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SCANNED DEC 0 4 2014

Department of the Treasury

Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

2013

OMB No 1545-0047

Open to Public Inspection

A	For	the 2	2013 calend	ar year, or	tax year begi	nning		, 2013, and	dending			, 20	3	
В	Checl	k ıf ap	plicable	C Name of o	rganization JOH	NSON HISTORIC	CAL MUSEUM OF	THE SW			٥	Employe	r identification no	
	Addre	ess ch	ange	Doing Bus	iness As			-			<u>.</u>	95-3277997		
	Name	chan	nge	Number ar	nd street (or PO t	oox if mail is not delivered	to street address)		Room/s	suite	E	Telephon	e number	
	Initial		-	•	N 103RD		ŕ		214			(623) 9	74-2541	
Ē	Termi					ce, country, and ZIP or fore	eign postal code					08,068		
Ī		ided re		•	ITY, AZ	•					G	Gross red	•	
ñ			pending			cipal officer HARVE	Y FINKS							
			, , , , , , , , , , , , , , , , , , ,			AVENUE SUITE		TY. AZ 85351	H(a)	Is this a gr subordinat	oup retur es?	n for	☐ Yes ☒ No	
_	Tax-e	xemot	t status	501(c)(3)	501(c) () (insert no)	4947(a)(1) or	527	Н(Б)			s included?	= =	
<u></u>	•		N/A	551(5)(5)) t (moo)(110)	<u></u>	<u></u>	H(c)	If "No," atta	ach a list	(see instru	ctions)	
				Corporation	Trust A	ssociation Other	i	L Year of formation		M State			AZ	
	rt I		Summar			SSCIALION Cure	 	E Tear or torribation	1970	III Otate	or regar	dominate	<u> Au</u>	
<u></u>					nization's mis	sion or most significa	ant activities Pr	UCATION PRES	2ED1774TT	ON AND	e mi m	DV OF	ARTZONA	
			HISTORY	ibe the orga	mzation 5 imo	sion or most signmor	SIN GONTANCO EL	OCATION FREE	SERVALI	OH AND	3101	DI OF	AKIZORA	
Activities & Governance		Ē	IISIORI						-					
'n		-												
Ş		2 (Chack this h	ov ▶ □ ıf t	he organizatio	on discontinued its o	erations or dispose	od of more than 25°	% of its net	accete				
ဖိ					_	erning body (Part VI	·				3		3	
∞5				•	_	ers of the governing	•				4		1	
ties	- 1					ın calendar year 201		b)			5			
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Ac					ers (estimate i	• •	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	• • • • • • • • •			7a			
						n Part VIII, column (C					7b		0	
		D I	Net unrelate	a business t	axable income	e from Form 990-T, I	ine 34 · · · ·	• • • • • • • • •	· · · · ·	· · · · ·	76		0	
			0 - 4 - 1 - 4		/D - 1 \ / / / /	- 41-5				Pnor Year		Cu	rrent Year	
đ				_	(Part VIII, line	•		• • • • • • • • •	·	66	<u>,879</u>		27,494	
Ž	'		-		•	ne 2g)		· · · · · · · · · · ·	·				1,149	
Revenue	1			•		(A), lines 3, 4, and 7	•		·		,191		298,819	
œ				•	• •	lines 5, 6d, 8c, 9c, 10			•		,038		810	
						(prost equaliPart ∀		2)	<u>' </u>	366	,108		328,272	
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						IX, column (A), line			·				0	
ģ	1					e peugiitā@b#t IX		-10)	·	76	,619		61,316	
Expenses	1			_		column (A), line 11e	~1		•				0	
90	.	Ь.	Total fundras	sing expens	es (Part IX, C	olumn (D), line 25)	2 <u> </u>	0						
Û	1					ines 118 118 111-24			•		<u>,721</u>		117,645	
	1	8 -	Total expens	es Add line	es 13-17 (mus	t equal Part IX, colu	mn (A), line 25)	• • • • • • • • •	·		,340		178,961	
		9 1	Revenue les	s expenses	Subtract line	18 from line 12 ·			•	185	,768		149,311	
S	Fund Balances								Beginnır	g of Current	Year	En	nd of Year	
Sset	쯢 2		Total assets	•	•				•	3,105	,863		<u>3,255,174</u>	
et A	[2		Total liabilitie	s (Part X, lir	ne 26) · ·				•				0	
						t line 21 from line 20			•	3,105	,863		<u>3,255,174</u>	
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	pa		Firm's name	<u> </u>	Tess L	Ridgway CPA			Firm's	EIN P				
Us	e O	nly	Firm's addres	is ►	6350 พ	78th Street (Jnit 295		Phone	no				
			1		Scottsd	lale AZ 85250				41	30-61	L4-800		
May	the	IRS	discuss this	return with t	the preparer s	hown above? (see ii	nstructions) · ·					🔲	Yes 🛛 No	

For Paperwork Reduction Act Notice, see the separate instructions.

