Form \$990-PF

EXTENDED TO AUGUST 17, 2020

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. | 9 09

Name of foundation			A Employer identification	number
TRACY AND GREG JOHNSON FOU	JNDATION, INC.		83-2639526	
Number and street (or P O box number if mail is not delivered to stree	t address)	Room/suite	B Telephone number	<u>. </u>
176 SUNSET AVENUE			650-312-39	44
City or town, state or province, country, and ZIP or foreign	postal code		C If exemption application is p	ending, check here
PALM BEACH, FL 33480 G Check all that apply X Initial return	Instal return of a fe	ermar public about.	- Corolan aranayan	a abadi bara
Final return	Amended return	ormer public charity	D 1. Foreign organization	s, check here
Address change	Name change		Foreign organizations me check here and attach co	eeting the 85% test,
H Check type of organization X Section 501(c)(3)	exempt private foundation	OLL	E If private foundation sta	itus was terminated
Section 4947(a)(1) nonexempt charitable trust	Other taxable private founda	tion UT	under section 507(b)(1	
I Fair market value of all assets at end of year J Account	<u> </u>	Accrual	F If the foundation is in a	
	Other (specify)		under section 507(b)(1)(B), check here
Part I Analysis of Revenue and Expenses			(a) Advented ant	(d) Disbursements
(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purpose (cash basis only)
1 Contributions, gifts, grants, etc., received	16,223,740.		N/A	
2 Check I I the foundation is not required to attach Sch. 8	-			
3 Interest on savings and temporary cash investments				
4 Dividends and interest from securities				
5a Gross rents			<u></u>	
b Net rental income or (loss) 63 Not grun or (loss) from sale of assets not on line 10			RE	CEIVED
Gross sales price for all			~	79
7 Capital gain net income (from Part IV, line 2)		0.	8 111	1.5 2020
8 Net short-term capital gain				
9 Income modifications Gross sales less returns			061	DEN. UT
10a and allowances				PEN, UT
b Less Cost of goods sold c Gross profit or (loss)				-
11 Other income				
12 Total. Add lines 1 through 11	16,223,740.	0.	<u> </u>	
13 Compensation of officers, directors, trustees, etc	0.	0.		
14 Other employee salaries and wages			ļ	
15 Pension plans, employee benefits	12 005			
\$\frac{1}{2} 16a Legal fees STMT 1	13,985.	0.		
c Other professional fees				
18 Taxes STMT 2	25.	0.		
17 Interest 18 Taxes STMT 2 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings				
20 Occupancy				
22 Printing and publications 23 Other expenses STMT 3	15.	0.		
24 Total operating and administrative expenses. Add lines 13 through 23	13.	<u> </u>	 	-
expenses. Add lines 13 through 23	14,025.	0.		
25 Contributions, gifts, grants paid	759,279.			759,27
26 Total expenses and disbursements				
Add lines 24 and 25	773,304.	<u>0.</u>		759,27
27 Subtract line 26 from line 12	15 450 426		,	
2. Excess of revenue over expenses and disbursements	15,450,436.	0.		
b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-)			N/A	
823501 12-11-18 LHA For Paperwork Reduction Act Note			,, **	Form 990-PF (2

Fo	rm 99	0-PF (2018) TRACY AND GREG JOHNSON			2639526 Page
F	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year		of year
_	<u> </u>	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		226,696.	226,696.
	2	Savings and temporary cash investments		-	
	1	Accounts receivable			
	-	Less allowance for doubtful accounts			· · · · · · · · · · · · · · · · · · ·
	4	Pledges receivable	1 ,		
	*	-	- 		
	١.	Less allowance for doubtful accounts			
	1	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less allowance for doubtful accounts			
s	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ą	1	Investments - U.S. and state government obligations			-
		Investments - corporate stock STMT 4	0.	15,223,740.	15,613,260.
	_			13,223,140.	13,013,200.
		Investments - corporate bonds			
	11	Investments - land buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis 🟲	<u> </u>		
		Less accumulated depreciation			
	15	Other assets (describe ►)			
		Total assets (to be completed by all filers - see the			
	'`	instructions. Also, see page 1, item I)	0.	15,450,436.	15,839,956.
	17	Accounts payable and accrued expenses		13,130,130.	13,033,330.
	18	Grants payable			
es	19	Deferred revenue	<u> </u>		
Ξ	20	Loans from officers, directors, trustees, and other disqualified persons	 		
Liabilities	21	Mortgages and other notes payable			
۲	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26, and lines 30 and 31.	1		
S	24	Unrestricted		15,450,436.	
Š	25	Temporarily restricted			
ᇛ	l	, ,			
8	20	Permanently restricted			
Ē	ł	Foundations that do not follow SFAS 117, check here			
느		and complete lines 27 through 31.	ļ		
8	27	Capital stock, trust principal, or current funds			
se	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
Net Assets or Fund Balanc	29	Retained earnings, accumulated income, endowment, or other funds			
Ě	302	Total net assets or fund balances	0.	15,450,436.	
_		^			
	310	Total liabilities and net assets/fund balances	0.	15,450,436.	
P	art l	Analysis of Changes in Net Assets or Fund B	alances		
		net assets or fund balances at beginning of year - Part II, column (a), line	30		
		agree with end-of-year figure reported on prior year's return)		1	0.
		amount from Part I, line 27a		2	15,450,436.
		increases not included in line 2 (itemize)		3	0.
	Add I	noc 1 2 and 2		I 4	1 15 150 136

