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OMB No 1545-0052

2016

Form **990-PF** (2016)

Cat No 11289X

Return of Private Foundation

For Paperwork Reduction Act Notice, see instructions.

Department of the Treasury

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

Internal Revenue Service Do not enter social security numbers on this form as it may be made public. Open to Public ▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf. Inspection For calendar year 2016, or tax year beginning 01-01-2016 , and ending 12-31-2016 A Employer identification number GEORGE R JOHNSON FAMILY FOUNDATION Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) PO BOX 4558 (423) 614-2393 City or town, state or province, country, and ZIP or foreign postal code CLEVELAND, TN 373204558 $\boldsymbol{C}\,$ If exemption application is pending, check here ☐ Initial return ☐ Initial return of a former public charity G Check all that apply D 1. Foreign organizations, check here ☐ Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation ☐ Name change Address change E If private foundation status was terminated under section 507(b)(1)(A), check here ✓ Section 501(c)(3) exempt private foundation **H** Check type of organization \square Section 4947(a)(1) nonexempt charitable trust \square Other taxable private foundation I Fair market value of all assets at end ✓ Cash ☐ Accrual J Accounting method F If the foundation is in a 60-month termination of year (from Part II, col (c), line 16)▶\$ 27,216,686 under section 507(b)(1)(B), check here Other (specify) (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The total (d) Disbursements Revenue and Net investment (c) Adjusted net for charitable of amounts in columns (b), (c), and (d) may not necessarily expenses per books purposes (cash basis only) equal the amounts in column (a) (see instructions)) Contributions, gifts, grants, etc , received (attach schedule) Check ► ✓ If the foundation is **not** required to attach 2 Interest on savings and temporary cash investments 4 Dividends and interest from securities 663,615 663,615 5a Net rental income or (loss) 1,870,627 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 1,870,627 Net short-term capital gain Income modifications . . 10a Gross sales less returns and allowances Less Cost of goods sold b Gross profit or (loss) (attach schedule) Other income (attach schedule) ارج 6,628 6,628 12 Total. Add lines 1 through 11 2,540,870 2.534.242 6,628 42,000 Compensation of officers, directors, trustees, etc 60,000 18,000 13 14 Other employee salaries and wages 3,213 15 4.590 1.377 Pension plans, employee benefits Operating and Administrative Expenses اروه Legal fees (attach schedule) . 3,195 3,195 <u>~</u> 7,035 Accounting fees (attach schedule) 7,035 119.836 119.836 Other professional fees (attach schedule) 17 ارجه 5.825 5.509 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 21 Travel, conferences, and meetings 22 Printing and publications . 23 Other expenses (attach schedule) 17,820 6,397 11,423 24 Total operating and administrative expenses. Add lines 13 through 23 . . . 218,301 151,119 66,866 1,529,592 25 Contributions, gifts, grants paid 1.529.592 26 Total expenses and disbursements. Add lines 24 and 1,747,893 1,596,458 151,119 27 Subtract line 26 from line 12 Excess of revenue over expenses and 792,977 disbursements 2,383,123 Net investment income (if negative, enter -0-) **Adjusted net income**(If negative, enter -0-)

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Investments—land, buildings, and equipment basis ▶ _

Less accumulated depreciation (attach schedule)

Investments—other (attach schedule)

Less accumulated depreciation (attach schedule)

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here

Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at end of year (line 4 minus line 5)-Part II, column (b), line 30

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

Analysis of Changes in Net Assets or Fund Balances

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe ▶_

Unrestricted

Permanently restricted

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize) -

Enter amount from Part I, line 27a

Temporarily restricted

14,521,439

6,732,687

104,263

-5,473

22,875,898

22,777,898

22,875,898

22,875,898

98,000

(چە

15,985,831

6,675,489

104,263

23,674,009

23,576,009

23,674,009

23,674,009

2

3

4

5

6

22,875,898

23,674,009

23,674,009 Form **990-PF** (2016)