36-17

	990 (2013) JOHNSON HISTORICAL MUSEUM OF THE SW	95-3277997	Page 2
Pa	rt III ` Statement of Program Service Accomplishments	_	
	Check if Schedule O contains a response or note to any line in this Part III		🗖
1	Briefly describe the organization's mission		
	EDUCATION PRESERVATION AND STUDY OF ARIZONA HISTORY		
	about 11 about 11 about 10 ANIBORA HIDIORI		
		_	
	Delth- consented and the first section of the secti		
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	X 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	x 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 other	ers,	
	the total expenses, and revenue, if any, for each program service reported		
4a	(Code) (Expenses \$ 148,009 including grants of \$) (Revenue	\$	
	MUSEUM MAINTAINS AND PRESERVES ARIZONA ARTIFACTS AND BOOKS, PRESENTS AND PROVI		TDFC
	AND SUBSIDIZES VISITS BY LOCAL SCHOOLCHILDREN	VIDES LECTO	RES,
	AND SOBSIDIZES VISITS BY LOCAL SCHOOLCHILDREN		
		· · · ·	
	<u> </u>		
4b	(Code) (Expenses \$ including grants of \$) (Revenue	\$)
		*	
	·	_	
			-
4c	(Code) (Expenses \$ including grants of \$) (Revenue	\$)
			·
			
			_
4.	Other was a second of the seco		
4d	Other program services (Describe in Schedule O)		
	(Expenses \$ including grants of \$) (Revenue \$		
4e	Total program service expenses ► 148,009	_	

95-3277997

Page 3 **Checklist of Required Schedules** Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 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 Х 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 Х 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. Х 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 Did the organization receive or hold a conservation easement, including easements to preserve open space. 7 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II R Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes." complete Schedule D. Part III Х 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 Х Did the organization, directly or through a related organization, hold assets in temporarily restricted 10 10 Х endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 11 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 11a Χ 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 Χ 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 Χ 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 11d Χ 11e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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 11f Χ 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Х Schedule D. Parts XI and XII 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 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 13 Did the organization maintain an office, employees, or agents outside of the United States? 14a 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 14b 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 Χ Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 16 assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 Χ 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) 17 Х 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Х Part VIII, lines 1c and 8a? If "Yes" complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?

20a

20b

20a

If "Yes," complete Schedule G. Part III

Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Checklist of Required Schedules (continued)

Yes No 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 Χ 22 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III X 22 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? If "Yes," complete Schedule J 23 Х 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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a. X Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 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? If "Yes," complete Schedule L, Part I 25a X 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? Х 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or 26 disqualified persons? If so, complete Schedule L, Part II Χ 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? If "Yes," complete Schedule L, Part III 27 Х 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) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV Χ A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete 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? If "Yes," complete Schedule L, Part IV 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," X 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? If "Yes." complete Schedule R. Part I Χ 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? X 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)? If "Yes," complete Schedule R, Part V, line 2 X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 Х 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? If "Yes," complete Schedule R. Χ 37 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 38

Form 990 (2013) JOHNSON HISTORICAL MUSEUM OF THE SW 95-3277997 Page 5 Statements Regarding Other IRS Filings and Tax Compliance Part V Check if Schedule O contains a response or note to any line in this Part V No Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 1a Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c Χ Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 2a Statements, filed for the calendar year ending with or within the year covered by this return If at least one is reported on line 2a, did the organization file all required federal employment tax returns?

b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	l		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		<u>X</u>
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
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	1		
	account)?	4a		Χ
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			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<u>X</u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<u>X</u>
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
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		<u>X</u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	1		
а	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		<u>X</u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		Χ
d	If "Yes," indicate the number of Forms 8282 filed during the year · · · · · · · · · · · · · · · · · · ·			
0	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7е		_X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		_X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u>X</u>
, h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		<u>X</u>
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		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
Ь	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			
C	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u>X</u>
_ <u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
EEA		Form	990 (2	2013)

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI 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 or note to any line in the Part VI Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body at the end of the tax year 3 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 b Enter the number of voting members included in line 1a, above, who are independent 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 Х any other officer, director, trustee, or key employee? 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? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 6 Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a one or more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, Х stockholders, or persons other than the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8a Х The governing body? Each committee with authority to act on behalf of the governing body? 8b 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 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) No 10a 10a Did the organization have local chapters, branches, or affiliates? Х If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10h X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990 b Did the organization have a written conflict of interest policy? If "No," go to line 13 12a 12a 12b b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," C 12c describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 13 14 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a with a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 ► AZ List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply Own website Other (explain in Schedule O) Another's website 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 GINNY BAKER (623)974-2541, 12630 N 103RD AVENUE SUITE 214, SUN CITY, AZ 85351

Form 990 (20	13)JOHNSON HISTORICAL	MUSEUM	ог т	HE	SW					95-32779	97 Page 7
Part VII	Compensation of Officers, Direc					Εm	ploye	es	, Highest Con		
	Independent Contractors	·		•			•		, ,	•	,
	Check if Schedule O contains a response or	note to any li	ne in t	hıs F	art '	VII					🗀
Section A.	Officers, Directors, Trustees, Key Employe						d Em	ploy	/ees		
1a Complete organization's	this table for all persons required to be listed. Fitax year	Report compe	ensatio	on fo	r the	cale	endary	/ear	ending with or with	nin the	-
	of the organization's current officers, directors, i. Enter -0- in columns (D), (E), and (F) if no columns				idua	ls or	organ	ızatı	ons), regardless of	amount of	
• List all d	of the organization's current key employees, if	anv See inst	ruction	ns fo	r dei	finitio	on of "i	ev (emplovee "		
 List the who received 	organization's five current highest compensate reportable compensation (Box 5 of Form W-2 and any related organizations	ed employee	s (othe	er tha	an ai	n off	icer, dı	rect	or, trustee, or key	, , ,	
	of the organization's former officers, key emplo eportable compensation from the organization a						emplo	oyee	es who received mo	ore than	
	of the organization's former directors or truste more than \$10,000 of reportable compensation									ee of the	
-	n the following order individual trustees or direct employees, and former such persons	ctors, instituti	onal tr	uste	es, d	office	ers, ke	y en	nployees, highest		
Check this	s box if neither the organization nor any related	organization	comp	ensa	ated	any	currer	ıt of	ficer, director, or tru	stee	
	(A)	(B)			(0	;)			(D)	(E)	(F)
	Name and Title	Average hours per week (list any hours for related organizations below dotted	box, u	nless	perso a dire	ore that	an one both an rustee)	Fo	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related
	•	line)	Indwidual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) ALAN F	INKS	1.00							_	-	
PRESID	ENT		Χ		Χ					0	0
(2) GINNY TREASU		10.00	Х		Х				17,133	0	0
(3) HARVEY SECRET		25.00	х		X					0	0
<u>(5)</u>										<u> </u>	
<u>(6)</u>											
<u>(7)</u>								:			
(8)											
<u>(9)</u>											
(10)											
(11)											

