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DLN: 93491117005046

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its instructions is at $\underline{www.irs.gov/form990pf}$.

Open to Public Inspection

For	cale	ndar year 2015, or tax	year beginning 01-0	01-2015	, and ending 1	2-31-2015	
	e of four	ndation OND C AND ANNA T JOHNSON FOUNT)		A Employer id	entification numb	er
	L KATM	SND C AND ANNA I JOHNSON I GONE	,		26-1548389		
		street (or P O box number if mail is	not delivered to street address) Room/suite	B Telephone nu	mber (see instructior	ns)
40	7 VINE S	TREET NO 218			(513) 800-2056	5	
		state or province, country, and ZIP OH 45202	or foreign postal code		C If exemption	application is pendir	ng, check here 🕨 🦵
G CH	neck al	I that apply Tinitial return	Initial return of a f	ormer public charity	D.1 Foreign of	raanizations shock b	ere 🕨 🖵
		Final return Address chan	A mended return ge Name change		2. Foreign o	rganizations, check h rganizations meeting :k here and attach co	the 85%
H Ch	eck ty	pe of organization	n 501(c)(3) exempt privat ble trust Other taxabl	e foundation e private foundation		undation status was n 507(b)(1)(A), chec	
		et value of all assets at end rom Part II, col. (c),	JAccounting method Other (specify)	▼ Cash	F II the lound	ation is in a 60-mont n 507(b)(1)(B), chec	
		\$ 5,581,030	(Part I, column (d) must	be on cash basıs.)	differ seeds	11 307 (B)(1)(B), che.	sk here
Pa	rt I	Analysis of Revenue (The total of amounts in columns necessarily equal the amounts in instructions))	(b), (c), and (d) may not	Revenue and expenses per (a) books	Net investment (b) income	Adjusted net (c) income	Disbursements for charitable purposes (d) (cash basis only)
	1	Contributions, gifts, grants,	etc , received (attach			,	
		schedule)		524,757			
	2	Check 🟲 🦵 if the foundation	is not required to attach				
		Sch B					
	3	Interest on savings and tem	porary cash investments	21	21		
	4	Dividends and interest from	securities	113,248	113,248		
	5a	Gross rents					
	b	Net rental income or (loss)					
\$	6a	Net gain or (loss) from sale	of assets not on line 10	64,488			
Revenue	b	Gross sales price for all ass 64,488	ets on line 6a				
	7	Capital gain net income (from	m Part IV , line 2)		64,488	3	
	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances	1				
	Ь	Less Cost of goods sold .					
	С	Gross profit or (loss) (attach					
	11	Other income (attach sched	•	17,448	0		
	12	Total.Add lines 1 through 11		719,962	177,757		
	13	Compensation of officers, di		79,133	317		78,816
	14	Other employee salaries and		4 202	10		4.265
Š.	15	Pension plans, employee bei		4,383	18		4,365
Ē	16a	Legal fees (attach schedule)		4,780	2,390		2,390
Expenses	b	Accounting fees (attach sch					<u> </u>
	С	Other professional fees (atta		38,102	36,659		1,443
ů Ú	17	Interest		% 8,583	1,535		7,048
	18	Taxes (attach schedule) (se	•	8,583	1,333		7,048
듣	19	Depreciation (attach schedu		1 000			1.000
and Administrative	20	Occupancy		1,998 10,529	0		1,998 10,529
Ξ	21	Travel, conferences, and me Printing and publications.	_	10,329	0		10,329
	22	Other expenses (attach sch		% 6,375	0		6,375
Ħ.	24	Total operating and administ		.,			,,,,,,
Operating		Add lines 13 through 23.	-	153,883	40,919		112,964
្ន	25	Contributions, gifts, grants p		354,945			354,945
	26	Total expenses and disburse					
		25		508,828	40,919		467,909
	27	Subtract line 26 from line 12					
	a	Excess of revenue over expe		211,134			
	b	Net investment income (if ne			136,838		
	С	Adjusted net income(If nega	cive, enter -u-)				

