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Form **990**

Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2012 calendar year, or tax year beginning 6/1/2012, and ending 5/31/2013

B Check if applicable:
 Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

C Name of organization HOUCK/JOHNS HOPKINS 0101574000
 Doing Business As _____
 Number and street (or P O box if mail is not delivered to street address) Room/suite
1 W 4TH ST 4TH FLOOR MAC D4000-041
 City, town or post office, state, and ZIP code
Winston Salem NC 27101-3818

D Employer identification number 23-7455346
E Telephone number 888-730-4933
G Gross receipts \$ 6,050,515

F Name and address of principal officer _____
H(a) Is this a group return for affiliates? Yes No
H(b) Are all affiliates included? Yes No
 If "No," attach a list (see instructions)
H(c) Group exemption number ▶ _____

I Tax-exempt status 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527

J Website: ▶ N/A

K Form of organization Corporation Trust Association Other ▶ _____
L Year of formation 1977 **M** State of legal domicile CO

OCT 03 2013
RECEIVED
IRS-OS
SODEN, UT

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities. <u>THE ORGANIZATION'S MISSION IS TO SUPPORT JOHN HOPKINS HOSPITAL</u>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VII, line 1a)	3	1
	4 Number of independent voting members of the governing body (Part VII, line 1b)	4	1
	5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	0
	6 Total number of volunteers (estimate if necessary)	6	0
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
7b Net unrelated business taxable income from Form 990-SS, line 34	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	0	0
	9 Program service revenue (Part VIII, line 2g)	0	0
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,773,615	576,564
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,888	10,049
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,775,503	586,613
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	945,501	0
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0	0
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	16b Total fundraising expenses (Part IX, column (D), line 25) ▶	0	0
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	142,570	158,371
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,088,071	158,371
19 Revenue less expenses Subtract line 18 from line 12	687,432	428,242	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	18,526,780	18,886,910
	21 Total liabilities (Part X, line 26)	0	0
	22 Net assets or fund balances. Subtract line 21 from line 20	18,526,780	18,886,910

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here
 Signature of officer: John Sulentic Date: 10/2/2013
 Type or print name and title: JOHN SULENTIC SVP Wells Fargo Bank N.A.

Paid Preparer Use Only
 Preparer's name: JOSEPH J CASTRIANO Date: 10/2/2013 PTIN: P01251603
 Firm's name: PricewaterhouseCoopers, LLP Firm's EIN: 13-4008324
 Firm's address: 600 GRANT STREET, PITTSBURGH, PA 15219-2777 Phone no: 412-355-6000

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

SCANNED OCT 29 2013

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Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

1 Briefly describe the organization's mission:
THE ORGANIZATION'S MISSION IS TO SUPPORT JOHN HOPKINS HOSPITAL

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 37,850 including grants of \$) (Revenue \$)

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services. (Describe in Schedule O.)
(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)