792,977

5,134

98,000

-4,789 **%**

19,807,842

6,465,715

35,000

-4,789

27,216,686

Assets 10a b

C

11

12

13 14

15

16

17

18

19

20

21 22

23

24

25

28

29

31 Part III

Liabilities

Balances

Fund 26

ŏ

Assets 27

Net 30

2

3

List and descri 2-story brick v	How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)			
1 a PUBLICLY-TRADED SE	CURITIES			Р		
b POWERSHARES DB CO	b POWERSHARES DB COMMODITY INDEX			Р	2014-08-04	2016-12-31
С						
d						
е						
(e) Gross sales price		(f) Depreciation allowed (or allowable)		(g) other basis pense of sale	Gain d	h) ir (loss)) minus (g)
a 7	,156,754	,	'	5,358,90	1 1 1	1,797,852
b	12,227					12,227
c	,					,
d						
e						
	ote chowing gai	n in column (h) and ow	nod by the foundation	on 12/31/60		1)
(i) F M V as of 12/31/		(j) Adjusted basis as of 12/31/69	Excess	(k) s of col (ı) l (ı), ıf any	Gains (Col (col (k), but not	l) h) gain minus less than -0-) or om col (h))
a		45 01 12/51/05	0701 00	. ()), 11 411)	`	1,797,852
b						12,227
C						
d						
If gain, also enter in in Part I, line 8	Part I, line 8, co	olumn (c) (see instructi	ons) If (loss), enter -(}	3	
Part V Qualificatio (For optional use by domest)		ion 4940(e) for Re				
If section 4940(d)(2) applies Was the foundation liable for If "Yes," the foundation does	the section 494 not qualify und	blank 2 tax on the distributa er section 4940(e) Do	ble amount of any yea not complete this part	r in the base period :	ју 🔲 ү	es 🗹 No
1 Enter the appropriate	amount in each	column for each year,	see instructions before	e making any entri		
(a) Base period years Calendar year (or tax year beginning in	Adjusted o	(b) ualifying distributions	(c) Net value of noncharital		(d) Distribution rat (col (b) divided by c	
2015		1,784,994		26,860,346		0 066455
2014		1,573,969		27,443,846		0 057352
2013		2,018,037		24,967,081		0 080828
2012		1,255,286		22,944,893		0 054709
2011		1,391,941		23,365,250		0 059573
2 Total of line 1, colum	n (d)			2		0 318917
3 Average distribution random number of years the f4 Enter the net value of	oundation has b	een in existence if less	than 5 years	5, or by the 3		0 063783 26,295,704
5 Multiply line 4 by line			*	5	+	
6 Enter 1% of net inves		% of Part I line 27h)			+	1,677,219
	•			6		23,831
				7		1,701,050
8 Enter qualifying distrib If line 8 is equal to or		t XII, line 4 , e 7, check the box in Pa		<u>8</u> nplete that part us	<u> </u>	1,596,458 e the Part VI

Form 990-PF (2016) Information About Officers, Directors, Trustees,	Foundation Managers Highly	Page 7
and Contractors (continued)	roundation managers, riging	Palu Employees,
3 Five highest-paid independent contractors for professional service	es (see instructions). If none, en	ter "NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		>
Part IX-A Summary of Direct Charitable Activities		1
List the foundation's four largest direct charitable activities during the tax year. Include rele organizations and other beneficiaries served, conferences convened, research papers produ	evant statistical information such as the nunced, etc	nber of Expenses
1		
2		
2		
3		
		
4		
Part IX-B Summary of Program-Related Investments (see	nstructions)	
Describe the two largest program-related investments made by the foundation during the	ne tax year on lines 1 and 2	Amount
1 N/A		
2		
All other program-related investments See instructions		
all other program-related investments. See instructions		
-		
Total. Add lines 1 through 3		. ▶
		Form 990-PF (2016)

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

2

За 3b

4

5

1.596.458

1.596.458

Form 990-PF (2016)

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4.

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

2

3

4

5

Form 990-PF (2	016)
Part XIII	Und

From 2011. . . .

e From 2015.

b From 2012. . . . c From 2013. .

XII, line 4 > \$

indicated below:

d From 2014. .

Form 990-PF (2016)				Page 9
Part XIII Undistributed Income (see instru	uctions)			_
	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				1,267,123
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only				
h Total for prior years 20 20 20				

1,901,982

329.335

2,231,317

243,815

1,987,502

1.267.123

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Excess distributions carryover, if any, to 2016 243,815

133,013 795.509

255,042 474,603

f Total of lines 3a through e.

4 Qualifying distributions for 2016 from Part a Applied to 2015, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). . . .

c Treated as distributions out of corpus (Election required—see instructions).

d Applied to 2016 distributable amount. . . e Remaining amount distributed out of corpus

133.013

795,509

255.042

474.603

329.335

5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a)) 6 Enter the net total of each column as

f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017 7 Amounts treated as distributions out of

applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2017.

10 Analysis of line 9

a Excess from 2012. .

b Excess from 2013. .

c Excess from 2014. .

d Excess from 2015. .

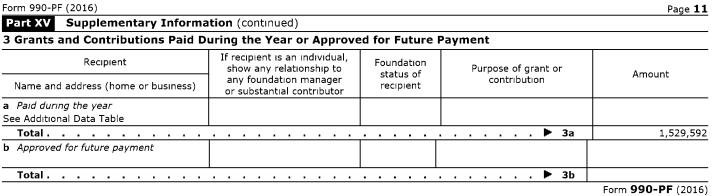
e Excess from 2016. .

