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Form **990-PF**

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

OMB No 1545-0052

2011

Treated as a Private Foundation 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 2012 10/01 , 2011, and ending 9/30 For calendar year 2011, or tax year beginning Α Employer identification number THE JOSEPH AND JUDITH H 20-8086588 JOHNSON FAMILY FOUNDATION Telephone number (see the instructions) (209) 951-1494 B 4441 ST. ANDREWS DRIVE STOCKTON, CA 95219 С If exemption application is pending, check here Initial Return of a former public charity Check all that apply Initial return D 1 Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, check Name change Address change here and attach computation X Section 501(c)(3) exempt private foundation Check type of organization Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Ε If private foundation status was terminated under section 507(b)(1)(A), check here Fair market value of all assets at end of year Accounting method: X Cash J (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination column (d) must be on cash basis) under section 507(b)(1)(B), check here 114,425 Part I Analysis of Revenue and (a) Revenue and (b) Net investment (c) Adjusted net (d) Disbursements Expenses (The total of amounts in expenses per books ıncome income for charitable columns (b), (c), and (d) may not neces-sarily equal the amounts in column (a) purposes (cash basis only) (see instructions)) Contributions, gifts, grants, etc, received (att sch) 20,000 If the foundn is not req 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) 6a Net gain/(loss) from sale of assets not on line 10. **b** Gross sales price for all assets on line 6a £... Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns and allowances (X)% **b** Less Cost of goods sold 13: c Gross profit/(loss) (att sch) 11 Other income (attach schedule) Total. Add lines 1 through 11 20,000 0 ō Ο. Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages s...employee benefits 16 Remile (attach schedule) 1,800 b-Accounting fees (attach sch SEE ST 1 Other prof fees (attach OPERATING Occupancy Ě Travel, conferences, and meetings Printing and publications 23 Other expenses (attach schedule) SEE STATEMENT -13,772Total operating and administrative expenses. Add lines 13 through 23 24 -11,972Contributions, gifts, grants paid PART XV 5,500 5,500 25 Total expenses and disbursements. 0 0 5,500 Add lines 24 and 25 -6.472Subtract line 26 from line 12: a Excess of revenue over expenses 26,472 and disbursements 0 **b** Net investment income (if negative, enter -0-)

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0

Dar	- 11	Balance Sheets Attached schedules and amounts in the description column should be for end-of year amounts only	Beginning of year	End	of year
		Column should be for end-of year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing	1,665.	2,355.	2,355.
	2	Savings and temporary cash investments			
	3	Accounts receivable			.,
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable	* -		
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach sch)		,	\ <u>\$</u>
A		Less allowance for doubtful accounts		White the proposed with the same and the sam	The second secon
Š	8	Inventories for sale or use			
A S E T	9	Prepaid expenses and deferred charges			
Ġ	10 a	a Investments – U.S. and state government obligations (attach schedule)			
	t	b Investments — corporate stock (attach schedule)			
	(c Investments — corporate bonds (attach schedule)			
	11	Investments — land, buildings, and equipment basis —			
		Less accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans.			
	13	Investments — other (attach schedule)			
	14	Land, buildings, and equipment basis	S. s. data - day arms	a a soft the second	a management was at black to
		Less: accumulated depreciation (attach schedule)			
		Other assets (describe ► SEE STATEMENT 3	86,288.	112,070.	112,070.
	16	Total assets (to be completed by all filers — see the instructions. Also, see page 1, item I).	87,953.	114,425.	114,425.
L	17		1		÷ '3
I A	18	Grants payable			
B	19	Deferred revenue			***
ŀ	20	Loans from officers, directors, trustees, & other disqualified persons			1
<u>ī</u>	21	Mortgages and other notes payable (attach schedule)]
Ī	22	Other liabilities (describe)]
Ė	22	Total liabilities (add lines 17 through 22)	0	0	
<u> </u>	23	Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here	0.	0.	
		and complete lines 24 through 26 and lines 30 and 31.			3
N F E U	24	Unrestricted	87,953.	114,425.]
N F E U T N	25	Temporarily restricted			
, D	26	Permanently restricted			
A B S A L T A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
EL	27	Capital stock, trust principal, or current funds			
SŅ	28	Paid-in or capital surplus, or land, building, and equipment fund].
OE	29	Retained earnings, accumulated income, endowment, or other funds			
RS	30	Total net assets or fund balances (see instructions)	87,953.	114,425.	J. • **
	31	Total liabilities and net assets/fund balances (see instructions)	87,953.	114,425.	
Parl		Analysis of Changes in Net Assets or Fund Baland	ces		
1	Total end-	I net assets or fund balances at beginning of year – Part II, col of-year figure reported on prior year's return).	umn (a), line 30 (must a	gree with	87,953.
		r amount from Part I, line 27a		2	26,472.
		increases not included in line 2 (itemize)		3	
4	Add	lines 1, 2, and 3		4	114,425.
		ases not included in line 2 (itemize)		5	
6	Total	I net assets or fund balances at end of year (line 4 minus line 5	b) - Part II, column (b),	line 30 6	114,425.