4e Total program service expenses ▶ 37,850

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?		X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI		X
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		X
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>		X
24b	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d	d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
25b	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26	26 Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>		X
27	27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28	28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
28a	a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28b	b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28c	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29	29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30	30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31	31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32	32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33	33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34	34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a	35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
35b	b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36	36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37	37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38	38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0	<input type="checkbox"/>	<input type="checkbox"/>
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	<input type="checkbox"/>	<input type="checkbox"/>
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c X	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 0	<input type="checkbox"/>	<input type="checkbox"/>
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 2b	<input type="checkbox"/>	<input type="checkbox"/>
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b	<input type="checkbox"/>	<input type="checkbox"/>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b	If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 4b	<input type="checkbox"/>	<input type="checkbox"/>
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c	<input type="checkbox"/>	<input type="checkbox"/>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6a	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b	<input type="checkbox"/>	<input type="checkbox"/>
7	Organizations that may receive deductible contributions under section 170(c).	<input type="checkbox"/>	<input type="checkbox"/>
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b	<input type="checkbox"/>	<input type="checkbox"/>
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	<input type="checkbox"/>	<input type="checkbox"/>
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g	<input type="checkbox"/>	<input type="checkbox"/>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h	<input type="checkbox"/>	<input type="checkbox"/>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9	Sponsoring organizations maintaining donor advised funds.	<input type="checkbox"/>	<input type="checkbox"/>
a	Did the organization make any taxable distributions under section 4966? 9a	<input type="checkbox"/>	<input type="checkbox"/>
b	Did the organization make a distribution to a donor, donor advisor, or related person? 9b	<input type="checkbox"/>	<input type="checkbox"/>
10	Section 501(c)(7) organizations. Enter:	<input type="checkbox"/>	<input type="checkbox"/>
a	Initiation fees and capital contributions included on Part VIII, line 12 10a	<input type="checkbox"/>	<input type="checkbox"/>
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	<input type="checkbox"/>	<input type="checkbox"/>
11	Section 501(c)(12) organizations. Enter:	<input type="checkbox"/>	<input type="checkbox"/>
a	Gross income from members or shareholders 11a	<input type="checkbox"/>	<input type="checkbox"/>
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b	<input type="checkbox"/>	<input type="checkbox"/>
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a	<input type="checkbox"/>	<input type="checkbox"/>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	<input type="checkbox"/>	<input type="checkbox"/>
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<input type="checkbox"/>	<input type="checkbox"/>
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 13a	<input type="checkbox"/>	<input type="checkbox"/>
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b	<input type="checkbox"/>	<input type="checkbox"/>
c	Enter the amount of reserves on hand 13c	<input type="checkbox"/>	<input type="checkbox"/>
14a	Did the organization receive any payments for indoor tanning services during the tax year? 14a	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	<input type="checkbox"/>	<input type="checkbox"/>

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O	<input type="checkbox"/>	<input type="checkbox"/>
1b	Enter the number of voting members included in line 1a, above, who are independent	<input type="checkbox"/>	<input type="checkbox"/>
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6	Did the organization have members or stockholders?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	<input type="checkbox"/>	<input type="checkbox"/>
8a	The governing body?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8b	Each committee with authority to act on behalf of the governing body?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10b	<input type="checkbox"/>	<input type="checkbox"/>
11a	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11b	<input type="checkbox"/>	<input type="checkbox"/>
12a	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12b	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12c	<input checked="" type="checkbox"/>	<input type="checkbox"/>
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>
15a	<input type="checkbox"/>	<input checked="" type="checkbox"/>
15b	<input type="checkbox"/>	<input checked="" type="checkbox"/>
16a	<input type="checkbox"/>	<input checked="" type="checkbox"/>
16b	<input type="checkbox"/>	<input type="checkbox"/>

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **CO**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization. **Wells Fargo Bank N A 888-730-4933**
1 W 4TH ST 4TH FLOOR MAC D4000-041, WINSTON SALEM, NC 27101-3818

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees, and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) WELLS FARGO BANK N.A. TRUSTEE	4 00		X				145,858			
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15)										
(16)										
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1b Sub-total							145,858	0	0	
c Total from continuation sheets to Part VII, Section A							0	0	0	
d Total (add lines 1b and 1c)							145,858	0	0	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		0
		0
		0
		0
		0

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Part VIII Statement of Revenue

Check if Schedule O contains a response to any question in this Part VIII.

