-B Relationship of Activities to th  No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli	·		es		
13 (See v	Total. Add line 12, columns (b), (d), and (e).  worksheet in line 13 instructions to verify calculat  XVI-B Relationship of Activities to th  No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli	·		es		
13 (See v	Total. Add line 12, columns (b), (d), and (e).  worksheet in line 13 instructions to verify calculat  XVI-B Relationship of Activities to th  No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli	·		es		
13 (See v	Total. Add line 12, columns (b), (d), and (e).  worksheet in line 13 instructions to verify calculat  XVI-B Relationship of Activities to th  No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli	·		es		
13 (See v	Total. Add line 12, columns (b), (d), and (e).  worksheet in line 13 instructions to verify calculat  XVI-B Relationship of Activities to th  No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli	·		es		
13 (See v	Total. Add line 12, columns (b), (d), and (e).  worksheet in line 13 instructions to verify calculat  XVI-B Relationship of Activities to th  No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli	·		es		
13 (See v	Total. Add line 12, columns (b), (d), and (e).  worksheet in line 13 instructions to verify calculat  XVI-B Relationship of Activities to th  No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli	·		es		
13 (See v	Total. Add line 12, columns (b), (d), and (e).  worksheet in line 13 instructions to verify calculat  XVI-B Relationship of Activities to th  No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli	·		es		
13 (See v	Total. Add line 12, columns (b), (d), and (e).  worksheet in line 13 instructions to verify calculat  XVI-B Relationship of Activities to th  No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli	·		es		

# Form 990-PF (2010) THE JOSEPH AND JUDITH H 20-8086588 Part XVII. | Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

							11.02.2.2.1	Yes	No
1 Di	id the organization directes the organization directes the constant of the contraction of	tly or indirectly	engage in any of the fo	llowing with	i any other organizat zations) or in section	ion 527	V1282	77	
re	elating to political organi	zations?	other than section sort	cy(o) organii	Editions) of in Scotion	. 527,	1.53		
<b>a</b> Tr	ransfers from the report	ing foundation to	o a noncharitable exem	pt organizat	tion of		***************************************	. 10g	
(1	<b>)</b> Cash						1a(1)		X
(2	) Other assets						1 a (2)		X
<b>b</b> O	ther transactions								
(1	) Sales of assets to a r	ioncharitable ex	empt organization				1 b (1)		X
(2	) Purchases of assets f	rom a noncharit	able exempt organızatı	on			1 b (2)		X
(3	Rental of facilities, eq	uipment, or oth	er assets				1 b (3)		X
(4	Reimbursement arran	gements					1 b (4)		Х
(5	) Loans or loan guaran	tees					1 b (5)		Х
(6	) Performance of service	es or members	hip or fundraising solic	itations			1 b (6)		Х
<b>c</b> SI	haring of facilities, equip	oment, mailing l	ists, other assets, or pa	aid employe	es		1 c		X
• • •					0   4   1   1			,	
th	the answer to any of the e goods, other assets, on transaction or sharing	or services diver	by the reporting found	lation If the	foundation received	Hess than fair marke	et value in	ue of	
(a) Line	<del> </del>		of noncharitable exempt orga	1		ansfers, transactions, and		ngement	is
N/A	, , , , , , , , , , , , , , , , , , , ,					· ·			
				T					
									-
							•		
					<del></del>				
2a is	the foundation directly	or indirectly affil	ated with or related to	one or mo	ore tax-exempt organ	nizations			
de	escribed in section 501(	c) of the Code (	other than section 501	c)(3)) or in s	section 527?	iizations	Yes	[X]	No
<b>b</b> If	'Yes,' complete the follo	wing schedule							
	(a) Name of organiz	ation	<b>(b)</b> Type of or	ganization		(c) Description of rela	ationship		
N/A									
	Under penalties of perjury, I de	clare that I have exar	nined this return, including acc	ompanying sche	dules and statements, and	to the best of my knowledge	and belief, if	is true,	
C:	correct, and complete Declarat	ion of preparer (other	than taxpayer or fiduciary) is	based on all info	ormation of which preparer	nas any knowledge			
Sign	. V D 1.	~10	<i>r</i>		10 of 1 o				
Here	x sapp	~ M . /	tween		1/10/2012	- DRCHMM	4CX	0	
	Signature of office or trust Print/Type preparer's	······································	Dranges's		Date /	Title	DTIN		
			Preparer's signatur	e	Date 2 1 1	Check ifif	PTIN		
Paid		STEINHAUER	LA PROVED & Proventing			2 self employed	N/A		
Prepa	· · · · · · · · · · · · · · · · · · ·			PANY, LI		Firm's EIN ► N/A			
Use O	nly Firm's address		TURA BOULEVARD		1000	- 1050	٠		
		WOODLAND I	HILLS, CA 91364	1-2227		Phone no (818			
BAA							Form <b>99</b>	0-PF (	2010)