Subtract lines 7 and 8 from line 6a

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount —see instructions e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions

corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2011 not



r gross :	amounts unless otherwise indicated	Unrelated bu	ısıness ıncome	Excluded by section	512, 513, or 514	(e) Related or exem
-		(a) Business code	(b)	(c)	(d) Amount	function incom
_	service revenue	Business code	Amount	Exclusion code	Amount	(See maracron
	nd contracts from government agencies ship dues and assessments.					
	t on savings and temporary cash					
	nents					
	ds and interest from securities			14	663,615	
	al income or (loss) from real estate					
	nanced property bt-financed property					
Net ren	ntal income or (loss) from personal property					
	vestment income					
	(loss) from sales of assets other than			+		
ınvento	ory			14	1,870,627	
	me or (loss) from special events					
Gross pr Other re	rofit or (loss) from sales of inventory					
	rear grant reimbursed			25	6,628	
	EAR GRANT REMIDORSED			25	0,020	
				†		
I Subtotal	Add columns (b), (d), and (e).				2,540,870	
I Subtotal	Add columns (b), (d), and (e)			13	2,540,870	
Subtotal Total. A	Add columns (b), (d), and (e)	ns)				2,540,8
Subtotal Fotal. A worksh	Add columns (b), (d), and (e). add line 12, columns (b), (d), and (e). eet in line 13 instructions to verify calculation B Relationship of Activities to th Explain below how each activity for which	ns) e Accomplish ncome is reporti	ment of Exemed in column (e)	npt Purposes of Part XVI-A contribut	B	2,540,8
Subtotal Fotal. A worksh t XVI-	Add columns (b), (d), and (e)	ns) e Accomplish ncome is reporti	ment of Exemed in column (e)	npt Purposes of Part XVI-A contribut	B	2,540,8
Subtotal Fotal. A worksh t XVI-	Add columns (b), (d), and (e). add line 12, columns (b), (d), and (e). eet in line 13 instructions to verify calculation B Relationship of Activities to th Explain below how each activity for which	ns) e Accomplish ncome is reporti	ment of Exemed in column (e)	npt Purposes of Part XVI-A contribut	B	2,540,8
Subtotal Fotal. A workshot TXVI-	Add columns (b), (d), and (e)	ns) e Accomplish ncome is reporti	ment of Exemed in column (e)	npt Purposes of Part XVI-A contribut	B	2,540,8
Subtotal Fotal. A workshot TXVI-	Add columns (b), (d), and (e)	ns) e Accomplish ncome is reporti	ment of Exemed in column (e)	npt Purposes of Part XVI-A contribut	B	2,540,8
Subtotal Fotal. A worksh t XVI-	Add columns (b), (d), and (e)	ns) e Accomplish ncome is reporti	ment of Exemed in column (e)	npt Purposes of Part XVI-A contribut	B	2,540,8
Subtotal Fotal. A worksh t XVI-	Add columns (b), (d), and (e)	ns) e Accomplish ncome is reporti	ment of Exemed in column (e)	npt Purposes of Part XVI-A contribut	B	2,540,8
Subtotal Fotal. A worksh t XVI-	Add columns (b), (d), and (e)	ns) e Accomplish ncome is reporti	ment of Exemed in column (e)	npt Purposes of Part XVI-A contribut	B	2,540,8
oubtotal otal. A worksh	Add columns (b), (d), and (e)	ns) e Accomplish ncome is reporti	ment of Exemed in column (e)	npt Purposes of Part XVI-A contribut	B	2,540,8
oubtotal otal. A worksh	Add columns (b), (d), and (e)	ns) e Accomplish ncome is reporti	ment of Exemed in column (e)	npt Purposes of Part XVI-A contribut	B	2,540,8
oubtotal otal. A worksh	Add columns (b), (d), and (e)	ns) e Accomplish ncome is reporti	ment of Exemed in column (e)	npt Purposes of Part XVI-A contribut	B	2,540,8
Subtotal Fotal. A worksh t XVI-	Add columns (b), (d), and (e)	ns) e Accomplish ncome is reporti	ment of Exemed in column (e)	npt Purposes of Part XVI-A contribut	B	2,540,8
oubtotal otal. A worksh	Add columns (b), (d), and (e)	ns) e Accomplish ncome is reporti	ment of Exemed in column (e)	npt Purposes of Part XVI-A contribut	B	2,540,8
oubtotal otal. A worksh	Add columns (b), (d), and (e)	ns) e Accomplish ncome is reporti	ment of Exemed in column (e)	npt Purposes of Part XVI-A contribut	B	2,540,8
oubtotal otal. A worksh	Add columns (b), (d), and (e)	ns) e Accomplish ncome is reporti	ment of Exemed in column (e)	npt Purposes of Part XVI-A contribut	B	2,540,8
Subtotal Fotal. A worksh t XVI-	Add columns (b), (d), and (e)	ns) e Accomplish ncome is reporti	ment of Exemed in column (e)	npt Purposes of Part XVI-A contribut	B	2,540,8
Subtotal Fotal. A workshot TXVI-	Add columns (b), (d), and (e)	ns) e Accomplish ncome is reporti	ment of Exemed in column (e)	npt Purposes of Part XVI-A contribut	B	2,540,8
Subtotal Fotal. A workshot TXVI-	Add columns (b), (d), and (e)	ns) e Accomplish ncome is reporti	ment of Exemed in column (e)	npt Purposes of Part XVI-A contribut	B	2,540,8
Subtotal Fotal. A worksh t XVI-	Add columns (b), (d), and (e)	ns) e Accomplish ncome is reporti	ment of Exemed in column (e)	npt Purposes of Part XVI-A contribut	B	2,540,8
Gubtotal Fotal. A worksh	Add columns (b), (d), and (e)	ns) e Accomplish ncome is reporti	ment of Exemed in column (e)	npt Purposes of Part XVI-A contribut	B	2,540,8
Subtotal Fotal. A workshot TXVI-	Add columns (b), (d), and (e)	ns) e Accomplish ncome is reporti	ment of Exemed in column (e)	npt Purposes of Part XVI-A contribut	B	2,540,8
Subtotal Fotal. A workshot TXVI-	Add columns (b), (d), and (e)	ns) e Accomplish ncome is reporti	ment of Exemed in column (e)	npt Purposes of Part XVI-A contribut	B	2,540,8