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a 0				
	b Membership dues	1b 0				
	c Fundraising events	1c 0				
	d Related organizations	1d 0				
	e Government grants (contributions)	1e 0				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 0				
	g Noncash contributions included in lines 1a-1f:	\$ 0				
	h Total. Add lines 1a-1f	▶ 0				
	Program Service Revenue	Business Code				
2a			0			
b			0			
c			0			
d			0			
e			0			
f All other program service revenue			0			
g Total. Add lines 2a-2f		▶ 0				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)	▶	603,949		603,949	
	4 Income from investment of tax-exempt bond proceeds	▶	0			
	5 Royalties	▶	0			
	6a Gross rents	(i) Real				
		(ii) Personal				
		b Less: rental expenses				
		c Rental income or (loss)	0	0		
	d Net rental income or (loss)	▶	0			
	7a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
		b Less: cost or other basis and sales expenses				
		c Gain or (loss)	5,436,517	0		
	d Net gain or (loss)	▶	-27,385		-27,385	
	8a Gross income from fundraising events (not including \$ 0 of contributions reported on line 1c). See Part IV, line 18	a	0			
		b Less: direct expenses	b 0			
		c Net income or (loss) from fundraising events	▶	0		
	9a Gross income from gaming activities. See Part IV, line 19	a	0			
		b Less: direct expenses	b 0			
c Net income or (loss) from gaming activities		▶	0			
10a Gross sales of inventory, less returns and allowances	a	0				
	b Less: cost of goods sold	b 0				
	c Net income or (loss) from sales of inventory	▶	0			
Miscellaneous Revenue		Business Code				
11a FEE REBATE	900001	5,369		5,369		
b PARTNERSHIP K-1 INCOME	900001	4,680		4,680		
c		0				
d All other revenue		0				
e Total. Add lines 11a-11d	▶	10,049				
12 Total revenue. See instructions	▶	586,613	0	0	586,613	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

Check if Schedule O contains a response to any question in this Part IX

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21	0			
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	0			
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	0			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0			
9 Other employee benefits	0			
10 Payroll taxes	0			
11 Fees for services (non-employees):				
a Management	0			
b Legal	0			
c Accounting	0			
d Lobbying	0			
e Professional fundraising services. See Part IV, line 17	0			
f Investment management fees	0			
g Other (if line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	0			
12 Advertising and promotion	0			
13 Office expenses	0			
14 Information technology	0			
15 Royalties	0			
16 Occupancy	0			
17 Travel	0			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	0			
20 Interest	0			
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	0	0	0	0
23 Insurance	0			
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a TRUSTEE FEES	145,858	36,465	109,394	
b ACCOUNTING FEES	1,385	1,385		
c FOREIGN TAX WITHHELD	7,632		7,632	
d ADR FEES	130		130	
e All other expenses PARTNERSHIP EXPENSE	3,366		3,366	
25 Total functional expenses. Add lines 1 through 24e	158,371	37,850	120,522	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response to any question in this Part X.

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	0	1	0
	2 Savings and temporary cash investments	936,950	2	1,154,416
	3 Pledges and grants receivable, net	0	3	0
	4 Accounts receivable, net	0	4	0
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net	0	7	0
	8 Inventories for sale or use	0	8	0
	9 Prepaid expenses and deferred charges	0	9	0
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 0		
	b Less accumulated depreciation	10b 0	10c	0
	11 Investments—publicly traded securities	17,589,830	11	17,732,494
	12 Investments—other securities. See Part IV, line 11	0	12	0
	13 Investments—program-related. See Part IV, line 11	0	13	0
	14 Intangible assets	0	14	0
	15 Other assets See Part IV, line 11	0	15	0
16 Total assets. Add lines 1 through 15 (must equal line 34)	18,526,780	16	18,886,910	
Liabilities	17 Accounts payable and accrued expenses	0	17	0
	18 Grants payable		18	
	19 Deferred revenue	0	19	0
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	0	23	0
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	0	25	0
	26 Total liabilities. Add lines 17 through 25	0	26	0
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets		27	
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC958), check here <input checked="" type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds	18,526,780	30	18,886,910
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	18,526,780	33	18,886,910	
34 Total liabilities and net assets/fund balances	18,526,780	34	18,886,910	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	586,613
2	Total expenses (must equal Part IX, column (A), line 25)	2	158,371
3	Revenue less expenses. Subtract line 2 from line 1	3	428,242
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	18,526,780
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-68,112
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	18,886,910

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Name of the organization

HOUCK/JOHNS HOPKINS 0101574000

Employer identification number

23-7455346

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is. (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III—Functionally integrated d Type III—Non-functionally integrated
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)		X
11g(ii)		X
11g(iii)		X

h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A) JOHN HOPKINS HOSP	52-0591656	3	X		X		X		
(B)									
(C)									
(D)									
(E)									
Total	1								0