15,450,436. Form **990-PF** (2018)

5 Decreases not included in line 2 (itemize)

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

Form 990-PF (2018) TRAC	CY AND GREG JOHN and Losses for Tax on In	SON FOU	UNDATION	, INC.	{	33-263	9526	Page 3
(a) List and describe	the kind(s) of property sold (for exa rehouse, or common stock, 200 shs	mple, real esta		(b) How acquired P - Purchase D - Donation	j (c) Date (mo.,	acquired day, yr.)	(d) Date (mo., da	
1a								
b NO	NE							
<u>C</u>								
<u>d</u>					+			
<u>e</u>	10 D	1.0-				0 (1)		
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			Gain or (loss) us (f) minus (
<u>a</u>		-						
<u>b</u>								
d d								
e								
	g gain in column (h) and owned by	the foundation	on 12/31/69		(I) Gains (Col (h) gain	minus	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		xcess of col. (1) col. (j), if any		col. (k), but	not less than s (from col. (I	1 -0-) or	
<u>a</u>								
b								
<u>c</u>				 -				
_d								
<u>e</u>				_				
2 Capital gain net income or (net ca	pital loss) $\left\{egin{array}{l} ext{If gain, also ente} \ ext{If (loss), enter -0} \end{array} ight.$	r in Part I, line I- in Part I, line	7 2 7	} 2				
3 Net short-term capital gain or (los if gain, also enter in Part I, line 8, if (loss), enter -0- in Part I, line 8		ıd (6)		}				
Part V Qualification U	nder Section 4940(e) for	Reduced	Tax on Net	Investment I	ncome			
(For optional use by domestic private	foundations subject to the section 4	1940(a) tax on	net investment in	come.)			N/A	
If section 4940(d)(2) applies, leave th	·	` ,		,				
Was the foundation liable for the sect If "Yes," the foundation doesn't qualify			•	iod?			Yes	No
1 Enter the appropriate amount in e	ach column for each year, see the ir	structions bef	fore making any er	ntries.				
(a) Base period years Calendar year (or tax year beginnin	(b) Adjusted qualifying dis	tributions	Net value of no	(c) ncharitable-use as	sets	Dıstrıb (col. (b) dıv	(d) ution ratio ided by col. ((c))
2017				-				
2016								
2015								
2014								
2013						T		
O Total of loss of subsect (d)								
2 Total of line 1, column (d) 3 Average distribution ratio for the 5	Sugar has period duude the total	on line 2 by E i	O or hu the gumb	or of woord	2	 		
3 Average distribution ratio for the 5 the foundation has been in existen	•	on tille 2 by 5.0	o, or by the number	er ur years	3			
4 Enter the net value of noncharitable	le-use assets for 2018 from Part X, I	line 5			4			
5 Multiply line 4 by line 3					5			
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)				6			
7 Add lines 5 and 6					7			
8 Enter qualifying distributions from	Part XII, line 4				8_			
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Part VI, line	1b, and comp	olete that part usin	g a 1% tax rate				

Page 3

	irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49		03934		Page 4
		10 - 30		uction	3)
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	, -			1
	Date of ruling or determination letter(attach copy of letter if necessary-see instructions) Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1			-0.
U	of Part I, line 27b				 -
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b) Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	2		·	0.
	Add lines 1 and 2	3			0.
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			0.
	Credits/Payments				
	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 0.	-			
b	Exempt foreign organizations - tax withheld at source 6b 0.		-		1
	Tax paid with application for extension of time to file (Form 8868) 6c 13,000.				
d	Backup withholding erroneously withheld 6d 0.	-			
7	Total credits and payments. Add lines 6a through 6d	7		13,0	00.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			0.
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		13,0	
	Enter the amount of line 10 to be Credited to 2019 estimated tax 13,000 Refunded	11			0.
Pa	rt VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın	\vdash	Yes	No
	any political campaign?		<u> 1a</u>	4	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition of the definitio	tion	<u>16</u>		<u> </u>
	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		-		لپا
	Did the foundation file Form 1120-POL for this year?		10		X
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation \blacktriangleright \$ (2) On foundation managers \blacktriangleright \$ 0 .				1 1
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				1 1
٠	managers. > \$			1	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	-	X
	If "Yes," attach a detailed description of the activities		<u> </u>	1	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			_[
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a	ı	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/Z	A 46		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			ŀ	
	By language in the governing instrument, or			١,	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state in 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	X	
0-	Enter the states to which the foundation reports or with which it is registered. See instructions				
ua	DE		—		1
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 G2 If "No," attach explanation SEE STATEM	ENT !	5 8b		X
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calen	dar			
	year 2018 or the tax year beginning in 2018? See the instructions for Part XIV If "Yes," complete Part XIV		9		X
10	Did any persons become substantial contributors during the tax year? ir 'Yes," attach a schedule listing their names and addresses	TMŢ			
			Form 9	90-PF	(2018)