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o					
		should be for end-of-year amounts only (See instructions) Cash—non-interest-bearing	(a) Book Value 318,039	(b) Book Value 389,522	(c) Fair Market Value 389,522				
	1	_ _	261,776	121,079	,				
	2	Savings and temporary cash investments	261,776	121,079	121,079				
	3	Accounts receivable -							
	_	Less allowance for doubtful accounts -							
	4	Pledges receivable							
		Less allowance for doubtful accounts 🕨							
	5	Grants receivable							
	6	Receivables due from officers, directors, trustees, and other							
		disqualified persons (attach schedule) (see instructions)							
	7	Other notes and loans receivable (attach schedule)							
		Less allowance for doubtful accounts 🟲							
y,	8	Inventories for sale or use							
Assets	9	Prepaid expenses and deferred charges							
Ą	10a	Investments—U S and state government obligations (attach schedule)							
	b	Investments—corporate stock (attach schedule)	ents—corporate stock (attach schedule) 4,960,210						
	С	Investments—corporate bonds (attach schedule)							
	11	Investments—land, buildings, and equipment basis 🟲							
		Less accumulated depreciation (attach schedule) -							
	12	Investments—mortgage loans							
	13	Investments—other (attach schedule)							
	14	Land, buildings, and equipment basis 🕨							
		Less accumulated depreciation (attach schedule) ▶							
	15	Other assets (describe 🟲)							
	16	Total assets(to be completed by all filers—see the							
		ınstructions Also, see page 1, item I)	5,540,025	5,581,030	5,581,030				
	17	Accounts payable and accrued expenses							
	18	Grants payable							
ě	19	Deferred revenue							
abilities	20	Loans from officers, directors, trustees, and other disqualified persons							
_	21	Mortgages and other notes payable (attach schedule)							
	22	Other liabilities (describe 🟲)							
	23	Total liabilities(add lines 17 through 22)	0	0					
		Foundations that follow SFAS 117, check here							
φ		and complete lines 24 through 26 and lines 30 and 31.							
Balance	24	Unrestricted							
<u> </u>	25	Temporarily restricted							
<u></u>	26	Permanently restricted							
Fund		Foundations that do not follow SFAS 117, check here							
9		and complete lines 27 through 31.							
	27	Capital stock, trust principal, or current funds	0	0					
ssets	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0					
Ą	29	Retained earnings, accumulated income, endowment, or other funds	5,540,025	5,581,030					
Net	30	Total net assets or fund balances(see instructions)	5,540,025	5,581,030					
2	31	Total liabilities and net assets/fund balances(see instructions)	5,540,025	5,581,030					
Da	rt III		· , [, ,					
1	. 	Total net assets or fund balances at beginning of year—Part II, column	(a) line 30 (must se	ree					
1		with end-of-year figure reported on prior year's return)	•		5,540,025				
2		Enter amount from Part I, line 27a		 	· · · · · · · · · · · · · · · · · · ·				
2 3		·		2	211,134				
4		Other increases not included in line 2 (itemize)							
5		Add lines 1, 2, and 3		4 %3 5	5,751,159 170,129				
		Decreases not included in line 2 (itemize) ► Total net assets or fund balances at end of year (line 4 minus line 5)—P							
6		i otal net assets of fund parafices at end of year (line 4 minus line 5)—P	arc 11, colullil (D), III	ne 30 . 6 	5,581,030				

the Part VI instructions

	he kınd(s) of property sold (e g , re nouse, or common stock, 200 shs	How acquired P—Purchase (b) D—Donation	(6)	Date acquired (mo , day, yr)	Date sold (d) (mo , day, yr)	
1a CAPITAL GAINS DIV	IDENDS		Р			
b						
c						
d						
e				1		
(e) Gross sales price	Depreciation allowe (f) (or allowable)		t or other basis expense of sale			or (loss) (f) minus (g)
a 64	4,488					64,488
b						
С						
d						
e						
Complete only for assets sh	nowing gain in column (h) and owne	d by the foundation	n on 12/31/69		Gains (Col	(h) gaın mınus
(i) F M V as of 12/31/69	A djusted basis (j) as of 12/31/69	Exc	cess of col (ı) r col (j), ıf any	(1)	col (k), but no	t less than -0-) or from col (h))
a						64,488
b						
С						
d						
e						
			in Part I, line 7		3	64,488
	nder Section 4940(e) for R	educed Tax on	Net Investme			
(For optional use by domestic pri If section 4940(d)(2) applies, le	ivate foundations subject to the se ave this part blank	ection 4940(a) tax	on net investment	inco	me)	
	section 4942 tax on the distributa qualify under section 4940(e) Do			erıod	?	┌ Yes ┌ No
1 Enter the appropriate amour	nt in each column for each year, se	ee instructions befo	ore making any en	tries		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchar	ritable-use assets		(d) Distributio (col (b) divided	n ratio
2014	505,104		5,266,941			0 095901
2013	436,152		4,638,977			0 094019
2012	464,952		4,235,996			0 109762
2011	229,569		3,910,931			0 058699
2010	288,472		3,676,715			0 078459
2 Totalof line 1, column	• •			2		0 436840
3 A verage distribution ra the number of years th			3		0 087368	
•	noncharitable-use assets for 2015	•		4		5,519,070
	3	-	_	5		482,190
. , , ,	ment income (1% of Part I, line 2°			6		1,368
		•		7		483,558
	outions from Part XII, line 4			8		467,909

