Form 990-PF

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

2018

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

BAA For Paperwork Reduction Act Notice, see instructions.

Do not enter social security numbers on this form as it may be made public.
 Go to www.irs.gov/Form990PF for instructions and the latest information.

Open to Public Inspection For calendar year 2018 or tax year beginning 2018, and ending Employer identification number JOHNSON HISTORICAL MUSEUM OF THE 95-3277997 В SOUTHWEST Telephone number (see instructions) (623) 974-2541 P.O. BOX 73282 PHOENIX, AZ 85050-1039 C If exemption application is pending, check here G Check all that apply: Initial return X Initial return of a former public charity D 1 Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, check Address change Name change here and attach computation X Section 501(c)(3) exempt private foundation H Check type of organization: Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Ε If private foundation status was terminated under section 507(b)(1)(A), check here. Fair market value of all assets at end of year Accounting method: X Cash Accrual (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ► S 5,384,158 (Part I, column (d) must be on cash basis.) Part I Analysis of Revenue and (d) Disbursements Expenses (The total of amounts in columns (b), (c), and (d) may not (a) Revenue and (b) Net investment (c) Adjusted net for charitable expenses per books income ıncome purposes (cash basis only) necessarily equal the amounts in column (a) (see instructions)) Contributions, gifts, grants, etc., received (attach schedule) 109,495 if the foundation is not required to attach Sch. E Interest on savings and temporary cash investments 47 47 Dividends and interest from securities . 791 791 5 a Gross rents 631 631 b Net rental income or (loss) 631 -39,1706 a Net gain or (loss) from sale of assets not on line 10. b Gross sales price for all assets on line 6a 142,847 Ō Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of c Gross profit or (loss) (attach schedule) Other income (attach schedule) 794 76,469 Total. Add lines 1 through 11 66,160. 13 Compensation of officers, directors, trustees, etc., 14 Other employee salaries and wages 49,400 4,200 15 Pension plans, employee benefits Operating and Administrative Expenses 16a Legal fees (attach schedule) SEE ST 1 <u>8</u> h Accounting fees (attach sch) 500 1,000 ເທ c Other professional fees (attach sch) SEE ST 2 31,104 31,104 SEE STM 3 18 Taxes (attach schedule)(see instrs). 10,857 ,176 Depreciation (attach schédule) and depletion Occupancy 21 Travel, conferences, and meetings 940 Printing and publications 189 Other expenses (attach schedule) SEE STATEMENT 4 78,549. Total operating and administrative 36,980 expenses. Add lines 13 through 23. 249,331 Contributions, gifts, grants paid Total expenses and disbursements. 0. Add lines 24 and 25 249,331 36,980 Subtract line 26 from line 12: a Excess of revenue over expenses -102,537 and disbursements 39,489 b Net investment income (if negative, enter -0-). 0. C Adjusted net income (if negative, enter -0-)

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Par	t II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		year
		(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing	150,776.	22,840.	22,840.
	2	Savings and temporary cash investments	417,498.	489,745.	489,745.
	3	Accounts receivable		_ _	
					
	4	Pledges receivable . ► Less: allowance for doubtful accounts ►			
	5	Grants receivable			
	١.				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7				
		Less: allowance for doubtful accounts			
\$	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
•	10:	a Investments – U.S. and state government			
		obligations (attach schedule)			
		b Investments — corporate stock (attach schedule) STATEMENT 5	2,128,968.	2,081,097.	4,082,737.
	i	c Investments — corporate bonds (attach schedule) .		_ 	
	11	Investments — land, buildings, and equipment, basis			
		Less: accumulated depreciation (attach schedule) .			
	12	Investments – mortgage loans			
	13	Investments — other (attach schedule)			
	14	Land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule)			
		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	787,813.	788,836.	788,836.
		Total assets (to be completed by all filers – see the instructions Also, see page 1, item l)	3,485,055.	3,382,518.	5,384,158.
	17	Accounts payable and accrued expenses			
တ္သ	18	Grants payable			
ij	19	Deferred revenue	1	 	
Liabilities	20	Loans from officers, directors, trustees, & other disqualified persons			
: -	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe			<u> </u>
	23	Total liabilities (add lines 17 through 22).	0.	0.	
ses	-	Foundations that follow SFAS 117, check here and complete lines 24 through 26, and lines 30 and 31.			
ä	24	Unrestricted	1	Ì	
3a	25	Temporarily restricted			
P	26	Permanently restricted			
Net Assets or Fund Balances		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.	1		
sor	27	Capital stock, trust principal, or current funds			
ğ	28	Paid-in or capital surplus, or land, bldg., and equipment fund.			
Ası	29	Retained earnings, accumulated income, endowment, or other funds	3,485,055.	3,382,518.	
t l	30	Total net assets or fund balances (see instructions)	3,485,055.	3,382,518.	
Ž	31	Total liabilities and net assets/fund balances (see instructions)	3,485,055.	3,382,518.	
Part	Ш	Analysis of Changes in Net Assets or Fund Balance		0,002,010.	·
		net assets or fund balances at beginning of year - Part II, colur		ree with	
	end-d	of-year figure reported on prior year's return) .	(2)/ /// 00 (///ao/ ag/	1	3,485,055.
		r amount from Part I, line 27a		2	-102,537.
		increases not included in line 2 (itemize)		3	
		lines 1, 2, and 3	• • •	4	3,382,518.
		ises not included in line 2 (itemize)	-6-20-5-7-7-7	5	2 200 550
6	ı otal	net assets or fund balances at end of year (line 4 minus line 5)	- Part II, column (b), lin	e 30 6	3,382,518.