(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	<u> </u>	. ,,	D — Donation	 	
b					
С					
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba plus expense of sa		(h) Gain or (e) plus (f) m	(loss) iinus (g)
a					
<u>b</u>					
C					
d e		.,			
	wing gain in column (h) and owned by	the foundation on 12/31/69	<u> </u>	40 0 · · · (0·1	
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a	n (i)	(i) Gains (Coli gain minus column (1 an -0-) or Losses (fi	k), but not less
a					
b					
С					
d					
е					
2 Capital gain net income or (no3 Net short-term capital gain or	et capital loss) If gain, also If (loss), en (loss) as defined in sections 1222(5)	enter in Part I, line 7 ter -0- in Part I, line 7	2		
	ne 8, column (c) (see instructions) If	··· ¬	_ 3		
	er Section 4940(e) for Reduce	d Tax on Net Investme		1	
If 'Yes,' the foundation does not qua	ection 4942 tax on the distributable an alify under section 4940(e) Do not co	mplete this part	, 	Yes	☐ No
	in each column for each year, see th	4.5	ig any entries		· -
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as	sets (col	(d) Distributior umn (b) divided	
2010					
2009					
2008					
2007					
2006					
2 Total of line 1, column (d)			_ 2		- · ·
3 Average distribution ratio for formumber of years the foundation	the 5-year base period — divide the to on has been in existence if less than !	otal on line 2 by 5, or by the 5 years	3		
4 Enter the net value of noncha	ritable-use assets for 2011 from Part	X, line 5	4		
5 Multiply line 4 by line 3			5		
6 Enter 1% of net investment in	ncome (1% of Part I, line 27b)		6		
7 Add lines 5 and 6			7		
8 Enter qualifying distributions t	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%	6 tax rate See to	ne
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Form 990-PF (2011) 'THE JOSEPH AND JUDITH H	30-8	3086	5588		F	age 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 -	see i	instru	uctions	5)		
1 a 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 instrs)						
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						i
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)			č.			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable		_				
foundations only Others enter -0-)	-		ļ			<u>0.</u>
 3 Add lines 1 and 2 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0 	. }	3				0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	'	<u>4</u> 5				0.
6 Credits/Payments	}		<u> </u>			 -
a 2011 estimated tax pmts and 2010 overpayment credited to 2011			26	4		7
b Exempt foreign organizations — tax withheld at source 6b	\dashv					
c Tax paid with application for extension of time to file (Form 8868) 6c	一		77/			į
d Backup withholding erroneously withheld 6d	\neg					į
7 Total credits and payments Add lines 6a through 6d		7	, pre			0.
8 Enter any penalty for underpayment of estimated tax. Check here from 2220 is attached		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 2012 estimated tax		11				
Part VII-A Statements Regarding Activities				· · · · ·		
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did participate or intervene in any political campaign?	ıt			1a	Yes	No X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?				1 b		х
If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any material or distributed by the foundation in connection with the activities	's put	blishe	ed			
c Did the foundation file Form 1120-POL for this year?				1 c		Х
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year. (1) On the foundation (2) On foundation managers			0.			4118
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax important foundation managers ▶ \$ 0.	sea o	on			-	
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?				* 2 -	م کیشی	` X ~ .
If 'Yes,' attach a detailed description of the activities			Ì	$\overline{}$	٠,	- 33
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, ar	ticlos				,	
of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the change.	sicies			3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4a		Х
b If 'Yes,' has it filed a tax return on Form 990-T for this year?				4b	N	/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?			ļ	5	,	X
If 'Yes,' attach the statement required by General Instruction T					**	1
 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 the with the state law remain in the governing instrument?	at co	nflict		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	Χ	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) CA			_	ン		1