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See

	990-PF (2015) Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940	040(a)	or 4049 o		10 of	the inst	ruetie		age 4
			, OI 4340—S	ee pag	5 10 OI	the inst	ructio	115)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	-]					
	Date of ruling or determination letter			\					
	(attach copy of letter if necessary—see instructions)								
b	Domestic foundations that meet the section 4940(e) requirements in Part V,	, check		J	1				2,737
	here Fand enter 1% of Part I, line 27b			′					
c	All other domestic foundations enter 2% of line $27b$ Exempt foreign organization Part I, line 12 , col (b)	ations 6	enter 4% of						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable four enter -0-)	ndation	s only Oth	ers	2				0
3	Add lines 1 and 2				3			2,737	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable four	ndatıor	ns only Oth	ers					
	enter -0-)				4				0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, e	nter-C)	•	5			2	2,737
6	Credits/Payments	1 _	ı						
a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a		204					
Ь	Exempt foreign organizations—tax withheld at source	6b							
C	Tax paid with application for extension of time to file (Form 8868)	6c							
d _	Backup withholding erroneously withheld	6d							
7	Total credits and payments Add lines 6a through 6d				7				204
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2				8				17
9	Tax due.If the total of lines 5 and 8 is more than line 7, enter amount owed .				9				2,550
10	Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amoun	it over			10				
11	Enter the amount of line 10 to be Credited to 2015 estimated tax		Refunded		11				
	t VII-A Statements Regarding Activities								
1a	During the tax year, did the foundation attempt to influence any national, state	e, or 100	ai iegisiatio	on or a	a		4-	Yes	No
	it participate or intervene in any political campaign?						1a	\vdash	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for production)?	politica	ıpurposes	(see in	structi	ons	1b		N.
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities	· · ·	nuos of any	mataria	 Ic	•	10		No
	published or distributed by the foundation in connection with the activities.	anu cc	pres or arry	illaccila	15				
c	Did the foundation file Form 1120-POL for this year?						1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) impos			 r		•			
_	(1) On the foundation \blacktriangleright \$0 (2) On foundation managers								
е	Enter the reimbursement (if any) paid by the foundation during the year for pol				osed				
_	on foundation managers \blacktriangleright \$								
2	Has the foundation engaged in any activities that have not previously been rep	ported	to the IRS?				2		No
	If "Yes," attach a detailed description of the activities.	•							
3	Has the foundation made any changes, not previously reported to the IRS, in it	ts aove	ernina instru	ıment.	articles	S			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conf	_	_	-			3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more d	lurıng t	he year?.				4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?						4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction du	ring the	e year?				5		No
	If "Yes," attach the statement required by General Instruction T.								
6	Are the requirements of section 508(e) (relating to sections 4941 through 49	45) sa	tisfied eithe	er					
	By language in the governing instrument, or								
	By state legislation that effectively amends the governing instrument so the	nat no r	nandatory d	ırectıo	ns				
	that conflict with the state law remain in the governing instrument?						6	Yes	
7	Did the foundation have at least $$5,000$ in assets at any time during the year	?If "Yes	s," complete	Part II	. col. (c),			
	and Part XV.						7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered ($\!\!\!$	see ins	structions)						
	▶ <u>OH, FL</u>								
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99								
	General (or designate) of each state as required by General Instruction G? If						8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the r		_						
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (s	ee inst	tructions foi	rart X	1 /) ²		_		
10	If "Yes," complete Part XIV	" n## 1		lie to	• •		9	\vdash	No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes, and addresses.</i>		ı a schedule	nsting	uieir n	aiiles	10		No
	and addresses.								.10

Par	Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►WWW JOHNSON-FOUNDATION ORG			
14	The books are in care of ►AMY GOODWIN Telephone no ►(513)	800	-2056	
	Located at \$\int_{407}\$ VINE STREET SUITE 218 CINCINNATI OH ZIP +4 \$\int_{45202}\$			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here		▶ □	-
	and enter the amount of tax-exempt interest received or accrued during the year	•	- ,	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over		Yes	No
16	a bank, securities, or other financial account in a foreign country?	16	Tes	No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial	10		NO
	Accounts (FBAR) If "Yes", enter the name of the foreign country			
Dat	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required		<u> </u>	į
PG	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1-			162	NO
Ia	During the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days)			
ь	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		No
	O rganizations relying on a current notice regarding disaster assistance check here			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
	that were not corrected before the first day of the tax year beginning in 2015?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2015? Yes 🔽 No			
	If "Yes," list the years 🕨 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement—see instructions)	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
_	▶ 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
_	any time during the year?			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine	3b		
4-	If the foundation had excess business holdings in 2015.)		+-	N.c.
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4a		No
Ь	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		No
	charitable purpose that had not been removed from Jeopardy before the first day of the tax year beginning in 2015?	1 4V		140

Pa	rt VII-B	Statements Rega	rdir	g Activities for	Wh	ich Form 4720	May	Be Required	(Con	tinue	ed)	
5a	During th	e year dıd the foundatıor	рау	or incur any amoun	t to							
	(1) Carry	on propaganda, or other	wise	attempt to influence	e leg	ıslatıon (section 494	45(e)))?	Yes	√ No		
	(2) Influe	ence the outcome of any	spec	ıfıc publıc electıon (see	section 4955), or to	carr	у				
	on, dı	rectly or indirectly, any	voter	registration drive?.					Yes	√ No		
	(3) Provi	de a grant to an individu	al for	travel, study, or oth	ners	ımılar purposes?		<u> -</u>	Yes	_ No		
	(4) Provi	de a grant to an organıza	tion	other than a charıta	ble,	etc , organization de	scrib	ed				
	ın sed	ction 4945(d)(4)(A)? (se	e ins	structions)					Yes	√ No		
	(5) Provi	de for any purpose other	than	religious, charitable	e, sc	ientific, literary, or						
	educa	ational purposes, or for t	he pr	evention of cruelty t	o ch	ıldren or anımals?.		Г	Yes	√ No		
b	If any ans	swerıs "Yes" to 5a(1)–(5), d	d any of the transac	tions	fail to qualify under	the e	exceptions descr	ibed in			
	Regulatio	ns section 53 4945 or i	n a c	urrent notice regard	ıng d	lisaster assistance ((see	instructions)? .			5b	No
	O rganıza	tions relying on a curren	t not	ice regarding disast	eras	sistance check here	e		▶	_		
С		wer is "Yes" to question										
	tax becau	use it maintained expend	liture	responsibility for th	ne gr	ant?	•		Yes	_ No		
	If "Yes," a	attach the statement requ	red b	y Regulations section	n 53.	4945–5(d).						
6a		oundation, during the yea	-	•			-					
Ь		oundation, during the yea	r, pa	y premiums, directly	orı	ndirectly, on a perso	onal b	enefit contract?.		•	6b	No
		o 6b, file Form 8870.								_		
7a	-	me during the tax year, w				•			Yes			
ь	If yes, do	the foundation receive									7b	
Pa	rt VIII	Information About and Contractors	t Off	icers, Directors	s, Ti	rustees, Founda	itior	n Managers, H	lighly	Paid	d Emplo	oyees,
=	List all off	ficers, directors, trustees	s. for	ındation managers a	nd t	heir compensation (s	see ir	nstructions).				
		,	ĺ				Ī	(d)				
	(a) Na	me and address		Title, and average hours per week	(C)	Compensation(If not paid, enter		Contributions t			•	account,
	(=)		(b)	devoted to position		-0-)		nployee benefit p deferred comper			other all	owances
DEBC	RAH J CASE		VP/	PRO GRA M		2,211	una	deletted compet	0	1		0
407	VINE STR	EET SUITE 218		OFFICER		_,			·			
CIN	CINNATI,	OH 45202	3 0 0)								
AMY	GOODWIN		4	SIDENT &	76,922			1,983				2,400
		EET SUITE 218	E X E	CUTIVE DIRE								
	<u> </u>	OH 45202	_									
	EN REGNER	EET CUITE 310		RETARY & ASURER	0			0				0
		EET SUITE 218 OH 45202	1 00									
		tion of five highest-paid	emp	loyees (other than	t hos	e included on line 1—	-see i	instructions). If	none, e	nter"	NONE."	
	<u> </u>	(a)	-	Title, and aver				Contributio	ns to			
Na	me and add	lress of each employee p	aıd	hours per wee		(c) Compensatio	n	employee b		(-)	•	account,
	mo	re than \$50,000		(b) devoted to pos	tıon			plans and de (d) compensa		(e)	other all	owances
NON	NE											
										+		
										+		
										+		
		fother employees =====		<u> </u>		l			<u>. </u>	1		
TOTA	ıı number 0	f other employees paid o	vers	,					Par.	1		0