	the kind(s) of property sold (for example)		(b) How acquired		(d) Date sold
2-story brick v	P — Purchase D — Donation	(mo , day, yr)	(mo , day, yr)		
1a 1,000.0000 IBM COR	P		P	6/20/14	5/30/18
<u>b</u>					·
				 	
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba plus expense of sa		(h) Gain or ((e) plus (f) m	
a142,847.		18	2,017.		-39,170.
b	<u> </u>	· · · · · · · · · · · · · · · · · · ·			
e					
Complete only for assets showing	ng gain in column (h) and owned by the	foundation on 12/31/69.		(I) Gains (Col.	(h)
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		gain minus col. (k), b ian -0-) or Losses (fr	ut not less
a					-39,170.
<u>b</u>					
<u>c</u>					
d 	 				
2 Capital gain net income or (ne	et capital loss).	enter in Part I, line 7			
, ,	(loss) as defined in sections 1222(5	ter -0- in Part I, line 7) and (6):	2		-39,170.
If gain, also enter in Part I, Iir	ne 8, column (c) See instructions. If	(loss), enter -0-	3		•
In Part I, line 8	r Section 4940(e) for Reduce	nd Tay on Net Investm		<u> </u>	0.
	foundations subject to the section 4940			N/A	
	·	` ,	,	,	
If section 4940(d)(2) applies, leave	triis part biank			_	_
	ction 4942 tax on the distributable a	• •	ase period?	Yes	∐ No
	ify under section 4940(e) Do not co		antrios.		
	each column for each year, see the in: (b)	(c)	entries	(d)	
(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use ass	ets	Distribution (col (b) divided	
2017					
2016					
2015 2014					
2013					
				I	
2 Total of line 1, column (d)			2		
3 Average distribution ratio for the number of years the foundation	5-year base period — divide the total on has been in existence if less than	on line 2 by 5.0, or by the 5 years	3		
4 Enter the net value of nonchar	ritable-use assets for 2018 from Par	t X, line 5	4		
5 Multiply line 4 by line 3			5		
6 Enter 1% of net investment in	come (1% of Part I, line 27b)		6		
7 Add lines 5 and 6			7		
8 Enter qualifying distributions for	rom Part XII, line 4		8		
If line 8 is equal to or greater that	in line 7, check the box in Part VI, line	1b, and complete that part u	sing a 1% tax r	ate. See the	