(14)

EEA

Page 8

Compensation Comp	(F) stimated mount of other npensation from the
(16) (17) (18) (19) (20) (21) (23) (25) (25) (25) (26) (27) (27) (28) (29) (29) (29) (29) (29) (29) (29) (29	ganization d related lanizations
(19) (20) (21) (22) (23) (24) (25) (25) (26) (27) (26) (27) (27) (28) (29) (29) (29) (29) (20) (20) (20) (20) (21) (22) (23) (24) (25) (25) (26) (27) (27) (28) (29) (29) (29) (29) (20) (20) (20) (20) (20) (21) (22) (23) (24) (25) (25) (26) (27) (27) (28) (29) (29) (29) (29) (20) (20) (20) (20) (21) (22) (23) (24) (25) (25) (26) (27) (27) (28) (29) (29) (29) (29) (29) (29) (29) (29	
(18) (19) (20) (21) (23) (24) (25) 1b Sub-total c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 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 > 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 4 For any individual isted on line 1a, is the sum of reportable compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person 5 Section B. Independent Contractors 1 Complete this table for your five highest compensation from the organization from the organization? Report compensation from the calendar year ending with or within the organization's tax year (A) (B)	
(29) (21) (22) (23) (24) (25) 1b Sub-total c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 2 Total number of indviduals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 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? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person 5 Section B. Independent Contractors 1 Complete this table for your five highest compensation for the calendar year ending with or within the organization's tax year (A) (8)	
(20) (21) (22) (23) (24) (25) 1b Sub-total c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 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 ▶ 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 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? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person 5 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) (B)	
(21) (22) (23) (24) (25) 1b Sub-total c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 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 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 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? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person 5 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) (B)	
(22) (23) (24) (25) 1b Sub-total 1 Total from continuation sheets to Part VII, Section A 1 Total (add lines 1b and 1c) 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 ▶ 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 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? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person 5 Section B. Independent Contractors 1 Complete this table for your five highest compensation for the calendar year ending with or writhin the organization's tax year (A) (B)	
(23) (24) (25) 1b Sub-total c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 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 ▶ 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 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? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person 5 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) (B)	
(24) (25)	
1b Sub-total	
1b Sub-total	-
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)	
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 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	0
employee on line 1a? If "Yes," complete Schedule J for such individual 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? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person 5 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) (B)	Yes No
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? If "Yes," complete Schedule J for such individual	_x
Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	
for services rendered to the organization? If "Yes," complete Schedule J for such person	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) (B)	
compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year (A) (B)	X
(A) (B)	
Name and business address Description of services Com	(C)
1	pensation
	
Total number of independent contractors (including but not limited to those listed above) who	

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (A) (B) (D) Unrelated Total revenue Related or Revenue excluded from tax under sections 512-514 business revenue Contributions, Gifts, Grants and Other Similar Amounts 1a 1b С 1c 1d Government grants (contributions) . . 10 All other contributions, gifts, grants, and similar amounts not included above 1f 27,494 Noncash contributions included in lines 1a-1f \$ 27,494 **Business Code** Program Service Revenue 2a REBATES AND REFUNDS 900099 1,149 1,149 All other program service revenue g Total. Add lines 2a-2f · · · · · · · · · · · ▶ 1,149 Investment income (including dividends, interest, 52,479 52,479 Income from investment of tax-exempt bond proceeds 810 810 (ı) Real (II) Personal 6a Gross rents **b** Less rental expenses · · · · c Rental income or (loss) . . . d Net rental income or (loss) . . (II) Other 7a Gross amount from sales of (i) Securities assets other than inventory 526,136 b Less cost or other basis and sales expenses 279,796 246,340 c Gain or (loss) · · · · · · d Net gain or (loss) 246,340 246,340 Other Revenue 8a Gross income from fundraising events (not including of contributions reported on line 1c) See Part IV, line 18 a **b** Less. direct expenses **b** c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 a **b** Less direct expenses **b** c Net income or (loss) from gaming activities · · · · · · · ▶ 10a Gross sales of inventory, less returns and allowances a **b** Less cost of goods sold c Net income or (loss) from sales of inventory **Business Code** 11a b e Total. Add lines 11a-11d Total revenue. See instructions 300,778 328,272