and Contractors (continued) 3 Five highest-paid independent contractors for professional services (s	see instructions). If none, enter "NON	NF".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
otal number of others receiving over \$50,000 for professional services.		• 0
Part IX-A Summary of Direct Charitable Activities		•
·	aught statutural information such as the number	or of
ist the foundation's four largest direct charitable activities during the tax year. Include rele rganizations and other beneficiaries served, conferences convened, research papers produ		Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the	the tax year on lines 1 and 2	A mount
1		
2		
All other program-related investments See instructions		
· -		
3		I
3		

Part X Minimum Investment Return

Pa	(All domestic foundations must complete this part. Foreign foundations, see instruction	s.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	Average monthly fair market value of securities	1a	5,069,113
b	Average of monthly cash balances	1b	534,004
c	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	5,603,117
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	5,603,117
4	Cash deemed held for charitable activities $$ Enter 1 $$ 1/2 $$ 0 of line 3 (for greater amount, see		
	ınstructions)	4	84,047
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	5,519,070
6	Minimum investment return. Enter 5% of line 5	6	275,954
Pai	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cer check here ► □ and do not complete this part.)	taın f	oreign organizations
1	Mınımum ınvestment return from Part X, line 6	1	275,954
2a	Tax on investment income for 2015 from Part VI, line 5 2a 2,737		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b		
c	Add lines 2a and 2b	2c	2,737
3	Distributable amount before adjustments Subtract line 2c from line 1	3	273,217
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	273,217
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	273,217
Par	t XII Qualifying Distributions (see instructions)		
1	A mounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	467,909
	Program-related investments—total from Part IX-B	1b	0
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	A mounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	За	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	467,909
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ıncome Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	467,909
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	er the	foundation qualifies for

Ρ	art XIIII Undistributed	Income (see instri	uctions)			
			(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1	Distributable amount for 2015	from Part XI line 7	00,640	r duite private de 2027		273,217
	Undistributed income, if any, a					,
	Enter amount for 2014 only.				0	
ъ ь		_, 20, 20		0		
3	Total for prior years 20 Excess distributions carryove					
_	From 2010	105,799				
	From 2011	34,855				
	From 2012	255,296				
	From 2013	205,442				
	From 2014	243,821				
	Total of lines 3a through e		845,213			
	Qualifying distributions for 201					
•	XII, line 4 🕨 \$	-				
а	Applied to 2014, but not more				0	
	Applied to undistributed incom			0		
	(Election required—see instruc					
C	Treated as distributions out of		% 0			
	required—see instructions).					
d	Applied to 2015 distributable	amount				273,217
е	Remaining amount distributed	out of corpus	194,692			
5	Excess distributions carryove	r applied to 2015	0			0
	(If an amount appears in columi same amount must be show					
6	Enter the net total of each col	(/ /				
	indicated below:					
а	Corpus Add lines 3f, 4c, and 4	e Subtract line 5	1,039,905			
b	Prior years' undistributed incor	me Subtract		0		
	line 4b from line 2b			0		
C	Enter the amount of prior years					
	income for which a notice of de been issued, or on which the se	•				
	tax has been previously asses	, ,		0		
d	Subtract line 6c from line 6b 1					
_	-see instructions			0		
е	Undistributed income for 2014	Subtract line				
	4a from line 2a Taxable amou	nt—see			0	
	instructions				0	
f	Undistributed income for 2016					
	lines 4d and 5 from line 1 This be distributed in 2015					0
7	Amounts treated as distributio					
•	corpus to satisfy requirements					
	section 170(b)(1)(F) or 4942(· · · · · · · · · · · · · · · · · · ·	0			
	be required - see instructions)	F	0			
8	Excess distributions carryove		105,799			
_	applied on line 5 or line 7 (see		100,.33			
9	Excess distributions carryover Subtract lines 7 and 8 from line		934,106			
10	Analysis of line 9	c o a	,			
	Excess from 2011	34,855				
	Excess from 2012	255,296				
	Excess from 2013	205,442				
	Excess from 2014	243,821				
	Excess from 2015	194,692				
		i .				