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instructi	ons)		
1 a Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.				
Date of ruling or determination letter: (attach copy of letter if necessary – see instructions)	1			
b Domestic foundations that meet the section 4940(e) requirements in Part V,	_1			790.
check here. ▶ ☐ and enter 1% of Part I, line 27b			-	
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b).	 			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable				
foundations only; others, enter -0-)	2			0.
3 Add lines 1 and 2	3			<u> 790.</u>
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	4			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	5			<u> 790.</u>
6 Credits/Payments:				
a 2018 estimated tax pmts and 2017 overpayment credited to 2018				j
b Exempt foreign organizations — tax withheld at source	: 1			
c Tax paid with application for extension of time to file (Form 8868). d Backup withholding erroneously withheld 6 d				
7 Total credits and payments Add lines 6a through 6d	7			
8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached	8			<u>0.</u> 32.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			32. 322.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			
11 Enter the amount of line 10 to be: Credited to 2019 estimated tax	11			
Part VII-A Statements Regarding Activities				
			Yes	No
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		1 a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes?				
See the instructions for the definition		1ь		X
If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities				
c Did the foundation file Form 1120-POL for this year?	,	1 c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	_			
(1) On the foundation ►\$ 0. (2) On foundation managers ►\$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	0	<u>- </u>		İ
foundation managers •\$0.		<u> </u>		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?	•	2		<u>X</u>
If 'Yes,' attach a detailed description of the activities		}		
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles		<u> </u>		لـــــ
of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes		3 4a		X
 4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year? b If 'Yes,' has it filed a tax return on Form 990-T for this year? 		4 a 4 b	37	X
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	10	/A X
If 'Yes,' attach the statement required by General Instruction T	•			$\widehat{}$
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				1
By language in the governing instrument, or		!		
,				ĺ
 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 		6		
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col. (c), and Part XV		7	Χ	
8 a Enter the states to which the foundation reports or with which it is registered. See instructions				
AZ				l
b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			 -	
(or designate) of each state as required by General Instruction G? If 'No,' attach explanation		8 b	<u>X</u> _	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV If 'Yes,' complete	4942(j)(5	9		 -
	i ail AiV	-		<u>X</u>
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	_	10	-	x
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Pa	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' attach schedule. See instructions	11	Yes	No X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement. See instructions	12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address			
14		_ <u>974</u>	<u>-254</u>	1_
15	Located at ► P.O. BOX 73282 PHOENIX AZ ZIP + 4 ► 85050-10 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – check here	3 <u>9 </u>		Ē
.5	and enter the amount of tax-exempt interest received or accrued during the year	17 12		∐ N/A
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a		Yes	No
	bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Yes	No
1 a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		1	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(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.) Yes X No			
t	If any answer is 'Yes' to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions.	1 b	N	/A
	Organizations 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 2018?	1 c		Х
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 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? Yes X No			i
	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.)	2 b	- N	
_	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	20	- IN V	- A
·	► 20 _ , 20 _ , 20 _ , 20	ľ	ŀ	
٦.	- -	1	}	
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No			
b	If 'Yes,' did it have excess business holdings in 2018 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		ļ	ı
	(3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C. Form 4/20, to	 		<u> </u>
	determine if the foundation had excess business holdings in 2018.).	3 b	N	A
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u> </u>
ı_	Did the foundation make any investment in a prior year (but after December 31, 1969) that could			
	geopardize its charitable purpose that had not been removed from geopardy before the first day of			
	the tax year beginning in 2018? .	4 b rm 990	.PF (X 2018)
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Part VII-B Statements Regarding Activit	ies for Which Forn	n 4720 May Be Req	uired (continued)	
5 a During the year, did the foundation pay or incur a	any amount to:			Yes No
(1) Carry on propaganda, or otherwise attem	pt to influence legislation	on (section 4945(e))?	Yes X	No
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	ation drive? .	• • •	Yes X	No
(3) Provide a grant to an individual for travel,	, study, or other similar	purposes?	. Yes X	No
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? See instructions	n a charitable, etc., organ s .	ization described	. Yes X	No
Provide for any purpose other than religion educational purposes, or for the prevention			Yes X	No
b If any answer is 'Yes' to 5a(1)—(5), did any or described in Regulations section 53 4945 or in a See instructions	f the transactions fail to current notice regarding o	qualify under the excerdisaster assistance?	ptions	5 b N/A
Organizations relying on a current notice rega	irding disaster assistan	ce, check here .		, July My A
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon If 'Yes,' attach the statement required by Regi	sibility for the grant?		N/A Yes] No
6 a Did the foundation, during the year, receive at on a personal benefit contract?		• •	s . ∏Yes X	No
b Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	iums, directly or indirec	tly, on a personal bene		6b X
7a At any time during the tax year, was the found	dation a party to a proh	ubited tax shelter transa	action? Yes X	No
b If 'Yes,' did the foundation receive any proceed	• •		ت ب	N/A 7b
8 Is the foundation subject to the section 4960 tax of	on payment(s) of more th	an \$1,000,000 in remune	ration	
or excess parachute payment(s) during the ye	ear? .		∐Yes X	No
Part VIII Information About Officers, D	irectors, Trustees,	Foundation Manag	gers, Highly Paid E	mployees,
and Contractors List all officers, directors, trustees, and found	dation managers and th	neir compensation See	instructions	
List all officers, directors, trustees, and found	(b) Title, and average	(c) Compensation	(d) Contributions to	Γ
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	(e) Expense account, other allowances
ALAN_FINKS	PRESIDENT	24,000.	0.	0.
P.O. BOX 73282	10.00			
PHOENIX, AZ 85050-1039				
GINNY_BAKER	TREASURER	42,160.	0.	0.
P.OBOX_73282	25.00			}
PHOENIX, AZ 85050-1039				<u>-</u> <u>-</u>
HARVEY FINKS	SECRETARY	0.	0.	0.
P.O. BOX 73282 PHOENIX, AZ 85050-1039	15.00			
2 Compensation of five highest-paid employees (of	ther than those included	on line 1 – see instruction	ns). If none, enter 'NONE	<u> </u>
	(b) Title, and average		(d)Contributions to employee benefit	(e) Expense account.
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred compensation	other allowances
NONE				
	İ			
				
	ľ			
				1
otal number of other employees paid over \$50 000			<u> </u>	
mai minner of other embloyees baid over wall lill				