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

Department of the Treasury Internal Revenue Service

# **Schedule of Contributors**

► Attach to Form 990, 990-EZ, or 990-PF

OMB No 1545-0047

2010

Name of the organization THE JOSEPH AND J	JUDITH H		Employer identification number
JOHNSON FAMILY F			20-8086588
Organization type (check one)			
Filers of:	Section:		
Form 990 or 990-EZ	501(c)() (enter number) organization		
	4947(a)(1) nonexempt charitable trust <b>not</b> treate	ed as a p	rivate foundation
	527 political organization		
Form 990-PF	X 501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trust treated as	s a privat	e foundation
	501(c)(3) taxable private foundation		
Check if your organization is covered by the <b>Note</b> . Only a section 501(c)(7), (8), or (10) or	General Rule or a Special Rule rganization can check boxes for both the General Rule a	and a Sp	ecial Rule See instructions
General Rule			
X For an organization filing Form 990, 990-contributor (Complete Parts I and II)	EZ, or 990-PF that received, during the year, \$5,000 or	more (ın	money or property) from any one
Special Rules			
509(a)(1) and 170(b)(1)(A)(vi), and receive	prorm 990 or 990-EZ, that met the 33-1/3% support tes led from any one contributor, during the year, a contribu art VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Pa	ution of t	he greater of (1) \$5 000 or
For a section 501(c)(7), (8), or (10) organ aggregate contributions of more than \$1, the prevention of cruelty to children or an	nization filing Form 990 or 990-EZ, that received from ar 000 for use <i>exclusively</i> for religious, charitable, scientific nimals Complete Parts I, II, and III	ny one co c, literary	ontributor, during the year, y, or educational purposes, or
contributions for use <i>exclusively</i> for religing this box is checked, enter here the total	nization filing Form 990 or 990-EZ, that received from ar ous, charitable, etc, purposes, but these contributions d il contributions that were received during the year for an is unless the <b>General Rule</b> applies to this organization b	did not ag n <i>exclusi</i> v	ggregate to more than \$1,000
religious, charitable, etc, contributions of	- · · · · · · · · · · · · · · · · · · ·		<b>►</b> \$
990-PF) but it <b>must</b> answer 'No' on Part IV. I	by the General Rule and/or the Special Rules does not ine 2 of their Form 990, or check the box on line H of its ling requirements of Schedule B (Form 990, 990-EZ, or	s Form 9	dule B (Form 990, 990-EZ, or 190-EZ, or on line 2 of its Form
BAA For Paperwork Reduction Act Notice, 990EZ, or 990-PF.	see the Instructions for Form 990, So	chedule E	<b>3</b> (Form 990, 990-EZ, or 990-PF) (2010

<b>.</b>	, , , , , , , , , , , , , , , , , , ,	_ 1	
Schedule Name of org	<b>B</b> (Form 990, 990-EZ, or 990-PF) (2010)	Page 1 Employe	of 1 of Part I ridentification number
THE JO	DSEPH AND JUDITH H	20-8	086588
Part I	Contributors (see instructions)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	JOSEPH AND JUDITH JOHNSON	_	Person X
	4441 ST. ANDREWS DRIVE	\$20,792.	Payroll Noncash
	STOCKTON, CA 95219		(Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		- \$=	Person Payroll Noncash (Complete Part II if there
		_	is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person

Payroll Noncash

(Complete Part II if there is a noncash contribution )

Page

of 1

of Part II

Name of organization

THE JOSEPH AND JUDITH H

Employer identification number 20-8086588

Part II	Noncash Property (see instructions )		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A		
		1	
		-	
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		-	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		1	
		\$	
			4.0
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<b>.</b>	
		\$	
	1	1	1