	m 990-PF (2015)					Page 10
	art XIV Private Operating Foundat	•			9)	
	If the foundation has received a ruling or determ foundation, and the ruling is effective for 2015,	enter the date of	the ruling	▶ ∟	_	
	Check box to indicate whether the organization		ting foundation de		4942(j)(3) or	4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years	·	(e) Total
	investment return from Part X for each year listed	(a) 2015	(b) 2014	(c) 2013	(d) 2012	
b	35% of line 2a					
c	Qualifying distributions from Part XII, line 4 for each year listed					
d	A mounts included in line 2c not used directly for active conduct of exempt activities					
e	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3					
_	of minimum investment return shown in					
	Part X, line 6 for each year listed					
C	"Support" alternative test—enter					
	(1) Total support other than gross investment income (interest,					
	dividends, rents, payments					
	on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support					
	from an exempt organization					
	(4) Gross investment income					
ė	rt XV Supplementary Information (assets at any time during the			e organizatior	n nad \$5,000 o	r more in
	Information Regarding Foundation Managers:					
а	List any managers of the foundation who have of before the close of any tax year (but only if the					ation
ь	List any managers of the foundation who own 10)% or more of the	stock of a corpora	tion (or an equally	large portion of th	e
	ownership of a partnership or other entity) of wh	nich the foundation	has a 10% or gre	eater interest		
	Information Regarding Contribution, Grant, Gif	t Loan Scholarsh	in etc Programs:			
	Check here F if the foundation only makes co	-			d does not accent	
	unsolicited requests for funds. If the foundation					
	other conditions, complete items 2a, b, c, and c	1			_	
а	The name, address, and telephone number or e	-maıl address of t	he person to whom	n applications shou	ıld be addressed	
	AMY GOODWIN					
	407 VINE STREET SUITE 218 CINCINNATI,OH 45202					
	(513) 800-2056					
b	The form in which applications should be subm	itted and informat	on and materials t	they should include	9	
	THE FOUNDATION DOES NOT ACCEPT APP			•		ERS OF
	INQUIRY VIA WWW THEJOHNSONFOUNDA	TION COM ONLY	QUALIFIED ORG	GANIZATION'S TH		
	INVITATIONS FROM THE FOUNDATION MA	Y SUBMIT GRAN	T APPLICATION:	S		
C	Any submission deadlines					
	NONE					
d	Any restrictions or limitations on awards, such factors	as by geographic	al areas, charitabl	e fields, kinds of in	stitutions, or othe	r
	THE FOUNDATION FUNDS CHARITABLE OF REGION, IN THE AREAS OF ANIMAL WELFA					

BE FOUND ONLINE AT WWW JOHNSON-FOUNDATION ORG/APPLY

Part XV Supplementary Information(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of A mount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data TableSee Additional Data Table 354,945 **b** Approved for future payment

	I-A Analysis of Income-Produc	ing Activitie	5	1		(-)
nter gros	s amounts unless otherwise indicated	Unrelated bu	(b)	Excluded by section	(d)	(e) Related or exempt function income
1 Program	n service revenue	Business code	A mount	(c) Exclusion code	A mount	(See Instructions)
a						,
	and contracts from government agencies					
Member Interes	ership dues and assessments st on savings and temporary cash					
	nds and interest from securities			14	21 113,248	
	ntal income or (loss) from real estate					
	-financed property					
	ntal income or (loss) from personal					
	rty					
	Investment Income					
ınvent	ory			14	64,488	
	come or (loss) from special events profit or (loss) from sales of inventory					
	revenue a OTHER INCOME					17,448
	-1		C		477 757	17.446
	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)				177,757 13	17,448 195,205
See w Part XV	vorksheet in line 13 instructions to verify		plichment of F	Evampt Burnes		
Line No.	Explain below how each activity for wh the accomplishment of the foundation's	ıch ıncome ıs re	ported in column ((e) of Part XVI-A c	ontributed importa	
1 A	OTHER INCOME					

Part	XVI	Information Re Noncharitable					actions and I	Relationships	With			
		organization directly or i	ndırectly (engage in a	ny of t	he following wit					V	N.
		501(c) of the Code (othe	er than se	ction 501(c)(3) o	rganızatıons) o	rın section 527,	relating to politic	al		Yes	No
_		tions?	dation to		table e	vomat organiza	stion of					
		s from the reporting four h							1.0	1(1)		No
		erassets								1(2)		No
` '		ansactions							10	(2)		NO
		es of assets to a noncha	ritable ex	emnt organ	nization				11	1(1)		No
		chases of assets from a								0(2)		No
		tal of facilities, equipme								o(3)		No
		nbursement arrangemer								(4)		No
		ns or loan guarantees.							<u> </u>	(5)		No
		rmance of services or m								(6)		No
		of facilities, equipment, i								1c		No
	_	swer to any of the above	_							t val	ue	
		ods, other assets, or se ansaction or sharing arr	angement	, show in co	olumn ((d) the value of				alue		
(a) Line	: No	(b) Amount involved	(c) Name	of noncharita	able exer	npt organization	(d) Description	of transfers, transact	ions, and sharing	ı arran	ngemer	nts
des	cribe	undation directly or indi d in section 501(c) of th complete the following a (a) Name of organization	ne Code (d schedule		section		in section 527?.		tion of relations	ΓYe:	s v	No
Sign	the	der penalties of perjury, best of my knowledge a prmation of which prepar	ınd belief,	ıt ıs true, c	correct				ın taxpayer) ıs	s bas	ed on	all
Here	•	*****				2016-03-25	***** 		May the I return with the p below			
		Signature of officer or t	rustee			Date	f Title		(see instr)? V	Yes□t	No.
		Print/Type preparer's JANE E PFEIFER	name	Preparer'	s Sıgna	ature	Date 2016-03-25	Check if self- employed ►	PTIN POOC	0149	49	
Paid Prepa Use	areı	Firm's name FCLARK SCHAEFER H	A C K E T T	% CO				Firm's EIN ► 3	1-0800053			
Only		ONE EAST FOURTH S OH 45202	ST SUITE	1200 CIN	ICINNA	ATI,		Phone no (513)241-3111			