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#Ch	
2	
All other program-related investments See instructions.	
3	
Total. Add lines 1 through 3	0.
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see instructions.)		
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: a Average monthly fair market value of securities.	1a	4,261,762.
b Average of monthly cash balances	1 Ь	517,750.
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	4,779,512.
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets .	. 2	0.
3 Subtract line 2 from line 1d .	3	4,779,512.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	71,693.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 .	5	4,707,819.
6 Minimum investment return. Enter 5% of line 5	. 6	235,391.
PartiXI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operand certain foreign organizations, check here ☐ and do not complete this particular organizations.		undations
1 Minimum investment return from Part X, line 6	1	235,391.
	90.	
b Income tax for 2018 (This does not include the tax from Part VI.) 2b		
c Add lines 2a and 2b .	2 c	790.
3 Distributable amount before adjustments Subtract line 2c from line 1 .	3	234,601.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	234,601.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	234,601.
PartXIII Qualifying Distributions (see Instructions)		
Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes a Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1 a	
b Program-related investments — total from Part IX-B	1 ь	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required)	. 3a	
b Cash distribution test (attach the required schedule).	3 Ь	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8; and Part XIII, line 4	4	0.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b See instructions	5	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the qualifies for the section 4940(e) reduction of tax in those years	foundation	
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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				234,601.
2 Undistributed income, if any, as of the end of 2018:				234,001.
a Enter amount for 2017 only	•	<u> </u>	0.	
b Total for prior years: 20 , 20 , 20		0.		
3 Excess distributions carryover, if any, to 2018:				
a From 2013 .				
b From 2014	7			
c From 2015 .				
d From 2016 .	7			
e From 2017				
f Total of lines 3a through e.	0.			
4 Qualifying distributions for 2018 from Part				
XII, line 4: ► \$		_		
a Applied to 2017, but not more than line 2a			0.	
b Applied to undistributed income of prior year	rs			
(Election required – see instructions) .		0.		
c Treated as distributions out of corpus				
(Election required – see instructions)	0.			
d Applied to 2018 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the	0.			0.
same amount must be shown in column (a).)			
`,				
6 Enter the net total of each column as	1			
indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.			
b Prior years' undistributed income Subtract				
line 4b from line 2b	.1	0.		
c Enter the amount of prior years' undistribute income for which a notice of deficiency has				
been issued, or on which the section 4942(a tax has been previously assessed)			
•	·	0.		
d Subtract line 6c from line 6b Taxable amount — see instructions.		0.		
e Undistributed income for 2017. Subtract line 4a from line 2a Taxable amount — see instructions.			0.	
inic za Takabic amount — see instructions				
f Undistributed income for 2018. Subtract lines	s		[
4d and 5 from line 1. This amount must be distributed in 2019				234,601.
7 Amounts treated as distributions out of				291/0021
corpus to satisfy requirements imposed by	ĺ			
section 170(b)(1)(F) or 4942(g)(3) (Electión may be required — see instructions)	0.	J	j	
8 Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions)	0.1			
9 Excess distributions carryover to 2019.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2014				•
b Excess from 2015 .				
c Excess from 2016			ĺ	
d Excess from 2017				
e Excess from 2018 .				
				Carres 000 DE (2010)

Form 990-PF (2018) JOHNSON HISTORIC				95-3277997	
Part XIV Private Operating Founda					N/A
1 a If the foundation has received a ruling or deto is effective for 2018, enter the date of the	ermination letter that ruling .	it is a private operat	ing foundation, and th	e ruling ►	
b Check box to indicate whether the founda		rating foundation o	described in section	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	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
each year listed					
b 85% of line 2a .c Qualifying distributions from Part XII,			 	/_	
line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities.					
 Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c 					
3 Complete 3a, b, or c for the alternative test relied upon:	1				
a 'Assets' alternative test — enter				j	
(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)	1			1	
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization				-	
(4) Gross investment income					
Part XV Supplementary Information	(Complete this	part only if the	foundation had	\$5,000 or more	in
assets at any time during th		structions.)			
1 Information Regarding Foundation Managers of the foundation who have	•	an 2% of the total co	ontributions received b	v the foundation befo	ore the
close of any tax year (but only if they have NONE	e contributed more t	han \$5,000). (See	section 507(d)(2))	,	
b List any managers of the foundation who own	10% or more of the s	stock of a corporatio	n (or an equally large	portion of the owners	ship of
a partnership or other entity) of which the NONE	foundation has a 10	% or greater intere	est.		
2 Information Regarding Contribution, Grant, (Gift, Loan, Scholarsh	in. etc Prográms:			
Check here X If the foundation only ma requests for funds. If the foundation makes	kes contributions to p	reselected charitabl			
2a, b, c, and d See instructions. a The name, address, and telephone number of	r email address of the	person to whom ap	polications should be a	ddressed	
		,	,		
			 		
b The form in which applications should be s	submitted and inforn	nation and materia	ils they should includ	e:	
c Any submission deadlines:					
d Any restrictions or limitations on awards, s	wich as by assertable	ucal areas sharetal	hle fields kinds of in	stitutions or other f	actors:
Any restrictions of limitations on awards, s	ьист аз ру деодгарп	ncai aisas, ciiaiilai	pic neids, Killus Of III	Satutions, or other I	actors,
				r_	000 DE (2010)