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						0
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 Total. Add lines 1 through 3	0	0	0	0	0	0
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						0

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	0	0	0	0	0	0
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						0
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						0
11 Total support. Add lines 7 through 10						0
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	0.00%
15 Public support percentage from 2011 Schedule A, Part II, line 14	15	0.00%
16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. ▶ <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						0
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						0
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5 The value of services or facilities furnished by a governmental unit to the organization without charge						0
6 Total. Add lines 1 through 5	0	0	0	0	0	0
7a Amounts included on lines 1, 2, and 3 received from disqualified persons.						0
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0
c Add lines 7a and 7b	0	0	0	0	0	0
8 Public support (Subtract line 7c from line 6)						0

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6	0	0	0	0	0	0
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						0
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
c Add lines 10a and 10b	0	0	0	0	0	0
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						0
13 Total support. (Add lines 9, 10c, 11, and 12)	0	0	0	0	0	0

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f)).	15	0.00%
16 Public support percentage from 2011 Schedule A, Part III, line 15.	16	0.00%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f)).	17	0.00%
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	0.00%

- 19a 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.
- b 33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.
- 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

Name of the organization

Employer identification number

HOUCK/JOHNS HOPKINS 0101574000

23-7455346

Form 990 Part VI Section B Line 11B THE TRUSTEE RECEIVES AND REVIEWS THE FORM 990

Form 990 Part VI Section B Line 12C ORGANIZATION COMPLIES WIHT THE SAME POLICY AND ENFORCEMENT

AS ITS TRUSTEE

Form 990 Part VI Section C Line 19 NO DOCUMENTS AVAILABLE TO THE PUBLIC

Form 990 Part XI Line 5 NET ADJUSTMENTS INCLUDE COST BASIS ADJUSTMENT (183), CTF INCOME

TIMING DIFFERENCE (850), CTF BOOK TO TAX DIFFERENCE (-16,979), UNDISTRIBUTED CTF CAPITAL LOSS

(-13,383), SALES PARTNERSHIP ADJUSTMENT (-32), PARTNERSHIP INCOME ADJUSTMENT (-8,163), PY

RETURN OF CAPITAL ADJUSTMENT (-30,661)

Name of the organization

Employer identification number

HOUCK/JOHNS HOPKINS 0101574000

23-7455346

Area with horizontal dashed lines for additional information.