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 <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)(conforcalendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If 'Yes,' confidence in the section 4942(j)(conforcal year) and the section 4942(j	3) or a plete	4942 Part	()(5) t XIV	9		X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing the and addresses SEE STATEM	eir na E NT	ames 4		10	Х	
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rai	t VII-A Statements Regarding Activities (Continued)	_,		
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address	13	Х	
14	The books are in care of ► JOSEPH H. JOHNSON Telephone no ► 209-9	51-1	 494	
-	Located at ► 4441 ST. ANDREWS PLACE STOCKTON CA ZIP + 4 ► 95219		<i></i>	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	N/A		
	and enter the amount of tax-exempt interest received or accrued during the year			N/A
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If 'Yes,' enter the name of the foreign country ►	1 2 7		
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 a	During the year did the foundation (either directly or indirectly)	[,]		:
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	× ''3	,	!
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No			· mare / John
	(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?		, ,	
	(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			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
	(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		<i>></i> /	
t	If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1 b	N	/ <u>A</u>
	Organizations relying on a current notice regarding disaster assistance check here			, 1
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 2011?	1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section $4942(j)(3)$ or $4942(j)(5)$)			
a	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011? Yes X No	*3	,	:
	If 'Yes,' list the years • 20, 20, 20			· ;
	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions)	2b	N	^ <u>^</u>
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20_{-} , 20_{-} , 20_{-} , 20_{-}			
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		, ;	
t	olf 'Yes,' did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2011)	3b	N	/A
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
t	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 2011?	4b		X
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Part VII-B Statements Regarding Activi	ties for Which Form	1 4720 May Be Req	uired (continued)				
5a During the year did the foundation pay or inc	ur any amount to						
(1) Carry on propaganda, or otherwise attern	pt to influence legislation	on (section 4945(e))?	Yes X	No			
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? Yes X No							
(3) Provide a grant to an individual for travel	Yes X	No '					
(4) Provide a grant to an organization other than a charitable, etc, organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions) Yes X No							
(5) Provide for any purpose other than religi educational purposes, or for the preventi			Yes X	No			
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or i (see instructions)?	the transactions fail to n a current notice regard	qualify under the excep ding disaster assistance	tions	5b N/A			
Organizations relying on a current notice reg	arding disaster assistand	ce check here	▶ [
c If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? N/A Yes No If 'Yes,' attach the statement required by Regulations section 53 4945-5(d)							
6a Did the foundation, during the year, receive a on a personal benefit contract?			S ∏Yes X	No			
b Did the foundation, during the year, pay pren	niums, directly or indirec	tly, on a personal bene		6b X			
If 'Yes' to 6b, file Form 8870				No 🔄 🍇 💮			
7a At any time during the tax year, was the four b If 'Yes,' did the foundation receive any proce				M/A 7b			
Part VIII Information About Officers, D							
and Contractors	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•	,,,,				
1 List all officers, directors, trustees, foundati	on managers and their	compensation (see inst	ructions).				
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense account,			
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allowances			
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	<u> </u>			<u> </u>			
2 Compensation of five highest-paid employe							
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances			
NONE							
	ļ						
	1						
							