Page 11

3 Grants and Contributions Paid During the Ye	ear or Approved for Fut	ure Paymen	t	N/A
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year	or substantial contributor			
Total .	·			a
b Approved for future payment . Total			▶ 31	

ter gross amounts unless other	wise indicated		business income	Excluded by	section 512, 513, or 514	(e)
		(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exemp function income (See instructions.)
Program service revenue		<u> </u>		code		_ `
a b		 		+		
						
				+		
d		 		+		
e		 		+		
g Fees and contracts from gov	vornment agencies	 		++-		
				+		
Membership dues and asses		 		+		
Interest on savings and temporary of Dividends and interest from s		 		14	47.	
				14	75,791.	
Net rental income or (loss) fi	rom rear estate	 		+		
a Debt-financed property		-		+		
b Not debt-financed property				16	631.	
Net rental income or (loss) from per	ізонаї ріорепу	 +		+		
Other investment income	ather than increase			+ _+		
Gain or (loss) from sales of assets of Net income or (loss) from so	•	 		18	-39,170.	
· · · · · · · · · · · · · · · · · · ·				+-+		
Gross profit or (loss) from sa	ales of inventory					
Other revenue:		<u> </u>		+-+		
a		 				
b		 -		++		
c		 		 		
d		 	<u> </u>	+		
d e						
e Subtotal Add columns (b), (d	d), and (e)				37,299.	
d e Subtotal Add columns (b), (c) Total. Add line 12, columns	d), and (e) (b), (d), and (e)				37, 299. 13	37,299
d e Subtotal Add columns (b), (c) Total. Add line 12, columns worksheet in line 13 instruction	d), and (e) (b), (d), and (e) ons to verify calculation				13 _	37,299
d e Subtotal Add columns (b), (c) Total. Add line 12, columns the worksheet in line 13 instructions art XVI-B Relationship o	d), and (e) (b), (d), and (e) ons to verify calculations of Activities to the	Accomplis		 _	13 _ es	
d e Subtotal Add columns (b), (c) Total. Add line 12, columns the worksheet in line 13 instructions art XVI-B Relationship o	d), and (e) (b), (d), and (e) ons to verify calculations of Activities to the	Accomplis		 _	13 _ es	
Subtotal Add columns (b), (c) Total. Add line 12, columns be worksheet in line 13 instructionant XVI-B Relationship of the No. Explain below how each accomplishment of the	d), and (e) (b), (d), and (e) ons to verify calculations of Activities to the	Accomplis		 _	13 _ es	
d e Subtotal Add columns (b), (c) Total. Add line 12, columns the worksheet in line 13 instructions art XVI-B Relationship o	d), and (e) (b), (d), and (e) ons to verify calculations of Activities to the	Accomplis		 _	13 _ es	
Subtotal Add columns (b), (c) Total. Add line 12, columns be worksheet in line 13 instructionant XVI-B Relationship of the No. Explain below how each accomplishment of the	d), and (e) (b), (d), and (e) ons to verify calculations of Activities to the	Accomplis		 _	13 _ es	
Subtotal Add columns (b), (c) Total. Add line 12, columns be worksheet in line 13 instructionant XVI-B Relationship of the No. Explain below how each accomplishment of the	d), and (e) (b), (d), and (e) ons to verify calculations of Activities to the	Accomplis		 _	13 _ es	
Subtotal Add columns (b), (c) Total. Add line 12, columns be worksheet in line 13 instructionart XVI-B Relationship one No. Explain below how each accomplishment of the	d), and (e) (b), (d), and (e) ons to verify calculations of Activities to the	Accomplis		 _	13 _ es	
Subtotal Add columns (b), (c) Total. Add line 12, columns be worksheet in line 13 instructionart XVI-B Relationship one No. Explain below how each accomplishment of the	d), and (e) (b), (d), and (e) ons to verify calculations of Activities to the	Accomplis		 _	13 _ es	
Subtotal Add columns (b), (c) Total. Add line 12, columns be worksheet in line 13 instructionant XVI-B Relationship of the No. Explain below how each accomplishment of the	d), and (e) (b), (d), and (e) ons to verify calculations of Activities to the	Accomplis		 _	13 _ es	
Subtotal Add columns (b), (c) Total. Add line 12, columns e worksheet in line 13 instruction t XVI-B Relationship one No. Explain below how each accomplishment of the	d), and (e) (b), (d), and (e) ons to verify calculations of Activities to the	Accomplis		 _	13 _ es	
Subtotal Add columns (b), (c Total. Add line 12, columns e worksheet in line 13 instruction IT XVI-B Relationship o ne No. Explain below how eac accomplishment of the	d), and (e) (b), (d), and (e) ons to verify calculations of Activities to the	Accomplis		 _	13 _ es	