Information Regarding Transfers To and Transactions and Relationships With Noncharitable

Part	XVII	Exempt Organia	zations											
		anization directly or in- code (other than sectio	directly enga								on 501		Yes	No
a Tran	sfers fi	om the reporting foun	dation to a n	oncha	ırıtable ex	empt organizatio	on o	of						
(1)	Cash.										. 1	a(1)		No
(2)	Other	assets									. 1	a(2)		No
b Othe	er trans	actions												
(1)	Sales	of assets to a noncharı	table exemp	t orga	nızatıon.						. 1	b(1)		No
(2)	Purcha	ases of assets from a n	oncharitable	exem	pt organiz	zation					<u> 1</u>	b(2)		No
٠.		of facilities, equipmen	•									b(3)		No
٠.		ursement arrangemen										b(4)		No
٠.		or loan guarantees.										b(5)		No
٠, ,		nance of services or m	•		_							b(6)		No
	-	facilities, equipment, n										1c		No
		er to any of the above ls, other assets, or serv										ue		
		saction or sharing arra												
(a) Line	No I	(b) Amount involved	(a) Nama of	nanch	aritable eve	mpt organization		(d) Doc	cription of	transfore transactions	and charin	a arra	naomon	te
(a) Line	INO	(b) Amount involved	(C) Name of	ПОПСП	antable exe	inpt organization		(u) Des	сприон ог	transfers, transactions,	anu snam	y alla	ngemen	LS
							_							
	_						┝							
							-							
	_						\vdash							
2a Is th	ne foun	dation directly or indire	ectly affiliated	d with	, or relate	d to, one or mor	re ta	ax-exem	pt organı	zations	_		_	
desc	ribed ii	n section 501(c) of the	Code (other	than	section 50	01(c)(3)) or in se	ectio	on 527?.			. Ц	Yes	✓ N	0
b If "Y	es," co	mplete the following so												
		(a) Name of organization	n		(1	b) Type of organiza	atıon	1		(c) Description	of relations	hip		
	Unde	r penalties of perjury,	I declare tha	t I hav	ve examın	ed this return, ii	nclu	iding acc	companyı	ng schedules and sta	atements	and	to the	best
		knowledge and belief		orrect,	, and com	plete Declaratio	on of	f prepare	er (other	than taxpayer) is ba	sed on al	Infor	rmatior	n of
Sign		n preparer has any kno	wledge			l						. 		
Here	*	****				2017-09-20		_*	****		lay the IRS oth the pre			
	S	ignature of officer or ti	ustee			Date		Tı	tle		see instr)?			
		Print/Type preparer's	name	Prepa	arer's Sıgı	nature		Date		Check if self-	PTIN			
										employed ▶ □	P	00152	2617	
Paid		VICKI P SULLIVAN	CPA					2017-	-09-20					
	aror													
Prepa		Firm's name ► ARNI	ETTKIRKSEY	KIMSE	YSULLIVA	NLAYHALL				F	irm's EIN	▶62	-07985	554
Use (JIIIY	Firm's address ▶ 43	95 N OCOEE	ST										
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	JJ IN OCOEE	٦,							hone ne	(422	1 176 1	5501
		CL	EVELAND, T	N 373	3124832						hone no	(723	, - /0-:	-JUL

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation TANICE LIMIT CON EVECUTIVE DE CO 000