3) JOHNSON HISTORICAL MUSEUM OF THE SW Statement of Functional Expenses Part IX

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 or note to an	y line in this Part IX		 	
	ot include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
8b, 9	b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16 · · · · · ·		:		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	17,133		17,133	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	37,695	37,695		
8	Pension plan accruals and contributions (include	3.,033	37,033		·
•	section 401(k) and 403(b) employer contributions) · ·				
9	Other employee benefits	1,690	1,166	524	
10	Payroll taxes	4,798	3,311	1,487	
11	Fees for services (non-employees)	4,790	3,311	1,40/	
	Management	10 000		10.000	
a	Legal	10,000		10,000	
b	-	1 000		1 000	
C	Accounting	1,000		1,000	
d	Lobbying				
0	Professional fundraising services See Part IV, line 17				
f	Investment management fees	25,381	25,381		
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O) · ·				
12	Advertising and promotion	4,990	4,990		· · · · · · · · · · · · · · · · · · ·
13	Office expenses · · · · · · · · · · · · · · · · · ·	5,137	5,137		
14	Information technology				_
15	Royalties				
16	Occupancy · · · · · · · · · · · · · · · · · · ·	11,260	11,260		
17	Travel	1,226	1,226		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings · · · · · ·				
20	Interest · · · · · · · · · · · · · · · · · · ·				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	5,357	5,357		
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)				
а	REPAIRS AND MAINTENANCE	11,265	11,265		
b	FIELD PREPARATION	3,130	3,130		
c	FUEL AND PROPANE COSTS	8,146	8,146		
d	FOREIGN TAX PAID	808	0,140	808	
	All other expenses		29,945		
9 25		29,945		20.050	
25 26	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	178,961	148,009	30,952	0
20	organization reported in column (B) joint costs			ļ	
	from a combined educational campaign and				
	fundraising solicitation Check here ▶ ☐ if				
	following SOP 98-2 (ASC 958-720)				Form 990 (2013

Balance Sheet

Part X

Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year End of year 1 Cash - non-interest-bearing 1 68,325 35,008 2 2 31,901 494,326 3 Pledges and grants receivable, net 3 4 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees 5 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 7 7 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment, cost or other basis Complete Part VI of Schedule D | 10a Less accumulated depreciation 10b b 10c 11 2,250,834 11 1,971,037 12 Investments - other securities See Part IV, line 11 12 13 13 Investments - program-related See Part IV, line 11 14 14 15 15 754,803 754,803 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 3,105,863 3,255,174 17 Accounts payable and accrued expenses 17 18 18 19 19 20 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, _iabilities trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 25 26 Total liabilities, Add lines 17 through 25 0 26 0 Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and Net Assets of Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 27 28 Temporarily restricted net assets 28 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here > 🔯 and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 32 3,105,863 3,255,174 33 Total net assets or fund balances 33 3,105,863 3,255,174 34 34 3,105,863 3,255,174

Form		5-327799	7	P	age 12
Pai	rt XI ` Reconciliation of Net Assets	_			
	Check if Schedule O contains a response or note to any line in this Part XI			· · ·	<u>. 🗆 _</u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3	28,2	272
2	Total expenses (must equal Part IX, column (A), line 25)	2	1	78,	961_
3	Revenue less expenses Subtract line 2 from line 1	3	1	49,3	311
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,1	.05,8	363
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			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	3,2	55,	174
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u>.□</u>
				Yes	No
1	Accounting method used to prepare the Form 990 🔯 Cash 🔲 Accrual 🔲 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?		2a		X
	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				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		Х
	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				
	Separate basis Consolidated basis Both consolidated and separate basis				
C	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?		2c		
	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?		3a		Х
b	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		3b		
EEA			Form	990 (2013)

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SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

OMB No 1545-0047

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Employer identification number

		N HISTORICAL N			otione m	uet com	nloto thi	2 224 \ 6		277997	-		
	rt I			Status (All organiz			' 	s part.)	see instr	uctions.			
	orgar			ise it is (For lines 1 throi	-	-							
1	님			ssociation of churches de		section 17	0(b)(1)(A)((i).					
2	Ц	A school described in	section 170(b)(1)(A)(ii). (Attach Schedule	eE)								
3	Ц	A hospital or a coope	rative hospital ser	vice organization describ	ed in secti	on 170(b)(1)(A)(iii).						
4	Ц		-	ed in conjunction with a	hospital des	scribed in s	ection 170	0(b)(1)(A)(iii). Enter t	he			
	_	hospital's name, city,	and state										
5		An organization oper	ated for the benefi	t of a college or universit	y owned or	operated b	y a govern	nmental un	it describe	d in			
		section 170(b)(1)(A)	(iv). (Complete Pa	art II)									
6		A federal, state, or lo	cal government or	governmental unit descr	ibed in sec	tion 170(b)(1)(A)(v).						
7	X	An organization that	normally receives	a substantial part of its si	upport from	a governn	nental unit	or from the	e general p	ublic			
		described in section	170(b)(1)(A)(vi). (Complete Part II)									
8		A community trust de	scribed in section	170(b)(1)(A)(vi). (Comp	olete Part II)							
9		An organization that	normally receives	(1) more than 33 1/3% of	of its suppoi	t from con	tributions, i	membersh	ıp fees, an	d gross			
		receipts from activitie	es related to its exe	empt functions - subject t	o certain ex	ceptions, a	and (2) no	more than	33 1/3% o	f its			
				and unrelated business t									
		• • •		30, 1975 See section 5		•		,					
10	П	•		d exclusively to test for p				(4).					
11		-	· ·	d exclusively for the bene	-		• •		v out the				
		•	· ·	orted organizations descr	-				•	ction			
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		or section 509(a)(2)	· ···ariagoro aira oi	с с						~(~)(.)			
f			ceived a written de	termination from the IRS	that it is a	Tyne I Tyr	ell or Tvn	e III sunno	ortina				
•		organization, check t					• •						П
~				ation accepted any gift o									· • Ш
g		following persons?	o, nas the organiz	ation accepted any gift o	, commodit	511 11 O 111 a 11	y or the						
		- -	rectly or indirectly	controls, either alone or	together w	th noreone	described	ın (ıı) and				Yes	No No
			-	he supported organization	-	in persons	described				44.5(1)	162	IVO
		(ii) A family member									11g(ı)		
		•	<u>-</u>	* *							11g(ii)		
				n described in (i) or (ii) al							11g(ui)	<u> </u>	
<u>h</u>	(a) Ni	-	r	the supported organization	T ' '		(v.) Dud va			- 45 -	T		
	(1) 146	ame of supported organization	(ii) EIN	(III) Type of organization (described on lines 1-9	(iv) is the or		(v) Did yo the organi		(vi) is organizati		(vii) Amou	int of mor support	netary
				above or IRC section	governing o	document?	∞l (ı) c		(ı) organız				
				(see instructions))	Vac	Ma		port?	<u> </u>	S?	-		
(A)				-	Yes	No	Yes	No	Yes	No	+		
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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.)