Subtotal Add columns (b), (c Total. Add line 12, columns e worksheet in line 13 instruction IT XVI-B Relationship o ne No. Explain below how eac accomplishment of the	d), and (e) (b), (d), and (e) ons to verify calculations of Activities to the	Accomplis		 _	13 _ es	
Subtotal Add columns (b), (c Total. Add line 12, columns e worksheet in line 13 instruction IT XVI-B Relationship o Begin below how each accomplishment of the	d), and (e) (b), (d), and (e) ons to verify calculations of Activities to the	Accomplis		 _	13 _ es	
Subtotal Add columns (b), (c) Total. Add line 12, columns e worksheet in line 13 instruction t XVI-B Relationship one No. Explain below how each accomplishment of the	d), and (e) (b), (d), and (e) ons to verify calculations of Activities to the	Accomplis		 _	13 _ es	
Subtotal Add columns (b), (c) Total. Add line 12, columns be worksheet in line 13 instructionart XVI-B Relationship one No. Explain below how each accomplishment of the	d), and (e) (b), (d), and (e) ons to verify calculations of Activities to the	Accomplis		 _	13 _ es	
Subtotal Add columns (b), (c) Total. Add line 12, columns be worksheet in line 13 instructionart XVI-B Relationship one No. Explain below how each accomplishment of the	d), and (e) (b), (d), and (e) ons to verify calculations of Activities to the	Accomplis		 _	13 _ es	
Subtotal Add columns (b), (c) Total. Add line 12, columns be worksheet in line 13 instructionant XVI-B Relationship of the No. Explain below how each accomplishment of the	d), and (e) (b), (d), and (e) ons to verify calculations of Activities to the	Accomplis		 _	13 _ es	
Subtotal Add columns (b), (c) Total. Add line 12, columns be worksheet in line 13 instructionart XVI-B Relationship one No. Explain below how each accomplishment of the	d), and (e) (b), (d), and (e) ons to verify calculations of Activities to the	Accomplis		 _	13 _ es	
Subtotal Add columns (b), (c Total. Add line 12, columns e worksheet in line 13 instruction IT XVI-B Relationship o Begin below how each accomplishment of the	d), and (e) (b), (d), and (e) ons to verify calculations of Activities to the	Accomplis		 _	13 _ es	
Subtotal Add columns (b), (c) Total. Add line 12, columns e worksheet in line 13 instruction t XVI-B Relationship one No. Explain below how each accomplishment of the	d), and (e) (b), (d), and (e) ons to verify calculations of Activities to the	Accomplis		 _	13 _ es	
Subtotal Add columns (b), (c) Total. Add line 12, columns e worksheet in line 13 instruction t XVI-B Relationship one No. Explain below how each accomplishment of the	d), and (e) (b), (d), and (e) ons to verify calculations of Activities to the	Accomplis		 _	13 _ es	
Subtotal Add columns (b), (c) Total. Add line 12, columns be worksheet in line 13 instructionant XVI-B Relationship of the No. Explain below how each accomplishment of the	d), and (e) (b), (d), and (e) ons to verify calculations of Activities to the	Accomplis		 _	13 _ es	
Subtotal Add columns (b), (c) Total. Add line 12, columns be worksheet in line 13 instructionant XVI-B Relationship of the No. Explain below how each accomplishment of the	d), and (e) (b), (d), and (e) ons to verify calculations of Activities to the	Accomplis		 _	13 _ es	
d e Subtotal Add columns (b), (c) Total. Add line 12, columns the worksheet in line 13 instruction art XVI-B Relationship of the N/A Explain below how ear accomplishment of the N/A	d), and (e) (b), (d), and (e) ons to verify calculations of Activities to the	Accomplis		 _	13 _ es	
Subtotal Add columns (b), (c) Total. Add line 12, columns be worksheet in line 13 instructionant XVI-B Relationship of the No. Explain below how each accomplishment of the	d), and (e) (b), (d), and (e) ons to verify calculations of Activities to the	Accomplis		 _	13 _ es	
d e Subtotal Add columns (b), (c) Total. Add line 12, columns the worksheet in line 13 instruction art XVI-B Relationship of the N/A Explain below how ear accomplishment of the N/A	d), and (e) (b), (d), and (e) ons to verify calculations of Activities to the	Accomplis		 _	13 _ es	

Form 990-PF (2018) JOHNSON HISTORICAL MUSEUM OF THE 95-3277997 Partixvil Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