Total number of other employees paid over \$50,00	 NO	<u> </u>	•				
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20-8086588

Page 6

Form 990-PF (2011) THE JOSEPH AND JUDITH H

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	mployees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	<u> </u>
Total market of alkana and a first control of the c	
Total number of others receiving over \$50,000 for professional services ►	0
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
N/A	
2	
3	. —
	
4	i I
	1
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
N/A	1
2	
All other program-related investments. See instructions	
3	
Total. Add lines 1 through 3 ▶	0.
BAA	Form 990-PF (2011)

20-8086588

Page 7

Form **990-PF** (2011)

Form 990-PF (2011) THE JOSEPH AND JUDITH H

Par	see instructions.)	reigii i	oundations,
1 a	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes Average monthly fair market value of securities.	1 a	103,043.
b	Average of monthly cash balances	1 b	7,009.
c	Fair market value of all other assets (see instructions)	1 c	
d	Total (add lines 1a, b, and c)	1 d	110,052.
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	110,052.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	1,651.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	108,401.
6_	Minimum investment return. Enter 5% of line 5	6	5,420.
Par	TXI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations check here ► and do not complete this part.)	ating fo	oundations
1	Minimum investment return from Part X, line 6	1	5,420.
2 a	Tax on investment income for 2011 from Part VI, line 5	~	
b	Income tax for 2011 (This does not include the tax from Part VI)		
c	: Add lines 2a and 2b	2 c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	5,420.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	5,420.
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	5,420.
Par	t XII Qualifying Distributions (see instructions)		
1 a	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes. Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	<u>.</u> 1a	5,500.
t	Program-related investments — total from Part IX-B	1ь	
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 Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	5,500.
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	5,500.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether qualifies for the section 4940(e) reduction of tax in those years	the fou	ındatıon
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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI, line 7		(2012年) (2 (2012年) (3)	2	5,420.
2 Undistributed income, if any, as of the end of 2011.	**	化 美数学 2000 10	**************************************	14 1
a Enter amount for 2010 only			0.	<u> </u>
b Total for prior years. 20, 20, 20		0.	7. 5. 3. 5. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	
3 Excess distributions carryover, if any, to 2011	,			£ - (\$)
a From 2006 1, 021.			, ,	
b From 2007 330.		W. 336 257		
c From 2008 2, 637.				<i>i</i>
d From 2009 484.	1/1			
e From 2010 400.	4 070		(3) 25	, , ,
f Total of lines 3a through e	4,872.		*	
4 Qualifying distributions for 2011 from Part XII, line 4 [.] ► \$ 5,500.		* * *	- 20 / S	
a Applied to 2010, but not more than line 2a			0.	£.
	}^	** ** ** ** ** ** **	\$ () * () \ ()	27
b Applied to undistributed income of prior years (Election required — see instructions)	K.	0.		
 Treated as distributions out of corpus (Election required – see instructions) 	0.			
d Applied to 2011 distributable amount		\$		5,420.
e Remaining amount distributed out of corpus	80.			() %
5 Excess distributions carryover applied to 2011	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:	4,952.		Š ***	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5		. ** '		/ 1 · · · · · · · · · · · · · · · · · ·
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut- ed income for which a notice of deficiency has been issued, or on which the section				, , , , , , , , , , , , , , , , , , ,
4942(a) tax has been previously assessed		0.	1/2/2016	
d Subtract line 6c from line 6b Taxable		_		
amount — see instructions	× 5	0.	x, 3, 1, 1	* * * * * * * * * * * * * * * * * * * *
e Undistributed income for 2010. Subtract line 4a from line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2011 Subtract lines			·,	
4d and 5 from line 1. This amount must be distributed in 2012				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
8 Excess distributions carryover from 2006 not		2.5		
applied on line 5 or line 7 (see instructions)	1,021.	* * * * * * * * * * * * * * * * * * * *	<u> </u>	
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	3,931.			
10 Analysis of line 9.			\$\pi_{\pi_{\pi_{\pi_{\pi_{\pi_{\pi_{\pi_	
a Excess from 2007 330.			, i	
b Excess from 2008 2, 637.				
c Excess from 2009 484.		,	•	*
d Excess from 2010 400.		,		· •
e Excess from 2011 80.	<u> 1代 - 25 公案,主文</u>	<u> </u>		5 000 PF (0011)

Form 990-PF (2011) THE JOSEPH AND J				20-8086588	
Part XIV Private Operating Foundar					N/A
1a If the foundation has received a ruling or is effective for 2011, enter the date of the	determination letter ruling	that it is a private	operating foundation	n, and the ruling	
b Check box to indicate whether the foundar	tion is a private ope	erating foundation	described in section	4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum investment return from Part X for each year listed	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
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					
 Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c 					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter.					
 Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) 					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information 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 Manage		Structions.)			
a List any managers of the foundation who h	nave contributed me	ore than 2% of the	total contributions re	eceived by the found	lation before the
close of any tax year (but only if they have SEE STATEMENT 5	contributed more	than \$5,000) (See	section 507(d)(2))	·	
b List any managers of the foundation who	own 10% or more o	f the stock of a cor	rporation (or an equa	ally large portion of	the ownership of
a partnership or other entity) of which the NONE	foundation has a 1	0% or greater inter	est		·
2 Information Regarding Contribution, Gran	nt. Gift. Loan, Scho	larship etc Progr	ams:		
Check here ► ☐ If the foundation only n requests for funds If the foundation make	nakes contributions	to preselected cha	arıtable organizations	and does not acce	ot unsolicited er conditions,
a The name, address, and telephone number	r of the nerson to	whom applications	should be addressed		-
a me name, address, and telephone nambe	i or the person to t	тот аррисацот	should be addressed	•	
SEE STATEMENT 6					
b The form in which applications should be s	submitted and infor	mation and materia	als they should includ	de	
SEE STATEMENT FOR LINE 2A					
c Any submission deadlines					
SEE STATEMENT FOR LINE 2A					
d Any restrictions or limitations on awards, s	such as by geograp	hical areas, charita	ible fields, kinds of ir	nstitutions, or other	factors
SEE STATEMENT FOR LINE 2A					
PAA		TARRES - 07/14/16			000 DE (0011)