366	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	23,526	35,703	56,945	66,879	27,194	210,247
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3 · · · · ·	23,526	35,703	56,945	66,879	27,194	210,247
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			j			
	shown on line 11, column (f)						16,983
6	Public support. Subtract line 5 from line 4 · ·						193,264
Sec	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4 · · · · · · · · · · ·	23,526	35,703	56,945	66,879	27,194	210,247
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar						
	sources · · · · · · · · · · · · · · · · · · ·	34,254	37,719	95,725	48,214	52,477	268,389
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)			:			
11	Total support. Add lines 7 through 10		· · ·				478,636
12	Gross receipts from related activities, etc. (s	ee instructions)				12	
13	First five years. If the Form 990 is for the or organization, check this box and stop here						▶□
Sec	tion C. Computation of Public Su	pport Percent	tage				
14	Public support percentage for 2013 (line 6, c	column (f) divided b	y line 11, column (f))		14	40.38 %
15	Public support percentage from 2012 Sched	ule A, Part II, line 1	4			15	27.75 %
16a	33 1/3% support test - 2013. If the organization	ition did not check	the box on line 13,				
	box and stop here. The organization qualifie	es as a publicly sup	ported organization	٠ ٠ ٠ ٠ ٠ ٠			· · · · > 🔯
b	33 1/3% support test - 2012. If the organization	ition 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 organiza	tion qualifies as a p	oublicly supported o	rganization			▶ 🔲
17a	10%-facts-and-circumstances test - 2013.	If the organization	did not check a bo	x on line 13, 16a, o	r 16b, and line 14 i	s	
	10% or more, and if the organization meets	the "facts-and-circu	ımstances" test, ch	eck this box and st	op here. Explain ir	1	
	Part IV how the organization meets the "fact	s-and-circumstanc	es" test The organ	ızatıon qualifies as	a publicly supporte	d	
	organization						▶ 🔲
b	10%-facts-and-circumstances test - 2012.	If the organization	did not check a bo	x on line 13, 16a, 1	6b, or 17a, and line	•	
	15 is 10% or more, and if the organization m	eets the "facts-and	l-cırcumstances" te	st, check this box a	ind stop here.		
	Explain in Part IV how the organization meet	ts the "facts-and-ci	rcumstances" test	The organization q	ualifies as a publicl	y	
	supported organization					<i></i>	▶ 🔲
18	Private foundation. If the organization did r	ot check a box on	line 13, 16a, 16b, 1	7a, or 17b, check t	his box and see		
	instructions						▶ □

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.)

Se	ction A. Public Support	dainy drider ti	ile tests listed t	below, please	complete Fait	<u>. </u>	
	endar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	, , , , , , , , , , , , , , , , , , , ,		1	(4) =	(4/	30/-510	(7 : 5:2:
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
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						
3	Gross receipts from activities that are not an unrelated trade or bus under sec 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
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 • •						
C	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6)						
	ction B. Total Support						
	endar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6 · · · · · · · · · · · · · · · · · ·						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b · · · · · · · · · · ·			ļ			
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)	·					
14	First five years. If the Form 990 is for the org organization, check this box and stop here					3)	▶□
Se	ction C. Computation of Public Su	pport Percen	itage				
15	Public support percentage for 2013 (line 8, co		-	n) · · · · · ·		. 15	%
16	Public support percentage from 2012 Schedu					. 16	%
	ction D. Computation of Investmen					- 	
17	Investment income percentage for 2013 (line		•	` ' ' '		 	%
18	Investment income percentage from 2012 Sch						%
	33 1/3% support tests - 2013. If the organiza 17 is not more than 33 1/3%, check this box a	ind stop here. The	e organization qual	ifies as a publicly	supported organiza	tion	▶ 🗀
	33 1/3% support tests - 2012. If the organiza line 18 is not more than 33 1/3%, check this b	ox and stop here	. The organization	qualifies as a publ	icly supported orga	nızatıon	▶ □
20	Private foundation. If the organization did no	t check a box on	line 14, 19a, or 19b	, check this box ai	nd see instructions		▶ □

SCHEDULE D (Form 990)