JANICE J WILSON	EXECUTIVE DI	60,000	O	ĺ
PO BOX 4558 CLEVELAND, TN 373204558	20 00			
BEVERLY P JOHNSON	DIRECTOR	0	0	C

PO BOX 4558 CLEVELAND, TN 373204558	1 00	0	0	0
R MARK JOHNSON	DIRECTOR	0	0	0

CLEVELAND, TN 373204558				
R MARK JOHNSON	DIRECTOR	0	0	0
PO BOX 4558 CLEVELAND, TN 373204558	1 00			
TULIA TOHNSON SCOGGINS	DIRECTOR	0	0	0

R MARK JOHNSON	DIRECTOR	0	0	0
PO BOX 4558 CLEVELAND, TN 373204558	1 00			
JULIA JOHNSON SCOGGINS	DIRECTOR	0	0	0
PO BOX 4558	1 00			

CLEVELAND, TN 373204558				
JULIA JOHNSON SCOGGINS	DIRECTOR	0	0	0
PO BOX 4558 CLEVELAND, TN 373204558	1 00			

	DIRECTOR	·	•	•
PO BOX 4558 CLEVELAND, TN 373204558	1 00			
DORIS JOHNSON	DIRECTOR	0	0	0

PO BOX 4558 CLEVELAND, TN 373204558	1 00			
DORIS JOHNSON	DIRECTOR	0	0	
	1 1 00			

DOKIS JOHNSON	DIRECTOR	U	U	l o
PO BOX 4558 CLEVELAND, TN 373204558	1 00			

Foundation Purpose of grant or Recipient If recipient is an individual, Amount show any relationship to status of contribution

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

Name and address (home or business)	any foundation manager or substantial contributor	recipient	
a Paid during the year			

NONE PUBLIC. ARTS EDUCATION

ARTSBUTED 301 11TH STREET 10,000 CHATTANOOGA, TN 37403 NONE ASSOCIATION FOR VISUAL ARTS PUBLIC ART EDUCATION 30 FRAZIER AVENUE

14,048 CHATTANOOGA, TN 37405 NONE PUBLIC EDUCATION PROGRAM 25,000 AUSTIN HATCHER FOUNDATION 6739 RINGGOLD ROAD

NONE PUBLIC SUMMER PROGRAM

CHATTANOOGA, TN 37412 **BALLET TENNESSEE** 15,000 3202 KELLYS FERRY BEND RD CHATTANOOGA, TN 37419

BETHEL BIBLE VILLAGE NONE 45,000 PUBLIC PROGRAM SUPPORT 3001 HAMILL ROAD

HIXSON, TN 37343

Total . 1,529,592

3a

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	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
BOYS & GIRLS CLUB OF MONROE AREA 185 OAK GROVE ROAD MADISONVILLE, TN 37354	NONE	PUBLIC	PROGRAM SUPPORT	40,000
BOYS & GIRLS CLUBS OF TN VALLEY 1100 MARION STREET KNOXVILLE, TN 37921	NONE	PUBLIC	PROGRAM SUPPORT	30,000
BRADLEY CONCERTS INC PO BOX 823 CLEVELAND, TN 37364	NONE	PUBLIC	COMMUNITY CONCERTS	5,000
CAMP LOOKOUT 3130 HIGHWAY 157 RISING FAWN, GA 30738	NONE	PUBLIC	CAPITAL CAMPAIGN	50,000
CASA CORRIDOR OF EAST TENNESSEE 110 NORTH JACKSON STREET ATHENS, TN 37303	NONE	PUBLIC	PROGRAM SUPPORT	15,000

1,529,592

Total . 3a

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	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
CASA OF BRADLEY COUNTY 170 NORTH OCOEE STREET CLEVELAND, TN 37311	NONE	PUBLIC	ADVOCATE TRAINING PROGRAM	10,000
CASA OF MONROE COUNTY PO BOX 929 MADISONVILLE, TN 37354	NONE	PUBLIC	ADVOCATE TRAINING PROGRAM	5,000
CATOOSA COUNTY CHILDREN'S FUND PO BOX 130 RINGGOLD, GA 30736	NONE	PUBLIC	UNDERSERVED CHILDREN PROGRAM	5,000
CHATTANOOGA AREA FOOD BANK 2009 CURTAIN POLE ROAD CHATTANOOGA, TN 37406	NONE	PUBLIC	PROGRAM SUPPORT	50,000
CHATTANOOGA COMMUNITY KITCHEN PO BOX 11203 CHATTANOOGA, TN 37401	NONE	PUBLIC	PROGRAM SUPPORT	10,000