Security Type	Account #	EIN	CUSIP	Asset Name	FMV	Units	Fed Coast
Cash	0101574000	23-7455346			\$441.86	441.86	\$441.86
Cash	0101574000	23-7455346			\$0.00	0.00	\$0.00
Savings & Temp Inv	0101574000	23-7455346	VP0528308	FEDERATED TREAS OBL FD 68	\$698,005.46	698,005.46	\$698,005.46
Savings & Temp Inv	0101574000	23-7455346	VP0528308	FEDERATED TREAS OBL FD 68	\$411,951.34	411,951.34	\$411,951.34
Savings & Temp Inv	0101574000	23-7455346	VP0528308	FEDERATED TREAS OBL FD 68	\$43,011.25	43,011.25	\$43,011.25
Savings & Temp Inv	0101574000	23-7455346	VP0528308	FEDERATED TREAS OBL FD 68	\$1,006.53	1,006.53	\$1,006.53
				TOTAL CASH, SAVINGS, AND TEMP INV	\$1,154,416.44		\$1,154,416.44
Invest - Corp Bonds	0101574003	23-7455346	931142CP6	WAL-MART STORES INC 4 125% 2/01/19	\$111,728.00	100,000.00	\$102,995.00
Invest - Corp Bonds	0101574003	23-7455346	428236AV5	HEWLETT-PACKARD CO 4 750% 6/02/14	\$103,792.00	100,000.00	\$101,475.00
Invest - Corp Bonds	0101574003	23-7455346	532457AX6	ELI LILLY & CO 4 500% 3/15/18	\$112,961.00	100,000.00	\$105,389.00
Invest - Corp Bonds	0101574003	23-7455346	74005PAU8	PRAXAIR INC 4 500% 8/15/19	\$113,957.00	100,000.00	\$104,498.00
Invest - Corp Bonds	0101574003	23-7455346	46625HHP8	JPMORGAN CHASE & CO 3 700% 1/20/15	\$261,347.50	250,000.00	\$253,600.00
Invest - Corp Bonds	0101574003	23-7455346	097014AL8	BOEING CAPITAL CORP 4 700% 10/27/19	\$115,895.00	100,000.00	\$106,250.00
Invest - Corp Bonds	0101574003	23-7455346	61747YCL7	MORGAN STANLEY 4 100% 1/26/15	\$104,532.00	100,000.00	\$102,883.00
Invest - Corp Bonds	0101574003	23-7455346	38141GDK7	GOLDMAN SACHS GROUP 4 750% 7/15/13	\$100,461.00	100,000.00	\$106,292.30
Invest - Corp Bonds	0101574003	23-7455346	36962G4Y7	GENERAL ELEC CAP COR 4 625% 1/07/21	\$110,453.00	100,000.00	\$98,681.00
Invest - Corp Bonds	0101574003	23-7455346	674599CB9	OCCIDENTAL PETROLEUM 1 750% 2/15/17	\$101,306.00	100,000.00	\$102,779.00
Invest - Corp Bonds	0101574003	23-7455346	58013MEM2	MCDONALD'S CORP 2 625% 1/15/22	\$99,578.00	100,000.00	\$101,822.00
Invest - Corp Bonds	0101574003	23-7455346	87612EAZ9	TARGET CORP 2 900% 1/15/22	\$101,065.00	100,000.00	\$104,502.00
Invest - Corp Bonds	0101574003	23-7455346	001055AJ1	AFLAC INC 4 000% 2/15/22	\$105,793.00	100,000.00	\$108,247.00
Invest - Corp Bonds	0101574003	23-7455346	871829AQ0	SYSCO CORPORATION 2 600% 6/12/22	\$97,168.00	100,000.00	\$101,490.00
Invest - Corp Bonds	0101574003	23-7455346	911312AQ9	UNITED PARCEL SERVIC 2 450% 10/01/22	\$97,224.00	100,000.00	\$100,748.00
Invest - Corp Bonds	0101574003	23-7455346	22160KAE5	COSTCO WHOLESALE COR 1 125% 12/15/17	\$99,076.00	100,000.00	\$100,590.00
Invest - Corp Bonds	0101574003	23-7455346	06051GDX4	BANK OF AMERICA NA 5 650% 5/01/18	\$114,525.00	100,000.00	\$105,294.60
Invest - Corp Stock	0101574000	23-7455346	001055102	AFLAC INC	\$161,501.00	2,900.00	\$75,902.16
Invest - Corp Stock	0101574000	23-7455346	008252108	AFFILIATED MANAGERS GROUP, INC COM	\$205,000.00	1,250.00	\$110,025.00
Invest - Corp Stock	0101574000	23-7455346	037833100	APPLE INC	\$179,894.00	400.00	\$33,581.01
Invest - Corp Stock	0101574000	23-7455346	097023105	BOEING CO	\$99,020.00	1,000.00	\$58,467.30
Invest - Corp Stock	0101574000	23-7455346	110122108	BRISTOL MYERS SQUIBB CO	\$46,010.00	1,000.00	\$23,300.00
Invest - Corp Stock	0101574000	23-7455346	126650100	CVS/CAREMARK CORPORATION	\$100,765.00	1,750.00	\$77,715.75
Invest - Corp Stock	0101574000	23-7455346	17275R102	CISCO SYSTEMS INC	\$130,823.87	5,425.00	\$91,807.35
Invest - Corp Stock	0101574000	23-7455346	177376100	CITRIX SYS INC COM	\$119,103.00	1,850.00	\$77,792.13
Invest - Corp Stock	0101574000	23-7455346	194162103	COLGATE PALMOLIVE CO	\$173,520.00	3,000.00	\$78,744.00
Invest - Corp Stock	0101574000	23-7455346	244199105	DEERE & CO	\$28,310.75	325.00	\$31,498.97
Invest - Corp Stock	0101574000	23-7455346	25243Q205	DIAGEO PLC - ADR	\$118,260.00	1,000.00	\$96,767.70
Invest - Corp Stock	0101574000	23-7455346	254687106	WALT DISNEY CO	\$216,049.00	3,425.00	\$117,110.29
Invest - Corp Stock	0101574000	23-7455346	278865100	ECOLAB INC	\$168,940.00	2,000.00	\$97,360.00
Invest - Corp Stock	0101574000	23-7455346	369604103	GENERAL ELECTRIC CO	\$163,240.00	7,000.00	\$58,537.50
Invest - Corp Stock	0101574000	23-7455346	437076102	HOME DEPOT INC	\$149,454.00	1,900.00	\$51,718.00
Invest - Corp Stock	0101574000	23-7455346	459200101	INTERNATIONAL BUSINESS MACHS CORP	\$145,614.00	700.00	\$60,844.84
Invest - Corp Stock	0101574000	23-7455346	478160104	JOHNSON & JOHNSON	\$189,405.00	2,250.00	\$99,373.44
Invest - Corp Stock	0101574000	23-7455346	478366107	JOHNSON CONTROLS INC	\$50,436.00	1,350.00	\$53,986.50
Invest - Corp Stock	0101574000	23-7455346	580135101	MCDONALD'S CORP	\$125,541.00	1,300.00	\$31,106.20
Invest - Corp Stock	0101574000	23-7455346	594918104	MICROSOFT CORP	\$167,520.00	4,800.00	\$78,687.50
Invest - Corp Stock	0101574000	23-7455346	641069406	NESTLE S A REGISTERED SHARES - ADR	\$169,116.00	2,550.00	\$126,932.21
Invest - Corp Stock	0101574000	23-7455346	66987V109	NOVARTIS AG - ADR	\$143,520.00	2,000.00	\$107,444.75
Invest - Corp Stock	0101574000	23-7455346	674599105	OCCIDENTAL PETE CORP	\$59,845.50	650.00	\$53,474.50
Invest - Corp Stock	0101574000	23-7455346	713448108	PEPSICO INC	\$181,732.50	2,250.00	\$82,681.87