*1 %

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, oundation show any relationship to any foundation manager or substantial contributor Purpose of grant or contribution Recipient status of **Amount** recipient Name and address (home or business) a Paid during the year CLAREMONT MCKENNA COLLEGE N/A EXEMPT GENERAL OPERATING 3,500. BAUER CENTER 500 E. NINTH ST BUDGET CLAREMONT, CA 91711 MUJERES DE MAIZ OPPORTUNITY N/A **EXEMPT** GENERAL OPERATING 1,000. FOUNDATION BUDGET P.O. BOX 1954 SEQUIM, WA 98382 GENERAL OPERATING GLOBAL CENTER FOR SOCIAL N/A **EXEMPT** 1,000. BUDGET ENTREPENEURSHIP 3601 PACIFIC AVE STOCKTON, CA 95211 Total За 5,500. b Approved for future payment

3Ь

Total

Part XVI-A Analysis of Income-Producing Activities

Enter gross	s amounts unless otherwise indicated	I Unrelate	d business income	Excluded	d by section 512, 513, or 514	1
		(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income (See instructions)
_	ram service revenue	 	·	code	-	
		+ -				
		+				
		1 1		+		
		1		 		
f				+		
· -	and contracts from government agencies	1				
_	bership dues and assessments			+		
	st on savings and temporary cash investments		· · · · · · · · · · · · · · · · · · ·	+		
	ends and interest from securities					
	ental income or (loss) from real estate		<u> </u>			<u> </u>
	-financed property					
	debt-financed property					
	ntal income or (loss) from personal property					
	r investment income	1				
	r (loss) from sales of assets other than inventory					
	ncome or (loss) from special events.			1		
	s profit or (loss) from sales of inventory			 		
	r revenue		2.5 %	. %/:	, 15W , 100 m	79 1 70 1
		, ,		700	· **/\	
		1 1		-		
_		1		-		
. ———		1		1		
e						
	otal Add columns (b), (d), and (e)	-,				<u></u>
	Add line 12, columns (b), (d), and (e)	<u> </u>			13	0.
าง Total						()
		ons)			13	0.
See works	sheet in line 13 instructions to verify calculate	•	chment of Evem	ot Puro		0.
See works Part XVI	-B Relationship of Activities to the	e Accompli			oses	
See works Part XVI Line No.	-B Relationship of Activities to the	e Accompli			oses	
See works Part XVI Line No.	sheet in line 13 instructions to verify calculate	e Accompli			oses	
See works Part XVI Line No.	-B Relationship of Activities to the	e Accompli			oses	
See works Part XVI Line No.	-B Relationship of Activities to the	e Accompli			oses	
See works Part XVI Line No.	-B Relationship of Activities to the	e Accompli			oses	
See works Part XVI Line No.	-B Relationship of Activities to the	e Accompli			oses	
See works Part XVI Line No.	-B Relationship of Activities to the	e Accompli			oses	
See works Part XVI Line No.	-B Relationship of Activities to the	e Accompli			oses	
See works Part XVI Line No.	-B Relationship of Activities to the	e Accompli			oses	
See works Part XVI Line No.	-B Relationship of Activities to the	e Accompli			oses	
See works Part XVI Line No.	-B Relationship of Activities to the	e Accompli			oses	
See works Part XVI Line No.	-B Relationship of Activities to the	e Accompli			oses	
See works Part XVI Line No.	-B Relationship of Activities to the	e Accompli			oses	
See works Part XVI Line No.	-B Relationship of Activities to the	e Accompli			oses	
See works Part XVI Line No.	-B Relationship of Activities to the	e Accompli			oses	
See works Part XVI Line No.	-B Relationship of Activities to the	e Accompli			oses	
See works Part XVI Line No.	-B Relationship of Activities to the	e Accompli			oses	
See works Part XVI Line No.	-B Relationship of Activities to the	e Accompli			oses	
See works Part XVI Line No.	-B Relationship of Activities to the	e Accompli			oses	
See works Part XVI Line No.	-B Relationship of Activities to the	e Accompli			oses	
See works Part XVI Line No.	-B Relationship of Activities to the	e Accompli			oses	
See works Part XVI Line No.	-B Relationship of Activities to the	e Accompli			oses	
See works Part XVI Line No.	-B Relationship of Activities to the	e Accompli			oses	
See works Part XVI Line No.	-B Relationship of Activities to the	e Accompli			oses	