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1,529,592

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CHATTANOOGA STATE FOUNDATION LNONE DUBLIC GED GRADUATION 200

4501 AMNICOLA HIGHWAY CHATTANOOGA, TN 37406	NONE	POBLIC	GED GRADUATION	200
CHEROKEE AREA CNCL OF BOY SCOUTS 6031 LEE HIGHWAY CHATTANOOGA, TN 37421	NONE	PUBLIC	RURAL PROGRAMS	7,500
CLEVELANDBRADLEY KAB SYSTEM 474 2ND STREET SE CLEVELAND, TN 37311	NONE	PUBLIC	EDUCATION PROGRAM	3,000
CREATIVE DISCOVERY MUSEUM 321 CHESTNUT STREET CHATTANOOGA, TN 37402	NONE	PUBLIC	CHILDREN EDUCATIONAL PROGRAM	17,844
FAMILY CORNERSTONES INC PO BOX 5404 CLEVELAND, TN 37320	NONE	PUBLIC	PROGRAM SUPPORT	50,000
Total				1,529,592

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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	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
HOUSE OF REFUGE 3418 SAINT ELMO AVENUE CHATTANOOGA, TN 37409	NONE	PUBLIC	REHABILITATION PROGRAM	10,000
JOY SCHOOL CO 1ST PRESBYTERIAN 433 NORTH OCOEE STREET CLEVELAND, TN 37311	NONE	PUBLIC	SUMMER SCHOOL PROGRAM	5,000
JUNIOR ACHIEVEMENT PO BOX 2202 CLEVELAND, TN 37320	NONE	PUBLIC	PROGRAM SUPPORT	5,000
LEE UNIVERSITY PO BOX 3450 CLEVELAND, TN 37320	NONE	PUBLIC	CAPITAL CAMPAIGN	100,000
LOOKOUT MOUNTAIN CONSERVANCY PO BOX 76 LOOKOUT MOUNTAIN, TN 37350	NONE	PUBLIC	HOWARD HS INTERNSHIP PROGRAM	17,500
Total				1,529,592

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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	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
LOUDON COUNTY EDUCATION FDTN 318 ANGEL ROW LOUDON, TN 37774	NONE	PUBLIC	PROGRAM SUPPORT	10,000
MCMINN COUNTY EDUCATION FOUNDATION 114 ASHLEY COURT DRIVE ATHENS, TN 37303	NONE	PUBLIC	IMAGINATION LIBRARY PROGRAM	12,500
METANOIA PRISON MINISTRIES PO BOX 11092 CHATTANOOGA, TN 37401	NONE	PUBLIC	REHABILITATION PROGRAM	15,000
NORTHSIDE NEIGHBORHOOD HOUSE PO BOX 4086 CHATTANOOGA, TN 37405	NONE	PUBLIC	CHILDREN EDUCATIONAL PROGRAM	10,000
ON POINT 4509 HIXSON PIKE	NONE	PUBLIC	GRADUATION COACHING	25,000

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METANOIA PRISON MINISTRIES PO BOX 11092 CHATTANOOGA, TN 37401	NONE	PUBLIC	REHABILITATION PROGRAM	15,0
NORTHSIDE NEIGHBORHOOD HOUSE	NONE	PUBLIC	CHILDREN EDUCATIONAL	10,0

ON POINT 4509 HIXSON PIKE PROGRAM

HIXSON, TN 37343

1,529,592 Total .

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Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year POLK COUNTY FRIENDS OF THE NONE **PUBLIC** IMAGINATION LIBRARY 6,500 LIBRARY PROGRAM PO BOX 1171 BENTON, TN 37307 SECOND HARVEST FOOD BANK NONE DUBLIC SAK DAK DDOCDAM 9 000

136 HARVEST LANE MARYVILLE, TN 37801	NONE	POBLIC	SAN PAN PROGRAM	8,000
SISKIN HOSPITAL ONE SISKIN PLAZA CHATTANOOGA, TN 37403	NONE	PUBLIC	PROGRAM SUPPORT	50,000
TENNESSEE WESLEYAN COLLEGE 204 EAST COLLEGE STREET ATHENS, TN 37303	NONE	PUBLIC	CAPITAL CAMPAIGN	100,000

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TENNESSEE WESLEYAN COLLEGE 204 EAST COLLEGE STREET ATHENS, TN 37303	NONE	PUBLIC	CAPITAL CAMPAIGN	100,000
THE CARING PLACE PO BOX 5334 CLEVELAND, TN 37320	NONE	PUBLIC	FOOD PROGRAM	30,000
Total				1,529,592

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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	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
TROUSDALE SCHOOL 3171 HEWITT STREET SE CLEVELAND, TN 37323	NONE	PUBLIC	PROGRAM SUPPORT	8,000
UNITED WAY OF THE OCOEE REGION 85 SOUTH OCOEE STREET CLEVELAND, TN 37311	NONE	PUBLIC	PROGRAM SUPPORT	70,000
UNITED WAY OF LOUDON COUNTY PO BOX 145 LENOIR CITY, TN 37771	NONE	PUBLIC	PROGRAM SUPPORT	15,000
UNITED WAY OF MCMINNMEIGS CO 313 MAPLE STREET ATHENS, TN 37371	NONE	PUBLIC	PROGRAM SUPPORT	15,000
UNITED WAY OF MONROE COUNTY 695 NEW HIGHWAY 68 SWEETWATER, TN 37874	NONE	PUBLIC	PROGRAM SUPPORT	15,000