Invest - Corp Stock	0101574000	23-7455346	74005P104	PRAXAIR INC COM	\$80,031 00	700 00	\$57,799 00
Invest - Corp Stock	0101574000	23-7455346	742718109	PROCTER & GAMBLE CO	\$176,548 00	2,300 00	\$72,878 92
Invest - Corp Stock	0101574000	23-7455346	778296103	ROSS STORES INC	\$128,636 00	2,000 00	\$46,586 00
Invest - Corp Stock	0101574000	23-7455346	806857108	SCHLUMBERGER LTD	\$157,014 50	2,150 00	\$119,569 92
Invest - Corp Stock	0101574000	23-7455346	872540109	TJX COS INC NEW	\$101,220 00	2,000 00	\$52,720 10
Invest - Corp Stock	0101574000	23-7455346	881624209	TEVA PHARMACEUTICAL INDUSTRIES - ADR	\$76,400 00	2,000 00	\$90,590 94
Invest - Corp Stock	0101574000	23-7455346	883556102	THERMO FISHER SCIENTIFIC INC	\$132,450 00	1,500 00	\$81,630 00
Invest - Corp Stock	0101574000	23-7455346	89151E109	TOTAL SA - ADR	\$49,850 00	1,000 00	\$49,363 40
Invest - Corp Stock	0101574000	23-7455346	907818108	UNION PACIFIC CORP	\$154,620 00	1,000 00	\$81,052 80
Invest - Corp Stock	0101574000	23-7455346	913017109	UNITED TECHNOLOGIES CORP	\$147,095 00	1,550 00	\$41,258 50
Invest - Corp Stock	0101574000	23-7455346	58155Q103	MCKESSON CORP	\$133,216 20	1,170 00	\$79,704 94
Invest - Corp Stock	0101574000	23-7455346	911312106	UNITED PARCEL SERVICE-CL B	\$77,310 00	900 00	\$57,880 44
Invest - Corp Stock	0101574000	23-7455346	30231G102	EXON MOBIL CORPORATION	\$153,799 00	1,700 00	\$24,388 06
Invest - Corp Stock	0101574000	23-7455346	87612E106	TARGET CORP	\$194,600 00	2,800 00	\$55,996 50
Invest - Corp Stock	0101574000	23-7455346	91324P102	UNITEDHEALTH GROUP INC	\$125,260 00	2,000 00	\$72,620 00
Invest - Corp Stock	0101574000	23-7455346	46625H100	JPMORGAN CHASE & CO	\$163,770 00	3,000 00	\$109,051 20
Invest - Corp Stock	0101574000	23-7455346	03524A108	ANHEUSER-BUSCH INBEV SPN ADR	\$183,840 00	2,000 00	\$110,225 21
Invest - Corp Stock	0101574000	23-7455346	166764100	CHEVRON CORP	\$171,850 00	1,400 00	\$45,275 00
Invest - Corp Stock	0101574000	23-7455346	88579Y101	3M CO	\$110,270 00	1,000 00	\$80,714 00
Invest - Corp Stock	0101574000	23-7455346	084670702	BERKSHIRE HATHAWAY INC	\$199,622 50	1,750 00	\$74,387 38
Invest - Corp Stock	0101574000	23-7455346	20825C104	CONOCOPHILLIPS	\$122,680 00	2,000 00	\$53,169 36
Invest - Corp Stock	0101574000	23-7455346	65339F101	NEXTERA ENERGY INC	\$132,335 00	1,750 00	\$90,002 50
Invest - Corp Stock	0101574000	23-7455346	38259P508	GOOGLE INC	\$95,833 98	110 00	\$68,442 30
Invest - Corp Stock	0101574000	23-7455346	89417E109	TRAVELERS COMPANIES, INC	\$167,440 00	2,000 00	\$76,246 80
Invest - Corp Stock	0101574000	23-7455346	G29183103	EATON CORP PLC	\$51,130 44	774 00	\$40,174 93
Invest - Corp Stock	0101574000	23-7455346	12572Q105	CME GROUP INC	\$8,491 25	125 00	\$6,723 75