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

2013

Department of the Treasury Internal Revenue Service

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No 1545-0047

Complete if the organization answered "Yes" to Form 990. Part IV, line 7.		of the organization	Employer Identification number
Complete if the organization answered "Yes" to Form 990. Part IV, line 6. Total number at end of year			95-3277997
Total number at end of year Carbon	Pa	organizations Maintaining Donor Advised Funds or Other Similar Funds or Account	ts.
1 Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate value and of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organizations property, subject to the organization's exclusive legal control? 5 Did the organization from all donors and donor advisors in writing that graft funds can be used only for chartable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part III Conservation Easements Complete if the organization answered. "Yes" to Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization (check all that apply)		Complete if the organization answered "Yes" to Form 990, Part IV, line 6.	
2 Aggregate contributions to (during year) 4 Aggregate value at end of year 5 Did the organization informal donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 6 Did the organization informal grantees, donors, and donor advisors in writing that grant funds can be used only for chartable purposes and not for the heartef of the donor or donor advisor, or for any other purpose conferring impermisable private benefit? Part III Conservation Easements Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Protection of natural habitat Preservation of land for public use (e.g., recreation or education) Preservation of an abitation of public use (e.g., recreation or education) Preservation or the last day of the the xyear Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easements 2 complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easements 3 Total number of conservation easements and certified historic structure included in (a) 4 Number of conservation easements in calcided in (a) Number of conservation easements included in (a) Number of conservation easements in cluded in (a) Number of conservation easements included in (a) Number of conservation easements included in (a) Number of conservation easements in contact in the c		(a) Donor advised funds	(b) Funds and other accounts
3 Aggregate grants from (during year) 5 Did the organization inform all donors and donor adviseors in writing that the assets held in donor advised furtos are the organizations property, subject to the organizations' exclusive legal control? 6 Did the organization inform all donors and donor adviseors in writing that the assets held in donor advised furtos are the organizations' property, subject to the organizations' exclusive legal control? 7 Did the organization may be a subject to the property and onor adviseors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor adviseor, or for any other purpose conferring membrable private benefit? Part III Conservation Easements Complete if the organization answered "Yes" to Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization (check all that apply)	1	Total number at end of year · · · · · · · · · ·	
A Aggregate value at end of year Dot the organization inform all donors and often advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Dot the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charatable purposes and not for the benefit of the donor or donor advisor, of for any other purpose conferring impermissible private benefit? Part III	2	Aggregate contributions to (during year)	-
5 Did the organization inform all idonors and donor advisors in writing that the assets held in donor advised funds are the organizations property, subject to the organizations exclusive legal control? 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermisable provise benefit? 8 Part III	3	Aggregate grants from (during year)	
5 Did the organization inform all idonors and donor advisors in writing that the assets held in donor advised funds are the organizations property, subject to the organizations exclusive legal control? 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermisable provise benefit? 8 Part III	4	Aggregate value at end of year	
tunds are the organization's property, subject to the organization's exclusive legal control?	5		-
only for chartable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermisable private benefit? Part II		funds are the organization's property, subject to the organization's exclusive legal control?	
only for chartable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermisable private benefit? Part II	6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used	
conferring impermisable private benefit? Part II Conservation Easements Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of an organization public use (e.g., recreation or education) Preservation of an organization public use (e.g., recreation or education) Preservation of an organization per preservation of an organization per preservation of pen space Preservation of pen space Preservation of an organization pen space Preservation of a conservation easements Preservation of pen space Preservation of pen space Preservation of pen space Preservation of a conservation easement on the last day of the tax year Hold at the End of the Tax Year A total number of conservation easements 2			
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Preservation of land for public use (e.g., recreation or education) Preservation of land for public use (e.g., recreation or education) Preservation of an Instincially important land area Preservation of open space Preservation open space	Pa		
Preservation of land for public use (e.g., recreation or education) Preservation of land for public use (e.g., recreation or education) Preservation of an Instincially important land area Preservation of open space Preservation open space		Complete if the organization answered "Yes" to Form 990, Part IV, line 7.	
Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Protection of natural habitat Protection of natural habitat Preservation of open space	1	· · · · · · · · · · · · · · · · ·	
Protection of natural habitat			important land area
Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2			
Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year		-	
easement on the last day of the tax year 1 Total number of conservation easements 2	2		ervation
a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year A number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easement is located Number of states where property subject to conservation easement is located Number of states where property subject to conservation easement is notids? Number of states where property subject to conservation easement is notidated in the violations, and enforcement of the conservation easements at notids? Number of states where property subject to conservation easements during the year Part of states where property subject to conservation, and enforcing conservation easements during the year Part Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Part Number of conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(iii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8 If the organization elected, as permitted under SFAS 116 (ASC 958), not port in its revenue statement and balance sheet works of art,			
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Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)?	7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year	
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)?	•		
(i) and section 170(h)(4)(B)(ii)?	8		
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part X			· · · · · · · · · · · · · · · · · · ·
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Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8 If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenues included in Form 990, Part VIII, line 1 * \$ Revenues included in Form 990, Part VIII, line 1 * \$ Revenues included in Form 990, Part VIII, line 1			
Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenues included in Form 990, Part VIII, line 1 * \$ S	Pa		er Similar Assets.
If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1	-		
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public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1			
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1			
works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1	b		ince sheet
public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1			
(i) Revenues included in Form 990, Part VIII, line 1			
(ii) Assets included in Form 990, Part X			▶ s
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenues included in Form 990, Part VIII, line 1			
following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenues included in Form 990, Part VIII, line 1	2		
a Revenues included in Form 990, Part VIII, line 1	_		
	а		▶ s
D Assets included in Form 990, Part X · · · · · · · · · · · · · · · · · ·	b	Assets included in Form 990, Part X	