1,529,592

LENOIR CITY, TN 37771				
UNITED WAY OF MCMINNMEIGS CO 313 MAPLE STREET ATHENS, TN 37371	NONE	PUBLIC	PROGRAM SUPPORT	
UNITED WAY OF MONROE COUNTY	NONE	PUBLIC	PROGRAM SUPPORT	

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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	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
UNITED WAY OF NORTHWEST GEORGIA PO BOX 566 DALTON, GA 30722	NONE	PUBLIC	PROGRAM SUPPORT	15,000
UNITED WAY OF RHEA COUNTY 231 DELAWARE AVENUE DAYTON, TN 37321	NONE	PUBLIC	PROGRAM SUPPORT	15,000
UNIVERSITY OF TENNESSEE FOUNDATION 1609 MELROSE AVENUE KNOXVILLE, TN 37996	NONE	PUBLIC	SCHOLARSHIP PROGRAM	25,000
VOLUNTEERS IN MEDICINE PO BOX 81057 CHATTANOOGA, TN 37414	NONE	PUBLIC	CLINIC SUPPORT	20,000

PUBLIC

YMCA 301 WEST SIXTH STREET

CHATTANOOGA, TN 37402

Total . 3a NONE

YCAP PROGRAM

35,000

1,529,592

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	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
YOUNG LIFE OF MONROE COUNTY PO BOX 1088 MADISONVILLE, TN 37354	NONE	PUBLIC	PROGRAM SUPPORT	5,000	
GIRLS INC 709 S GREENWOOD AVENU CHATTANOOGA, TN 37404	NONE	PUBLIC	PROGRAM SUPPORT	10,000	
MARK MAKING PO BOX 4271 CHATTANOOGA, TN 37405	NONE	PUBLIC	PROGRAM SUPPORT	15,000	
MADISONVILLE PUBLIC LIBRARY 4023 HIGHWAY 411 NORTH MADISONVILLE, TN 37354	NONE	PUBLIC	PROGRAM SUPPORT	100,000	
CALHOUN SCHOOL PTO 150 SHERWOOD AVENUE	NONE	PUBLIC	PROGRAM SUPPORT	2,000	

CALHOUN, TN 37311

1,529,592 Total . .

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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	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
OCOEE THEATRE GUILD PO BOX 222 CLEVELAND, TN 37364	NONE	PUBLIC	PROGRAM SUPPORT	4,000	
HABITAT FOR HUMANITY OF CLEVELAND PO BOX 303 CLEVELAND, TN 37364	NONE	PUBLIC	PROGRAM SUPPORT	60,000	
RHEA COUNTY IMAGINATION LIBRARY PO BOX 669 DAYTON, TN 37321	NONE	PUBLIC	PROGRAM SUPPORT	1,500	
LAPAZ CHATTANOOGA 1402 BAILEY AVENUE CHATTANOOGA, TN 37404	NONE	PUBLIC	PROGRAM SUPPORT	10,000	
CONTEMPORARY PERFORMING ARTS	NONE	PUBLIC	PROGRAM SUPPORT	10,000	

PO BOX 669 DAYTON, TN 37321				
LAPAZ CHATTANOOGA 1402 BAILEY AVENUE CHATTANOOGA, TN 37404	NONE	PUBLIC	PROGRAM SUPPORT	10,00
CONTEMPORARY PERFORMING ARTS	NONE	PUBLIC	PROGRAM SUPPORT	10,00

1307 DODDS AVENUE CHATTANOOGA, TN 37404

1,529,592 Total . . . За

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	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
HIWASSEE COLLEGE 225 HIWASSEE COLLEGE DR MADISONVILLE, TN 37354	NONE	PUBLIC	CAPITAL CAMPAIGN	50,000	
WELCOME HOME OF CHATTANOOGA 400 S GERMANTOWN ROAD CHATTANOOGA, TN 37411	NONE	PUBLIC	PROGRAM SUPPORT	15,000	
HOLSTON UM HOME FOR CHILDREN 404 HOLSTON DRIVE GREENVILLE, TN 37743	NONE	PUBLIC	PROGRAM SUPPORT	50,000	
AMERICAN RED CROSS 4115 S ACCESS ROAD CHATTANOOGA, TN 37406	NONE	PUBLIC	PROGRAM SUPPORT	35,000	
ERLANGER HEALTH SYSTEM 975 EAST 3RD STREET CHATTANOOGA, TN 37403	NONE	PUBLIC	PROGRAM SUPPORT	50,000	