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to	status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
CINCINNATI SYMPHONY ORCHESTRA 1241 ELM STREET CINCINNATI,OH 45202	NONE	PUBLIC CHARITY	FUNDING FOR CSO COLLABORATION WITH MUSICNOW FESTIVAL	15,000
CORPORATION FOR FINDLAY MARKET PO BOX 14727 CINCINNATI,OH 45202	NONE	PUBLIC CHARITY	FUNDING FOR FRESH PRODUCE CO-OP AT FINDLAY MARKET	3,000
MOUNTAIN VIEW HUMANE 5363 PETERS CREEK ROAD ROANOKE,VA 24019	NONE	PUBLIC CHARITY	CHALLENGE GRANT FOR THE PALS (PREVENT ANOTHER LITTER SUBSIDY) PRO GRAM	20,000
VA MUSEUM OF TRANSPORTATION 303 NORFOLK AVE SW ROANOKE,VA 24016	NONE	PUBLIC CHARITY	UNDERWRITE STAFFING COSTS	9,000
SAINT FRANCIS SERVICE DOGS 8232 ENON DRIVE ROANOKE,VA 24019	NONE	PUBLIC CHARITY	TRAIN ANOTHER SERVICE DOG	20,000
ART OPPORTUNITIES INC DBA ARTWORKS 20 E CENTRAL PARKWAY CINCINNATI,OH 45202	NONE	PUBLIC CHARITY	FUNDING FOR CINCYINK PROGRAM	10,000
QUIERA LEVY-SMITH 4519 PERTH LANE CINCINNATI,OH 45229	NONE	INDIVIDUAL	PEOPLE'S LIBERTY PROJECT GRANT FOR "BLACK DANCE IS BEAUTIFUL" PROJECT	10,000
ANNE DELANO STEINERT 4208 DELANEY STREET 1 CINCINNATI,OH 45223	NONE	INDIVIDUAL	PEOPLE'S LIBERTY PROJECT GRANT FOR "LOOK HERE" PROJECT	10,000
GIACOMO CIMINELLO 539 W MCMICKEN AVE 4 CINCINNATI,OH 45214	NONE	INDIVIDUAL	PEOPLE'S LIBERTY PROJECT GRANT FOR "SPACED INVADERS" PROJECT	10,000
CINCINNATI SYMPHONY ORCHESTRA 1241 ELM STREET CINCINNATI,OH 45202	NONE	PUBLIC CHARITY	LUMENOCITY	25,000
CINCINNATI CENTER CITY DEVELOPMENT CORP (3CDC) 1203 WALNUT STREET CINCINNATI,OH 45202	NONE	PUBLIC CHARITY	UNDERWRITE COST FOR WEEKLY BLUEGRASS CONCERTS IN WASHINGTON PARK	10,000
THE ZOOLOGICAL SOCIETY OF CINCINNATI 3400 VINE STREET CINCINNATI,OH 45220	NONE	PUBLIC CHARITY	GRANT TO PURCHASE EQUIPMENT NEEDED FOR ZOO'S PENGUIN COLONY	1,120
MAIJA ZUMMO 1614 N ARGYLE PLACE CINCINNATI,OH 45223	NONE	INDIVIDUAL	PEOPLE'S LIBERTY PROJECT GRANT FOR "MADE IN CINCINNATI" PROJECT	9,575
SALEM HISTORICAL SOCIETY 801 EAST MAIN STREET SALEM,VA 24153	NONE	PUBLIC CHARITY	GENERAL OPERATING SUPPORT	10,000
CINCINNATI PUBLIC RADIO 1223 CENTRAL PARKWAY CINCINNATI,OH 45214	NONE	PUBLIC CHARITY	FUNDING FOR "CINCINNATI EDITION" DAILY CURRENT AFFAIRS RADIO PROGRAM	15,000
Total			▶ 3a	354,945