BAA

Form 990-	PF , (2011) · THE J	OSEPH AND	JUDITH H				20-8	086588	Pa	age 1 3
Part XV	II Information R Exempt Organ	egarding Tra	insfers To	and Transact	ions and	Relationship	os With Nor	charitable		
	Exempt Organ	IIZALIUIIS							Yes	N
desc	the organization directribed in section 501(cting to political organization)	c) of the Code (c	engage in any other than sec	y of the following ction 501(c)(3) or	with any o ganizations	ther organizations) or in section !	n 527,		ies	No 2
	sfers from the reporti		a noncharita	able exempt orga	nızatıon of					ĺ
(1)		3		, 3				1a (1)		Х
(2)	Other assets							1a (2)		Х
b Othe	er transactions									
(1)	Sales of assets to a n	oncharitable ex	empt organiza	ation				1 b (1)		Х
(2) F	Purchases of assets f	rom a noncharıt	able exempt	organization				1 b (2)		Х
	Rental of facilities, eq	•	er assets					1 b (3)	ļ	Х
	Reimbursement arran	=						1b (4)		X
	Loans or loan guarant							1 b (5)		X
	Performance of service				1			1b (6)		X
c Snar	ring of facilities, equip	ment, mailing ii	ists, other ass	sets, or paid emp	loyees.			1c		Х
d If the the g any i	e answer to any of the goods, other assets, o transaction or sharing	e above is 'Yes,' or services given arrangement, s	complete the by the repor	e following sched ting foundation on (d) the value o	lule. Colum if the found of the goods	n (b) should alw lation received l s. other assets.	vays show the ess than fair m or services rec	fair market val iarket value in eived	ue of	
(a) Line no				exempt organization	1	Description of tran				
N/A										
_										
					-					
										
					····					
		+								
									-	
			-							
	1									
desc	e foundation directly or cribed in section 501 (crises,' complete the folion) of the Code (d	iated with, or other than sec	related to, one option 501(c)(3)) o	or more tax r in section	-exempt organiz i 527?	zations	Yes	X	No
	(a) Name of organiz	ation	(b) 7	Type of organizat	ion	(с	Description o	f relationship		
N/A										
			1							
Und	der penalties of perjury, I dec	clare that I have exam	nined this return, i	ncluding accompanyin	o schedules an	l ad statements, and to	the best of my know	wledge and belief, i	t is true.	
cor	rect, and complete Declarat	on of preparer (other	than taxpayer) is	based on all informat	on of which pre	eparer has any know	edge			
Sign Here	Whapped &	. Johns		12/12))3 b	(CH0) 2	MODON	May the this retur preparer (see instru	n with th shown b ructions)	elow
s	Print/Type preparer's	U name	Drann	Date '	Т	Itle Date		1 DTIM	Yes	No
]			rer's signature		12-11-1	Check]" [, - 0 -	
Paid	JEANNE F.			& COMPANY,	TTD	162 113/	<u> </u>	P00607	50/	
Preparei		21031 VEN			LLP TE 1000	<u> </u>	Firm's EIN ► 26	-3909054		
Use Only	y Firm's address			91364-222		,	Phone no (8	318) 598-	6525	
					<u>· </u>		10			