Total . . 3a 1,529,592

Form 990PF Part XV Line 3 - Gran	ts 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	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
FRIENDS OF THE 6TH CAVALRY MUSEUM PO BOX 2011 FORT OGLETHORPE, GA 30742	NONE	PUBLIC	PROGRAM SUPPORT	2,000
SALVATION ARMY OF CHATTANOOGA PO BOX 3359 CHATTANOOGA, TN 37404	NONE	PUBLIC	PROGRAM SUPPORT	15,000
SCENIC CITY CLAY ARTS 301 EAST 11TH STREET 100 CHATTANOOGA, TN 37403	NONE	PUBLIC	PROGRAM SUPPORT	10,000
HABITAT FOR HUMANITY OF GREATER CHA 1201 EAST MAIN STREET CHATTANOOGA, TN 37408	NONE	PUBLIC	PROGRAM SUPPORT	30,000
SOUTH CUMBERLAND COMMUNITY FUND 322 WEST MAIN STREET MONTEAGLE, TN 37356	NONE	PUBLIC	PROGRAM SUPPORT	10,000
Total				1,529,592

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TY 2016 Accounting Fees Schedule								
Name: GEORGE R JOHNSON FAMILY FOUNDATION								
EIN: 62-6401641								
_	.2 02 0 101	-	 	1				
Category Amount Net Investment Income Income Disbursements for Charitable Purposes								
TAX PREPARATION FEES	7,035			7,035				

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TY 2016 Investments Corporate Bonds Schedule								
Name	GEORGE R JOHNSON FAMILY F	OUNDATION						

End of Year Book

Value

6,675,489

EIN: 62-6401641

DI N. 02/0127100/077

End of Year Fair

Market Value

6,465,715

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Name of Bond

SEE ATTACHED - STATEMENT B

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491271004077
TY 2016 Investments Corporat	e Stock Sche	dule

Name: GEORGE R 10HNSON FAMILY FOUNDATION

Value

15,985,831

End of Year Fair

Market Value

19,807,842

Name of Stoc	k	End of Year Book
EIN:	62-6401641	

SEE ATTACHED - STATEMENT A

efile GRAPHIC print - DO NOT PR	ROCESS	As Filed Data -		DLN: 93491271004077
TY 2016 Land, Etc. Schedule				
r	Name:	GEORGE R JOHNS	ON FAMILY FOUNDATION	
	EIN:	62-6401641		

22 0401041				
Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
VACANT LAND - 4.34 ACRES	104,263		104,263	35,000

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TY 2016 Legal Fees Schedule					
_					
Name: GEORGE R JOHNSON FAMILY FOUNDATION EIN: 62-6401641					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
LEGAL FEES	3,195			3,195	

Description

As Filed Data -

Name: GEORGE R JOHNSON FAMILY FOUNDATION

EIN: 62-6401641

Other Assets Schedule

ASSETS IN TRANSIT

Beginning of Year -

Book Value

-5,473

End of Year - Book Value

-4.789

DLN: 93491271004077

End of Year - Fair Market Value

-4,789

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DL	N: 93491271004077		
TY 2016 Other Expenses Sche	edule					
Name:	GEORGE R JOH	NSON FAMILY FOU	UNDATION			
EIN:	EIN: 62-6401641					
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
EXPENSES						
LIABILITY INSURANCE	4,572	3,200		1,372		
OFFICE EXPENSE	8,359	2,508		5,851		
PROFESSIONAL DUES & CONSULTIN	4,200	1		4,200		

INVESTMENT EXPENSES

Name: GEORGE R JOHNSON FAMILY FOUNDATION

FIN: 62-6401641

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Other	Income	Schadul

PRIOR YEAR GRANT REIMBURSED

Other Income Schedule					
Description	Revenue And	Net Investme			

6,628

Adjusted Net Income

DLN: 93491271004077

Revenue And **Expenses Per Books**

As Filed Data -

Income

6,628

Net Investment

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491271004077			
TY 2016 Other Increases Schedule						
Name:	GEORGE R JOI	HNSON FAMILY FOUNDATION				
EIN:	62-6401641					
De	escription		Amount			
SEE ATTACHED - STATEMENT C			5,134			

efile GRAPHIC print - DO NOT PROCES	S As Filed Data	-	DL	N: 93491271004077		
TY 2016 Other Professional Fees Schedule						
Name: GEORGE R JOHNSON FAMILY FOUNDATION						
EIN: 62-6401641						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
INVESTMENT FEES	119,836	119,836				

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-		DLN: 93491271004077
TY 2016 Taxes Schedule				
Name	: GEORGE R J	OHNSON FAMILY	FOUNDATION	
EIN	: 62-6401641			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
REAL ESTATE TAXES	293			
LICENSES	20			
FOREIGN TAXES - QUALIFIED	5,284	5,284		
FOREIGN TAXES - NONQUALIFIED	225	225		
FEDERAL EXCISE TAX	3			