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to	status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
GREATER CINCINNATI FILM COMMISSION 602 MAIN STREET STE 712 CINCINNATI,OH 45202	NONE	PUBLIC CHARITY	UNDERWRITE COSTS TO ATTEND REGIONAL FILM FESTIVALS AND OTHER SCOUTING COSTS	25,000
ENSEMBLE THEATRE OF CINCINNATI 1127 VINE STREET CINCINNATI,OH 45202	NONE	PUBLIC CHARITY	UNDERWRITE "MEALS FOR MONOLOGUES AND "EXPECTATIONS OF CHRISTMAS" PROGRAMS	6,750
CONTEMPORARY ARTS CENTER 44 E SIXTH STREET CINCINNATI,OH 45202	NONE	PUBLIC CHARITY	LOBBY RENOVATION CAPITAL CAMPAIGN	25,000
FEEDING AMERICA SOUTHWEST VA 1025 ELECTRIC ROAD SALEM,VA 24153	NONE	PUBLIC CHARITY	GENERAL OPERATING SUPPORT	25,000
KAILAH WARE 3641 CANYON DRIVE CINCINNATI,OH 45217	NONE	INDIVIDUAL	PEOPLE'S LIBERTY PROJECT GRANT FOR "ONE DEGREE OF SEPARATION"	5,000
JANET CREEKMORE 1090 GARRARD STREET 9-204 COVINGTON,KY 41011	NONE	INDIVIDUAL	PEOPLE'S LIBERTY PROJECT GRANT FOR "POPPED ART"	5,000
JOSIAH WOLF 1590 GLEN ARMAND AVENUE CINCINNATI, OH 45223	NONE	INDIVIDUAL	PEOPLE'S LIBERTY PROJECT GRANT FOR "SOLAR SYSTEM"	5,000
CINCINNATI PUBLIC RADIO 1223 CENTRAL PARKWAY CINCINNATI,OH 45214	NONE	PUBLIC CHARITY	FUNDING FOR "CINCINNATI EDITION" DAILY CURRENT AFFAIRS RADIO PROGRAM	10,000
ARTWORKS 20 E CENTRAL PARKWAY CINCINNATI, OH 45202	NONE	PUBLIC CHARITY	FUNDING- CINCYINK PRO GRAM	7,500
KNOWTHEATRE TRIBE INC (DBA KNOWTHEATRE) 1120 JACKSON STREET CINCINNATI, OH 45202	NONE	PUBLIC CHARITY	FUNDING FOR "WELCOME EXPERIMENT" PROGRAM	3,000
JOSEPH KEVIN WRIGHT 519 GRANDVIEW AVENUE BELLEVUE, KY 41073	NONE	INDIVIDUAL	PEOPLE'S LIBERTY PROJECT GRANT FOR "NEIGHBORHOOD OWNERSHIP MANUAL"	5,000
GREATER CINCINNATI FILM COMMISSION 602 MAIN STREET STE 712 CINCINNATI,OH 45202	NONE	PUBLIC CHARITY	UNDERWRITE SCOUTING AND TRAVEL COSTS	5,000
CONTEMPORARY ARTS CENTER 44 E SIXTH STREET CINCINNATI, OH 45202	NONE	PUBLIC CHARITY	MARKETING SUPPORT FOR "THE 50 AND FREE ADMISSION	4,000
VIRGINIA MUSEUM OF TRANSPORTATION 303 NORFOLK AVE SW ROANOKE,VA 24016	NONE	PUBLIC CHARITY	VARIOUS MAINTENANCE AND RENOVATION PROJECTS	16,000
KAILAH WARE 3641 CANYON DRIVE CINCINNATI,OH 45202	NONE	INDIVIDUAL	PEOPLE'S LIBERTY PROJECT GRANT FOR "ONE DEGREE OF SEPARATION"	5,000
Total		.	▶ 3a	354,945

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
JOSEPH KEVIN WRIGHT 519 GRANDVIEW AVENUE BELLEVUE,KY 41073	NONE	INDIVIDUAL	PEOPLE'S LIBERTY PROJECT GRANT FOR "NEIGHBORHOOD OWNERSHIP MANUAL"	5,000
JANET CREEKMORE 1090 GARRARD STREET 9-204 COVINGTON,KY 41011	NONE	INDIVIDUAL	PEOPLE'S LIBERTY PROJECT GRANT FOR "POPPED ART"	5,000
JOSIAH WOLF 1590 GLEN ARMAND AVENUE CINCINNATI,OH 45223	NONE	INDIVIDUAL	PEOPLE'S LIBERTY PROJECT GRANT FOR "SOLAR SYSTEM"	5,000
BREWERY DISTRICT COMMUNITY URBAN REDEVELOPMENT CORP 1619 MOORE STREET CINCINNATI,OH 45202	NONE	PUBLIC CHARITY	GRANT TO SUPPORT NEIGHBORHOOD "BOCKFEST" CELEBRATION	2,500
NATIONAL CENTER FOR FAMILY PHILANTHROPY 1101 CONNECTICUT AVE NW STE 220 WASHINGTON, DC 20036	NONE	PUBLIC CHARITY	FUNDING FOR NCFP EDUCATIONAL PROGRAMMING	2,500
BEYOND CIVILITY 407 VINE STREET CINCINNATI,OH 45202	NONE	PUBLIC CHARITY	GENERAL OPERATING SUPPORT	5,000
Total				354,945

TY 2015 Accounting Fees Schedule

Name: THE RAYMOND C AND ANNA T JOHNSON FOUND

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	4,780	2,390		2,390

TY 2015 Distribution from Corpus Election

Name: THE RAYMOND C AND ANNA T JOHNSON FOUND

EIN: 26-1548389

Election: TREATMENT OF QUALIFYING DISTRIBUTIONS ELECTIONUNDER

INTERNAL REVENUE CODE SECTION 4942(H)(2) AND REG. 53.4942 (A)-3(D)(2), THE NON OPERATING PRIVATE FOUNDATION ELECTS TO TREAT CURRENT YEAR QUALIFYING DISTRIBUTIONS IN EXCESS

OF IMMEDIATELY PRECEEDING TAX YEAR'S UNDISTRIBUTED

INCOME AS BEING MADE OUT OF: CORPUS

TY 2015 Investments Corporate Stock Schedule

Name: THE RAYMOND C AND ANNA T JOHNSON FOUND

Name of Stock	End of Year Book Value	End of Year Fair Market Value
TD AMERITRADE	5,070,429	5,070,429