							1	Yes	No
1 Did th	ne organization directly ribed in section 501(c)	or indirectly of other than se	engage in any of the cition 501(c)(3) organ	following with izations) or i	n any other orga n section 527.	anization			
relatir	ng to political organizat	tions?	onon our (o)(o) organ	.24.1011.07 07 1	.,				
a Trans	sfers from the reporting	foundation to	a noncharitable exe	mpt organiza	tion of:		Ĺ		
(J) C	Cash						1 a (1)	X
(2) O	Other assets .		•		•		1 a (2)	<u>X</u>
b Other	transactions:								
(1) S	sales of assets to a non	icharitable exe	empt organization		•	•	1 b (1)	<u>X</u>
(2) P	urchases of assets from	m a noncharit	able exempt organıza	ition			1 b (2		<u>X</u>
	Rental of facilities, equip		er assets .	•	•		. 1 b (3		<u>X</u>
(4) R	Reimbursement arrange	ments					1 b (4		X
(5) Le	oans or loan guarantee	·s		•			1 Ь (5		X
(6) P	erformance of services	or membersh	np or fundraising soli	citations	• •		. 1 b (6		X
c Sharii	ng of facilities, equipme	ent, mailing li	sts, other assets, or p	oaid employe	es		1 c		_X_
					0.1 45.1				
the go	answer to any of the a oods, other assets, or ser ransaction or sharing a	vices given by rrangement s	the reporting foundation the reporting foundation the column (d) the	ng schedule. on. If the found e value of the	dation received le	ess than fair marke essets, or services	tne fair market v t value in s received.	alue of	
(a) Line no	(b) Amount involved		of noncharitable exempt or			n of transfers, transac		angement	
N/A	(-)	(3)		3	(-)				
									
									
							··		
									
			· · · · · · · · · · · · · · · · · · ·						
									
						·			
						·			
							·		
									_
							· · · · · · · · · · · · · · · · · · ·		
									
2a Is the	foundation directly or inc ibed in section 501(c) (lirectly affiliated	d with, or related to, or	ne or more tax	-exempt organiza	ations		s XI	
	s,' complete the following					•		· <u>·</u>	
	(a) Name of organization		(b) Type of o	rganization		(c) Description	on of relationship		
N/A	(-)		(2) .)	<u> </u>		(6)			
N/A									
									
Tunde	er penalties of perjury, I declare	that I have exam	ined this return, including ac	companying sche	dules and statement	s, and to the best of my	knowledge and belief	it is true,	
corre	ect, and complete Declaration	of preparer (other	than taxpayer) is based on a	all information of	which preparer has a	ny knowledge			
Sign	<i>سا</i> - ،	. /	4	, /	N		f this reti	IRS discu irn with the	• 1
Here	X Virgini	aBa	kee X	11/8/201	TREASU	RER	prepare	r shown be tructions	elow?
Sıç	gnature of officer of trustee	7	Date	' /	Title			Yes	No
-	Print/Type preparer's nam	ne	Preparer's signatu	ire 🗸	Date	Check	if PTIN		_
Paid	DARRIN J. RI	LEY, CPA	DARRIN	RILEY,	LEPA 11/6	18 self-empl	oyed P0022	<u>5254</u>	
Preparer			RILEY CPA PLG			Firm's EIN ►	27-0733529)	
Use Only			ELBACK RD STE	370					
			Z 85016			Phone no	(602) 385-	3979	
BAA								90-PF (2	2018)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

2018

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of the organization JOHNSON HISTORICA	Employer identification number				
SOUTHWEST		95-3277997			
Organization type (check one):					
Filers of:	Section:				
Form 990 or 990-EZ 501(c)() (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a	a private foundation			
	527 political organization				
Form 990-PF	X 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a pri	vate foundation			
	501(c)(3) taxable private foundation				
Check if your organization is covered by the General	l Rule or a Special Rule.				
Note: Only a section 501(c)(7), (8), or (10) org	anization can check boxes for both the General Rule and a	Special Rule. See instructions			
General Rule					
X For an organization filing Form 990, 990-E. property) from any one contributor. Complete	Z, or 990-PF that received, during the year, contributions to the Parts I and II. See instructions for determining a contrib-	aling \$5,000 or more (in money or utor's total contributions.			
Special Rules					
under sections 509(a)(1) and 170(b)(1)(A)(vi)	01(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% sup that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, he year, total contributions of the greater of (1) \$5,000, or (0-EZ, line 1 Complete Parts I and II.	. 16a. or 16b. and that			
For an organization described in section 50 during the year, total contributions of more purposes, or for the prevention of cruelty to contributor name and address), II, and III.	11(c)(7), (8), or (10) filing Form 990 or 990-EZ that received than \$1,000 <i>exclusively</i> for religious, charitable, scientific, lo children or animals. Complete Parts I (entering 'N/A' in co	from any one contributor, literary, or educational lumn (b) instead of the			
during the year, contributions exclusively for \$1,000. If this box is checked, enter here the charitable, etc., purpose. Don't complete a	of (c)(7), (8), or (10) filing Form 990 or 990-EZ that received or religious, charitable, etc., purposes, but no such contributione total contributions that were received during the year for my of the parts unless the General Rule applies to this organishe, etc., contributions totaling \$5,000 or more during the year.	tions totaled more than an <i>exclusively</i> religious, nization because			
Caution: An organization that isn't covered by 990-PF) but it must answer 'No' on Part IV. In	the General Rule and/or the Special Rules doesn't file Sche he 2, of its Form 990; or check the box on line H of its Form filing requirements of Schedule B (Form 990, 990-EZ, or 99	dule B (Form 990, 990-EZ, or 1990-EZ or on its Form 990-PF.			