Invest - Other	0101574000	23-7455346	04314H204	ARTISAN INTERNATIONAL FUND #661	\$813,571 12	30,448 02	\$700,000 00
Invest - Other	0101574000	23-7455346	464287465	ISHARES MSCI EAFE	\$563,877 09	9,387 00	\$531,810 18
Invest - Other	0101574000	23-7455346	29299D444	THE ENDOWMENT TEL FUND LP	\$167,736 72	2,869 75	\$175,520 00
Invest - Other	0101574000	23-7455346	78467Y107	SPDR S&P MIDCAP 400 ETF TRUST	\$1,022,676 20	4,739 00	\$628,139 59
Invest - Other	0101574000	23-7455346	GRA994205	GRAHAM ALT INV FD II BLEND CL 0 (RF)	\$307,381 15	2,436 27	\$300,000 00
Invest - Other	0101574000	23-7455346	70299RF16	PARTNERS GROUP PRIV EQ TEL LLC (RF)	\$431,402 00	31,861 30	\$400,000 00
Invest - Other	0101574000	23-7455346	123998007	CHAMBERS STREET PROPERTIES	\$8 26	0 83	\$6 86
Invest - Other	0101574000	23-7455346	88019R641	TEMPLETON FRONTIER MARKET-AD #674	\$663,864 27	37,848 59	\$550,000 00
Invest - Other	0101574000	23-7455346	06738C778	IPATH DOW JONES-UBS COMMODITY INDEX	\$221,048 70	5,770 00	\$228,691 52
Invest - Other	0101574000	23-7455346	683974505	OPPENHEIMER DEVELOPING MKT-Y #788	\$498,026 54	14,144 46	\$501,993 44
Invest - Other	0101574000	23-7455346	961995008	ASGI MESIROW INSIGHT FUND, LLC	\$412,937 59	405 94	\$400,000 00
Invest - Other	0101574000	23-7455346	78464A607	SPDR DOW JONES REIT ETF	\$1,013,351 30	13,000 00	\$755,933 10
Invest - Other	0101574000	23-7455346	38143H381	GOLDMAN SACHS COMM STRATEGY #2653	\$244,629 35	45,385 78	\$300,000 00
Invest - Other	0101574000	23-7455346	25264S833	DIAMOND HILL LONG-SHORT FD CL I #11	\$439,094 67	21,181 61	\$342,930 18
Invest - Other	0101574000	23-7455346	157842105	CHAMBERS STREET PROPERTIES	\$501,622 81	54,347 00	\$451,344 55
Invest - Other	0101574000	23-7455346	367829884	GATEWAY FUND - Y #1986	\$596,298 60	21,201 23	\$552,086 29
Invest - Other	0101574000	23-7455346	487300808	KEELEY SMALL CAP VAL FD CL I #2251	\$845,459 61	25,184 98	\$486,070 01
Invest - Other	0101574003	23-7455346	693390882	PIMCO FOREIGN BD FD USD H-INST #103	\$287,559 48	26,799 58	\$297,775 71
Invest - Other	0101574003	23-7455346	999708902	TAXABLE INTERMEDIATE TERM BD FD	\$199,261 15	19,497 18	\$195,814 67
Invest - Other	0101574003	23-7455346	991283912	TAXABLE TOTAL RETURN BOND FUND	\$197,866 03	25,597 16	\$189,833 82
Invest - Other	0101574003	23-7455346	922031794	VANGUARD GNMA FUND-ADM #0536	\$599,116 63	56,414 00	\$624,094 70
Invest - Other	0101574003	23-7455346	261980494	DREYFUS EMG MKT DEBT LOC C-I #6083	\$570,242 19	39,057 68	\$554,478 87
Invest - Other	0101574003	23-7455346	693391559	PIMCO EMERG MKTS BD-INST #137	\$566,827 30	47,672 61	\$564,499 65
Invest - Other	0101574003	23-7455346	277911491	EATON VANCE FLOATING RATE FD-I #924	\$611,295 67	66,445 18	\$591,858 93