Schedu	ule D (Form 990) 2013 JOHNSON HISTORI						95-327		Page	
Par	rt III Organizations Maintaining C	ollections of	of Art, Histo	rical Tr	reasures,	or Oth	er Similar As	sets (c	ontinued))
3	Using the organization's acquisition, accession, a	and other record	ds, check any o	f the follow	ving that are a	significa	ant use of its			
•	collection items (check all that apply)		-		_	_				
а	☑ Public exhibition	d□	Loan or excha	nge progra	ams					
	Scholarly research	• □	Other							
	Preservation for future generations									
4	Provide a description of the organization's collect	tions and explai	n how they furti	ner the ora	anization's e	xempt pu	imose in Part			
-	XIII				,	p. p.				
5	During the year, did the organization solicit or rec	reive donations	of art. historica	treasures	or other sim	ular				
•	assets to be sold to raise funds rather than to be							г	Yes 🛚	Nο
Par	rt IV Escrow and Custodial Arrang		part of the orga	INEGUIOTI S (CONCOLION			· · <u>_</u>	100 [23]	
	Complete if the organization ar	•	s" to Form 9	90. Part	t IV. line 9.	or rep	orted an amou	ınt on F	-orm	
	990, Part X, line 21.			oo,		оор			•	
1a	Is the organization an agent, trustee, custodian of	or other interme	diany for contrib	utions or o	ther assets r	not.				—
Ia									Yes \square	N۸
	If "Yes," explain the arrangement in Part XIII and							·	163	140
D	ii res, explain the arrangement in Part Alli and	complete the it	niowing table				1	nount		—
_	Beginning balance					4.		nount		—
C	Beginning balance									—
a										—
6	Distributions during the year									
f	_									
2a	Did the organization include an amount on Form									No
	If "Yes," explain the arrangement in Part XIII Che	eck here if the e	explanation has	been prov	ided in Part X	KIII		• • • •	· · · · <u> </u>	—
Pai		severed IIVe	all to Forms O	00 Davi	N/ line 40					
	Complete if the organization ar	iswered te	s to Form 9	90, Part	TV, line TC).		-		—
		(a) Current yea	r (b) Pn	or year	(c) Two year	s back	(d) Three years back	(e) F	our years back	
1a	Beginning of year balance							_		
b	Contributions				· · · · · · · · · · · · · · · · · · ·					
С	Net investment earnings, gains, and									
	losses							_		
d	Grants or scholarships									
0	Other expenditures for facilities and									
	programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the current			mn (a)) he	eld as					
а	Board designated or quasi-endowment	%								
b	Permanent endowment > %									
C	Temporarily restricted endowment ▶	%								
	The percentages in lines 2a, 2b, and 2c should e	qual 100%								
3a	Are there endowment funds not in the possessio	n of the organiz	ation that are h	eld and ad	lministered fo	r the				
	organization by								Yes N	lo
	(i) unrelated organizations							. За	(i)	
	(ii) related organizations							- 3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations list	ed as required	on Schedule R?	•			. 	. 3	b	
4	Describe in Part XIII the intended uses of the org	janızatıon's end	owment funds							
Par	t VI Land, Buildings, and Equipm	ent.								
	Complete if the organization ar	swered "Yes	s" to Form 9	90, Part	t IV, line 11	a. See	Form 990, Pa	art X, lii	ne 10.	
	Description of property	(a) Cost	or other basis	(b) Cost o	or other basis	(c)	Accumulated	(d) E	Book value	_
		(In	vestment)	((other)	d	epreciation			
1a	Land				_					_
b	Buildings					[_
С	Leasehold improvements									_
d	Equipment								_	_
е	Other	🖯								_
	. Add lines 1a through 1e (Column (d) must equa	al Form 990. Pa	rt X, column (B), line 10(c	:)) · ·					_

	Complete if the organization answ	vered tes to Form 990, P	art IV, line 11b. See Form 990,	Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuate Cost or end-of-year marke	
(1) Financial d	erivatives · · · · · · · · · · · · · · · · · · ·	• •		
	ld equity interests	• •		
3) Other				
(A)_				
(B)				
(C)			_	
(D)				
(E)				
(F)				
(G)				
(H)			-	
	must equal Form 990, Part X, col (B) line 12)	<u> </u>	 	
Part VIII	Investments - Program Related			
Tart VIII	Complete if the organization answ		Part IV line 11c See Form 990	Part Y line 13
	Complete if the organization ansv	vered les to ronni 990, r	art 14, line 11c. See 1 oilli 990,	rantin, line 15.
	(a) Description of investment	(b) Book value	(c) Method of valuati	
(4)		- 	Cost or end-of-year marke	. value
(1)				
(2)				
(3)			· · · · · · · · · · · · · · · · · · ·	
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b)	must equal Form 990, Part X, col (B) line 13)	>		
Part IX	Other Assets.			
	Complete if the organization answ	vered "Yes" to Form 990, P	Part IV, line 11d. See Form 990,	Part X, line 15.
		(a) Description		(b) Book value
(1) BUILD	INGS			525,71
(2) EQUIP				108,828
	UES HEIRLOOMS		_	27,084
(4) AUTOS	****			67,26
(5) LIVES				2,650
	OUTSIDE PROJECTS			17,42
	RESTORATION			
				5,630
(8) OTHER				200
(9)	- (h) must soud Form 000 Bod V and (B) lin	15)		754 000
Part X	n (b) must equal Form 990, Part X, col. (B) line Other Liabilities.	: 15)		754,80
PartA	Complete if the organization answ	varad "Vas" to Form 000 B	Part IV line 11e or 11f See For	m 000 Bort V
	line 25.	vered tes to Form 990, P	artiv, line Tie of Til. See Fon	11 990, Part X,
1.	(a) Description of liability	(b) Book value		
(1) Federal ı	ncome taxes			
(2)				
(3)				
(4)				
(5)				
			─	
(6)				
(6) (7)				
(6) (7) (8)				
(6) (7) (8) (9)	must equal Form 990, Part X, col (B) line 25)	•		