TY 2015 Other Decreases Schedule

Name: THE RAYMOND C AND ANNA T JOHNSON FOUND

Description	Amount
UNREALIZED LOSS	170,129

TY 2015 Other Expenses Schedule

Name: THE RAYMOND C AND ANNA T JOHNSON FOUND

DLN: 93491117005046

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OFFICE EXPENSE	4,010	0		4,010
INSURANCE	1,525	0		1,525
OTHER EXPENSES	840	0		840

TY 2015 Other Income Schedule

Name: THE RAYMOND C AND ANNA T JOHNSON FOUND

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
OTHER INCOME	17,448		17,448

TY 2015 Other Professional Fees Schedule

Name: THE RAYMOND C AND ANNA T JOHNSON FOUND

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BROKERAGE FEE	36,599	36,599		0
MANAGEMENT FEES	1,503	60		1,443

TY 2015 Taxes Schedule

Name: THE RAYMOND C AND ANNA T JOHNSON FOUND

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAX	1,507	1,507		0
OHIO ANNUAL FILING FEE	200	0		200
PAYROLL TAX	6,876	28		6,848

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491117005046

EN. 95491117005040

OMB No 1545-0047

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

2015

Employer identification number

THE R.	AYMOND C AND A	NNA T JOHNSON FOUND	
			26-1548389
Organ	ization type (check	one)	
Filers	of:	Section:	
Form 9	990 or 990-EZ	□ 501(c)() (enter number) organization	
			1
		527 political organization	
Form 9	990-PF	√ 501(c)(3) exempt private foundation	
		☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation	
		□ 501(c)(3) taxable private foundation	
		s covered by the General Rule or a Special Rule.)(7), (8), or (10) organization can check boxes for both the General Rule and a S	pecial Rule See instructions
Gener	al Rule		
ত		on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions om any one contributor. Complete Parts I and II. See instructions for determining a	
Specia	al Rules		
Γ	under sections 509 received from any	described in section $501(c)(3)$ filing Form 990 or 990-EZ that met the $33^1 / 3\%$ sup (a)(1) and $170(b)(1)(A)(vi)$, that checked Schedule A (Form 990 or 990-EZ), Part one contributor, during the year, total contributions of the greater of (1) \$5,000 or (ii) Form 990-EZ, line 1 Complete Parts I and II	ll, line 13, 16a, or 16b, and that
Γ	during the year, tota	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receive all contributions of more than \$1,000 exclusively for religious, charitable, scientific for cruelty to children or animals. Complete Parts I, II, and III	•
Γ	during the year, coi this box is checked purpose Do not co	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receive attributions exclusively for religious, charitable, etc., purposes, but no such contributions there the total contributions that were received during the year for an exclusively of the parts unless the General Rule applies to this organization because, etc., contributions totaling \$5,000 or more during the year	butions totaled more than \$1,000 lf usively religious, charitable, etc, ause it received nonexclusively

990-EZ, or 990-PF)

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990,

Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990,

990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its

Name of organization
THE RAYMOND C AND ANNA T JOHNSON FOUND

Employer identification number 26-1548389

4.5			
(a) (b) No. Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contri	bution
RAYMOND C JOHNSON CLUT		Person	ᅜ
C/O WELLS FARGO WEALTH MANAGEN	1ENT 5 \$ 524,757	Payroll	Г
WILMINGTON DE 10000	<u> </u>	Noncash	Г
WILMINGTON, DE 19809		(Complete Part II for contributions)	noncash
(a) (b) No. Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contri	bution
		Person	Γ
	\$	Payroll	Г
		Noncash	Г
		(Complete Part II for contributions)	noncash
(a) (b) No. Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contri	bution
		Person	Γ
	\$	Payroll	Г
		Noncash	Г
		(Complete Part II for contributions)	noncash
(a) (b) No. Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contri	bution
		Person	Γ
	\$	Payroll	Г
		Noncash	Г
		(Complete Part II for contributions)	noncash
(a) (b) No. Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contri	bution
		Person	Γ
	\$	Payroll	Γ
	<u>*</u>	Noncash	Г
		(Complete Part II for contributions)	noncash
(a) (b) No. Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contri	bution
		Person	Г
	\$	Payroll	Г
		Noncash	Г
		(Complete Part II for contributions)	noncash

Name of organization THE RAYMOND C AND ANNA T JOHNSON FOUND		Employer identification number	
THE RAYMOND C AND ANNA I JOHNSON FOUND		26-1548389	
Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed	•	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<u> </u>	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) See duplicate copies of Part III if additional space is needed	total more			
Columbia of transferor to tr	of \$1,000 c	For organizations completing Part II or less for the year. (Enter this inform	ne contributor. Complete colum II, enter the total of <i>exclusively</i> r mation once. See instructions.)	nns (a) through (e) and the following religious, charitable, etc., contributions
Transferee's name, address, and ZIP4 Relationship of transferor to transferee (a) (b) Purpose of gift (c) Use of gift (d) Description of how gift is he Transferee's name, address, and ZIP4 (e) Transfer of gift Relationship of transferor to transferee (a) (b) Purpose of gift (c) Use of gift (d) Description of how gift is he Transferee's name, address, and ZIP4 (e) Transfer of gift (d) Description of how gift is he (e) Transfer of gift Relationship of transferor to transferee (e) Transfer of gift (e) Transfer of gift Relationship of transferor to transferee (form Part I) (b) Purpose of gift (c) Use of gift (d) Description of how gift is he (a) (a) (b) Purpose of gift (c) Use of gift (d) Description of how gift is he	(a) from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
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