Invest - Other	0101574003	23-7455346	67065Q772	NUVEEN HIGH YIELD MUNI BD-R #1668	\$229,930 90	13,391 43	\$220,121 95
Invest - Other	0101574003	23-7455346	722005220	PIMCO FOREIGN BOND (UNHEDGED) #1853	\$259,886 15	26,014 63	\$283,567 58
Invest - Other	0101574003	23-7455346	949917744	WF ADV ULTR SHORT-TRMINCOME-#3104	\$159,812 86	18,713 45	\$159,924 01
Invest - Other	0101574003	23-7455346	4812C0803	JPMORGAN HIGH YIELD FUND SS #3580	\$404,426 71	48,902 87	\$380,808 59
Invest - Other	0101574003	23-7455346	464288588	ISHARES BARCLAYS MBS BOND FUND	\$492,673 22	4,633 00	\$503,068 65
Invest - US & State	0101574003	23-7455346	36246LAC5	VR GS MORTGAGE SEC 5 78826% 8/10/45	\$266,395 00	250,000 00	\$270,195 31
Invest - US & State	0101574003	23-7455346	3133XEX79	FED HOME LN BK 5 770% 3/23/18	\$170,034 24	155,924 62	\$171,078 55
				TOTAL OTHER INVESTMENTS	\$22,299,108.50		\$17,732,493.53
				GRAND TOTAL	\$23,453,524.94		\$18,886,909.97