		5-3277997 Tage 4
<u>Pa</u>	Reconciliation of Revenue per Audited Financial Statements With Revenue per Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	Return.
1	Total revenue, gains, and other support per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	-
- а	Net unrealized gains on investments	
b	Donated services and use of facilities	
	Recoveries of prior year grants	
C	Other (Describe in Part XIII)	1
d	Other (Describe in Part XIII)	_
	Add lines 2a through 2d	2ө
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b	Other (Describe in Part XIII)	
C	Add lines 4a and 4b · · · · · · · · · · · · · · · · · ·	4c
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses p	er Return.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a	
1	Total expenses and losses per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
а	Donated services and use of facilities	
b	Prior year adjustments	
С	Other losses	
d	Other (Describe in Part XIII)	
9	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
	Investment expenses not included on Form 990, Part VIII, line 7b	
a	Other (Describe in Part XIII)	
b	Add lines 4a and 4b	4.
C		4c 5
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)] 3]
		V 1
	ide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part	X, line
2, Pa	art XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information	
		· · · · · · · · · · · · · · · · · ·

EEA

Schedule D (Form 990) 2013

SCHEDULE L

(Form 990 or 990-EZ)

Transactions With Interested Persons

28a

OMB No 1545-0047

2013

Department of the Treasury Internal Revenue Service ► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, of Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ► Information about Schedule L (Form 990 or 990EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization								Employ	er ident	ification	numbe	er		
JOHNSON HISTORICAL								95-3	2779	97				
	fit Transaction													
Complete if th	e organization a					ne 25a	or 25b, o	r Form	990-1	EZ, P	<u>art V,</u>	line 4	<u>Юb.</u>	
1 (a) Name of disqualified po	erson	(b) Relationship be			son and		(c) De	scription o	of transa	ction			(d) Con	
			organizatio	n									Yes	No
445														ĺ
(1)													\vdash	
(2)					-									
(3)														
2 Enter the amount of tax i		=			-	-	•							
under section 4958 · ·										▶ \$	<u>;</u>			
3 Enter the amount of tax,	if any, on line 2, ab	ove, reimbursed	by the c	organizati	on					▶ \$	<u></u>			
Part II Loans to and	/or From Intere	eted Persons												
	e organization a			rm 990-	EZ. Part \	V. line 3	88a or For	m 990.	Part	IV. lin	ne 26.	or if	the	
	eported an amo									,				
(a) Name of interested person	(b) Relationship	(c) Purpose of	(d) L	oan to or	(e) On	aınal	(f) Balan	ance due (g) In		In default? (h) Appro		proved	ed (ı) Written	
(a)	with organization			from the principal organization?				(8)	(8)		by board or		agreement?	
											committee?			
			То	From					Yes	No	Yes	No	Yes	No
														1
(1)			 										ļ	
(0)			1									ŀ		1
(2)			╂		 						├──	-	\vdash	
(3)														1
(0)	_		 										\vdash	
(4)				•										1
(5)														
Total						. 🕨 ş	3							
	ssistance Bene	_												
Complete if the	he organization	answered "Yes	s" on Fo	orm 990	, Part IV,	line 27.								
(a) Name of interested person	1 ''	hip between intereste and the organization	ed (c) Amount of	assistance	(0	i) Type of assi	stance		(ө) Purpos	se of ass	ustance	
(1)														
								-						
(2)														
(3)														
(4)														
(4)	- +													

(5)

Schedule L (Form	990 or 990-EZ) 2013 JOHNSON H	ISTORICAL MUSEUM OF TH	HE SW	95-3277997		Page 2
Part IV		Involving Interested Persons on answered "Yes" on Form 9		20h oz 20a		
(n) Name of interested person	(b) Relationship between interested person and the	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
		organization			-	
		BUSINESS OF A			Yes	No
(1) H FIN	KS PC	DIRECTOR	10,000	OPERATIONS MANAGEMENT		X
<u>, , , , , , , , , , , , , , , , , , , </u>						
(2)						<u> </u>
40)						
(3)						-
(4)						
-						
(5)	Complemental Information		1			⊥
Part V	Supplemental Informatio	on tion for responses to questions	s on Schadula I. (sa	= instructions)		
	Flovide additional informa	tion for responses to questions	S OII Scriedule L (Sei	e mstructions).		
						_
			· · · · · · · · · · · · · · · · · · ·			
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	<u> </u>		 			
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Schedule L (Form 990 or 990-EZ) 2013

EEA

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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.

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service
Name of the organization

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Employer identification number

JOHNSON HISTORICAL MUSEUM OF THE SW 95-3277997 01. Officer, directors, etc. family relationship (Part VI, line 2) THE PRESIDENT IS THE SON OF THE SECRETARY. 02. Form 990 governing body review (Part VI, line 11) THE SECRETARY AND THE TREASURER REVIEW THE 990. 03. Governing documents, etc, available to public (Part VI, line 19) AVAILABLE UPON REQUEST 04. List of other expenses (Part IX, line 24e) AUTO AND TRUCK EXPENSE \$10,088 TOOLS AND EQUIPMENT RENTALS 516 IRRIGATION 1,092 17,314 LIVESTOCK EXPENSES RANCH PROPANE RENTALS 743 SCHOOL GRANT 192

990 Overflow Statement	2013 Page 1			
Name(s) as shown on return	FEIN			
JOHNSON HISTORICAL MUSEUM OF THE SW	95-3277997			

Description		Amount		
AUTO TRUCK EXPENSES	\$		10,088	
EQUIPMENT RENTS AND TOOLS			516	
IRRIGATION EXP			1,092	
LIVESTOCK EXPENSES			17,314	
RANCH PROPANE RENTALS			743	
SCHOOL GRANT			192	
To	tal: \$		29,945	