BAA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

ય '	•		1
Name of org	B (Form 990, 990-EZ, or 990-PF) (2018) ON HISTORICAL MUSEUM OF THE		1 1 Page 2 oyer identification number 3277997
	Contributors (see instructions) Use duplicate copies of Part I if additional s		
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	FINKS FOUNDATION P.O. BOX 73282 PHOENIX, AZ 85050-1039	\$101,925	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - \$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	·	- \$	Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	·	\$	Person Payroll Noncash

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Employer identification number

Name of organization

JOHNSON HISTORICAL MUSEUM OF THE

9<u>5</u>-3<u>277</u>997

יובמו לווו	Noncash Property (see instructions) Use duplicate copies of Part II it additional s	pace is needed	· · · · · · · · · · · · · · · · · · ·
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	N/A		
		4	
		\$	
(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
-			
		+	
]\$	L
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
`]\$	L_ _
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	<u> </u>	1	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
			000 57 4000
BAA	Sche	dule B (Form 990, 990-E2	z, or 990-PF) (2018

1

Name of organization

Employer identification number

JOHNSON	HISTORICAL MUSEUM OF THE	95-3277997
Part III	Exclusively religious, charitable, etc., contributions to organizations described	in section 501(c)(7)

or (10) that 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)

contributions of \$1,000 or less for the year. (Enter this information once. See instructions) Use duplicate copies of Part III if additional space is needed. (d) Description of how gift is held (a) No. from Part I (b) Purpose of gift (c) Use of gift N/A (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part i (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (b) Purpose of gift (d) Description of how gift is held (a) No. from Part I (c) Use of gift (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (a) No. from Part I

(e) Transfer of gift

Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

2018 	FEDERAL STATEMENTS OHNSON HISTORICAL MUSEUM OF THE SOUTHWEST	PAGE 1 95-327799
STATEMENT 1 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES		
ACCOUNTING FEES .	EXPENSES INVESTMENT ADJU	C) (D) JSTED CHARITABLE INCOME PURPOSES 0. \$ 0.
STATEMENT 2 FORM 990-PF, PART I, LINE 16C OTHER PROFESSIONAL FEES		
INVESTMENT MANAGEMENT FEES	EXPENSES INVESTMENT ADJU	C) (D) USTED CHARITABLE INCOME PURPOSES 0. \$ 0.
STATEMENT 3 FORM 990-PF, PART I, LINE 18 TAXES		
FOREIGN TAXES . PAYROLL TAXES .	EXPENSES INVESTMENT ADJU	C) (D) USTED CHARITABLE NCOME PURPOSES 0. \$ 0.
STATEMENT 4 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES		
		(C) (D) USTED CHARITABLE NCOME PURPOSES
ADVERTISING AND PROMOTION AUTO/TRUCK DUES AND SUBSCRIPTIONS INSURANCE IRRIGATION LIVESTOCK EXPENSES OTHER EXPENSES PEST CONTROL POSTAGE	\$ 4,801. 6,809. 83. 8,790. 1,864. 16,345. 345. 517.	
REPAIRS AND MAINTENACNE SUPPLIES TELEPHONE TOOLS AND EQUIPMENT RENTAL	33,753. 2,825. 420. 1,493. TOTAL \$ 78,549. \$ 0. \$	0. \$ 0.

2018

FEDERAL STATEMENTS

JOHNSON HISTORICAL MUSEUM OF THE SOUTHWEST

PAGE 2

95-3277997

STATEMENT 5 FORM 990-PF, PART II, LINE 10B INVESTMENTS - CORPORATE STOCKS

CORPORATE STOCKS	VALUATIONMETHOD	BOOK VALUE	FAIR MARKETVALUE
PUBLICLY TRADED SECURITIES	COST \$\frac{\\$}{\\$}	2,081,097. 2,081,097.	\$ 4,082,737. \$ 4,082,737.

STATEMENT 6 FORM 990-PF, PART II, LINE 15 OTHER ASSETS

			BO	OK VALUE	FA	IR MARKET VALUE
ANTIQUES HEIRLOOMS AUTOS BUILDINGS EQUIPMENT LIVESTOCK MAJOR OUTSIDE PROJECTS PHOTO RESTORATION		 TOTAL	\$	27,084. 73,657. 525,717. 135,646. 3,673. 17,429. 5,630. 788,836.	\$	27,084. 73,657. 525,717. 135,646. 3,673. 17,429. 5,630. 788,836.