Form **990-PF** (2011)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2011

Name of the organization THE JOSEPH A	Employer identification number	
	LY FOUNDATION	20-8086588
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organizatio	on
	4947(a)(1) nonexempt charitable trust not	treated as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust trea	ated as a private foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered b Note . Only a section 501(c)(7), (8), or (y the General Rule or a Special Rule (10) organization can check boxes for both the General	Rule and a Special Rule See instructions
General Rule		
X For an organization filing Form 990 contributor (Complete Parts I and I	, 990-EZ, or 990-PF that received, during the year, \$5,0 ll)	000 or more (in money or property) from any one
Special Rules		
$509(a)(1)$ and $170(b)(1)(A)(v_1)$, and	n filing Form 990 or 990-EZ that met the 33-1/3% supporeceived from any one contributor, during the year, a c 90, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Compli	contribution of the greater of (1) \$5,000 or
total contributions of more than \$1,	organization filing Form 990 or 990-EZ that received fr 000 for use exclusively for religious, charitable, scientific or animals. Complete Parts I, II, and III	
contributions for use <i>exclusively</i> for If this box is checked, enter here the	organization filing Form 990 or 990-EZ that received from the religious, charitable, etc., purposes, but these contributed total contributions that were received during the year the parts unless the General Rule applies to this organization.	tions did not total to more than \$1,000 for an exclusively religious, charitable, etc.
religious, charitable, etc, contribution	ons of \$5,000 or more during the year	▶ \$
990-PF) but it must answer 'No' on Pai	vered by the General Rule and/or the Special Rules doe t IV, line 2, of its Form 990, or check the box on line H meet the filing requirements of Schedule B (Form 990,	of its Form 990-EZ or on Part I, line 2, of its
BAA For Paperwork Reduction Act No. 990EZ, or 990-PF.	otice, see the Instructions for Form 990,	Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Schedule Name of org	B (Form 990, 990-EZ, or 990-PF) (2011)	Page	1 of 1 of Part 1
	onization SEPH AND JUDITH H	' ')86588
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional sp		
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JOSEPH AND JUDITH JOHNSON 4441 ST. ANDREWS DRIVE STOCKTON, CA 95219	\$20,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total 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) Total 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) Total contributions	(d) Type of contribution
<u></u>		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total 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) Total contributions	(d) Type of contribution
—		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2011)

Page

1 to

of Part II

Name of organization
THE JOSEPH AND JUDITH H

Employer identification number 20-8086588

1

Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed. (b)
Description of noncash property given (a) No. from Part I (c) FMV (or estimate) (see instructions) (d) Date received N/A (a) No. from (c) FMV (or estimate) (see instructions) (d) Date received Description of noncash property given Part I (a) No. from (d) Date received (b) (c) FMV (or estimate) (see instructions) Description of noncash property given Part I (a) No. from Part I (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received (b) Description of noncash property given (c) FMV (or estimate) (d) Date received (a) No. from Part I (see instructions) (a) No. from (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received Part I

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

(e) Transfer of gift

011 [']	FEDERAL STATEMENTS THE JOSEPH AND JUDITH H	PAGE	
	JOHNSON FAMILY FOUNDATION	20-808658	
STATEMENT 1 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES			
	(A) (B) NET (C EXPENSES INVESTMENT ADJUS PER BOOKS INCOME NET IN	STED CHARITABLE	
ACCOUNTING FEES	TOTAL $\frac{\$}{\$}$ 1,800. $\frac{\$}{\$}$ 0. $\frac{\$}{\$}$	0. \$ 0.	
STATEMENT 2 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES			
	(A) (B) NET (EXPENSES INVESTMENT ADJU	(C) (D) STED CHARITABLE	
FRANCHISE TAX BOARD FEE	PER BOOKS INCOME NET IN \$ 10.		
INCREASE IN CSV OF LIFE INS LIFE INSURANCE PREMIUM		0. \$ 0	
STATEMENT 3 FORM 990-PF, PART II, LINE 15 OTHER ASSETS			
	BOOK VALU	FAIR MARKET <u>VALUE</u>	
LIFE INSURANCE POLICY	TOTAL \$ 112,0°	70. \$ 112,070. 70. \$ 112,070.	
STATEMENT 4	······································		
FORM 990-PF, PART VII-A, LINE 10 SUBSTANTIAL CONTRIBUTORS D	JRING THE TAX YEAR		
NAME OF SUBSTANTIAL CONTRIB	ADDRESS OF SUBSTANTIAL CO	ONTRIBUTOR	
JOSEPH H. JOHNSON	H. JOHNSON 4441 ST. ANDREWS DRIVE STOCKTON, CA 95219		
JUDITH H. JOHNSON	4441 ST. ANDREWS DRIVE STOCKTON, CA 95219		

2011

FEDERAL STATEMENTS

THE JOSEPH AND JUDITH H JOHNSON FAMILY FOUNDATION PAGE 2

20-8086588

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: CARE OF: FAMILY FOUNDATION 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