of 1

of Part III

Name of organization

Employer identification number

	SEPH AND JUDITH H			20-808658	8					
Part III	Exclusively religious, charitable,	etc, individual contributio	ns to section	n 501(c)(7), (8), or (10)	)					
	organizations aggregating more t	han \$1,000 for the year.Co	omplete cols (a)	through (e) and the follows	ng line entry.					
	For organizations completing Part III, ente contributions of \$1,000 or less for the year	r total of exclusively religious, c	haritable, etc,	) <b>&gt;</b> \$	NI / 2					
(a)	(b)	(c)	see instructions	(d)	N/A					
No. from	Purpose of gift	Use of gift		Description of how gi	ft is held					
Part I										
	N/A									
					·					
		(e)								
	Transferration and and and	Transfer of gift	Dalatio							
	Transferee's name, addre	SS, and ZIP + 4	Kelatio	onship of transferor to tran	steree					
			<u> </u>							
(a)	(b)	(c)		(d)						
No. from Part I	Purpose of gift	Use of gift		Description of how gift is t						
		(e) Transfer of gift								
	Transferee's name, addre		Relatio	onship of transferor to tran	sferee					
(a)	(b)	(c)		(d)	·					
No. from	Purpose of gift	Use of gift		Description of how gi	ft is held					
Part I										
					-					
	(e)									
	Topos of constant and the	Transfer of gift	5.1.1							
	Transferee's name, addres	ss, and ZIP + 4	Relatio	onship of transferor to tran	steree					
			-							
					·					
(a)	(b)	(c)		(d)						
No. from Part I	Purpose of gift	Use of gift	]	Description of how git	ft is held					
	(e) Transfer of gift									
	Transferee's name, addres	Relatio	enship of transferor to tran	sferee						
		-								

2010	FEDERAL STATEMENTS
	THE JOSEPH AND JUDITH H JOHNSON FAMILY FOUNDATION

PAGE 1

20-8086588

<b>STATEMENT 1</b>			
FORM 990-PF,	<b>PART</b>	I, LINE	16B
<b>ACCOUNTING</b>	<b>FEES</b>	•	

	_	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	TOTAL	\$ 2,344. \$ 2,344.	\$ 0.	\$ 0.	\$ 0.

STATEMENT 2 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES

		(A)	(B) NET	(C)	(D)
		EXPENSES	INVESTMENT	ADJUSTED	CHARITABLE
	_	PER BOOKS	INCOME	NET INCOME	<u>PURPOSES</u>
FRANCHISE TAX BOARD FEE	\$	10.			
INCREASE IN CSV OF LIFE INS POLICY		-9,927.			
LIFE INSURANCE PREMIUM		12,000.			
MISCELLANEOUS CREDIT		-19.			
MISCELLANEOUS EXPENSE		20.			
TOTAL	\$	2,084.	\$ 0.	\$ 0.	<u>\$ 0.</u>

**STATEMENT 3** FORM 990-PF, PART II, LINE 15 OTHER ASSETS

		BOOK VALUE	FAIR MARKET VALUE
LIFE INSURANCE POLICY	TOTAL	\$ 86,288. \$ 86,288.	\$ 86,288. \$ 86,288.

STATEMENT 4 FORM 990-PF, PART VII-A, LINE 10 SUBSTANTIAL CONTRIBUTORS DURING THE TAX YEAR

<u>NAM</u>	ME OF SUBSTANTIAL CONTRIBUTOR	ADDRESS OF SUBSTANTIAL CONTRIBUTOR
J09	SEPH H. JOHNSON	4441 ST. ANDREWS DRIVE STOCKTON, CA 95219
JUI	DITH H. JOHNSON	4411 ST. ANDREWS DRIVE STOCKTON, CA 95219

2010

# **FEDERAL STATEMENTS**

THE JOSEPH AND JUDITH H JOHNSON FAMILY FOUNDATION PAGE 2

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STATEMENT 5 FORM 990-PF, PART XV, LINE 1A FOUNDATION MANAGERS - 2% OR MORE CONTRIBUTORS

JOSEPH H. JOHNSON JUDITH H. JOHNSON

### **STATEMENT 6** FORM 990-PF, PART XV, LINE 2A-D APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM:

THE JOSEPH AND JUDITH H JOHNSON

NAME:

FAMILY FOUNDATION

CARE OF:

JOSEPH H. JOHNSON

STREET ADDRESS:

4441 ST. ANDREWS DRIVE

CITY, STATE, ZIP CODE:

STOCKTON, CA 95219

TELEPHONE:

209-951-1494

FORM AND CONTENT:

LETTER REQUEST, DESCRIBING USE OF FUNDS, REQUESTORS BACKGROUND, COLLEGE TRANSCRIPTS, AND REFERENCES.

REQUESTOR MUST BE COMPLETELY NONAFFILIATED AND

UNSOLICITED.

SUBMISSION DEADLINES:

NONE

RESTRICTIONS ON AWARDS: LIMITATION ON SIZE: \$2,500 PER REQUEST

GEOGRAPHIC LIMITATION: SAN JOAQUIN COUNTY, CA

CHARITABLE FIELD: MUST BE FOR COLLEGE RELATED EXPENSES INSTITUTIONAL LIMITATION: MUST BE AN ACCREDITED FOUR YEAR

UNIVERSITY

OTHER LIMITATIONS: PREFERENCE GIVEN TO FIRST TIME COLLEGE

ATTENDEE IN FAMILY