Pa	nrt VII-A Statements Regarding Activities (continued)			
			Yes	No
М	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		Х
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 ► N/A			
14	The books are in care of ▶ GREG JOHNSON Telephone no. ▶ 650-31	2-3	944	
	Located at ▶176 SUNSET AVENUE, PALM BEACH, FL ZIP+4 ▶33			
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		/A	
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	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 >			
Pa	rt 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?			
	(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? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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			i '
	termination of government service, if terminating within 90 days)	•		
b	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		<u> </u>
	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?	1c		X
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))		1	
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			
	- -			
	If "Yes," list the years \(\)			
D	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.) N/A	2		
	·	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.			
2-	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		l	
Jd	during the year? Yes X No			
j.	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after			
U	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,		Ì	
	Form 4720, to determine if the foundation had excess business holdings in 2018.) N/A	3b		·
42	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	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 2018?	4b		Х

Form 990-PF (2018) TRACY AND GREG JOHNSON FO			83-26395	26	Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be R	equired (contin	ued)	·	
5a During the year, did the foundation pay or incur any amount to:				Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Y	es X No		
 (2) Influence the outcome of any specific public election (see section 4955), o 	r to carry on, directly or indire	ectly,			
any voter registration drive?		Y	es 🗶 No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	7	Y	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
4945(d)(4)(A)? See instructions	Y	es 🗶 No	ľ		
(5) Provide for any purpose other than religious, charitable, scientific, literary,					
the prevention of cruelty to children or animals?		Y	es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	n Regulations	_		
section 53 4945 or in a current notice regarding disaster assistance? See instru	uctions		N/A	5b	<u> </u>
Organizations relying on a current notice regarding disaster assistance, check h	nere				4
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it mainta	ned			
expenditure responsibility for the grant?	N	1/A Y	es No		-[
If "Yes," attach the statement required by Regulations section 53 4945-5(d)					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Y	es 🗶 No 👢	_	
${f b}$ Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		<u></u>	6b	X
If "Yes" to 6b, file Form 8870					•
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Yı	es X No		<u> </u>
b If "Yes," did the foundation receive any proceeds or have any net income attribu	table to the transaction?		N/A	7b	<u> </u>
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	1,000,000 in remuneration or				
excess parachute payment(s) during the year?			es X No		<u></u>
Part VIII Information About Officers, Directors, Truste Paid Employees, and Contractors	es, Foundation Mai	nagers, Highly			
List all officers, directors, trustees, and foundation managers and tr	nour componention				
List all officers, directors, trostees, and foundation managers and tr	(b) Title, and average	(c) Compensation	(d) Contributions to	(a) Evr	ense
(a) Name and address	hours per week devoted	(If not paid,	employee benefit plans and deferred	(e) Exp	, other
GREGORY E. JOHNSON	to position DIRECTOR/CHAI	enter -0-)	compensation	allowa	nces
176 SUNSET AVENUE	DIRECTOR/CHAI	K/SECKEIA	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
PALM BEACH, FL 33480	1.00	0.	0.		0.
	DIRECTOR	· ·	•		.
176 SUNSET AVENUE	DIRECTOR				
PALM BEACH, FL 33480	1.00	0.	0.		0.
	DIRECTOR	0.			
176 SUNSET AVENUE	DIRECTOR				
PALM BEACH, FL 33480	1.00	0.	0.		0.
	DIRECTOR	•	, ·		<u> </u>
176 SUNSET AVENUE					
PALM BEACH, FL 33480	1.00	0.	0.		0.
2 Compensation of five highest-paid employees (other than those incl			<u> </u>		
	(b) Title, and average		(d) Contributions to	(e) Exp	ense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	ačcount allowa	
NONE			COMPONICATION.		
,		1			
	!				-
		<u> </u>			
1					
Total number of other employees paid over \$50,000			•		0
			Form 9	990-PF	(2018)

Form 990-PF (2018) TRACY AND GREG JOHNSON FOUNDATION, INC.	83-263	9526 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Manage Paid Employees, and Contractors (continued)	ers, Highly	
3. Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000	b) Type of service	(c) Compensation
NONE	-	
		+
7	<u>_</u>	<u> </u>
Total number of others receiving over \$50,000 for professional services Part X-A Summary of Direct Charitable Activities	<u>.</u>	<u> </u>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information:	auch as the	
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	ouch as the	Expenses
1 N/A		
·		
2		
3		
		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1 N/A		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3	•	0.
Team - no miles - Milesgi e		orm 990-PF (2018)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndation	s, 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	15,443,091. 573,209.
b	Average of monthly cash balances	1b	573,209.
C	Fair market value of all other assets	1c	
đ	Total (add lines 1a, b, and c)	1d	16,016,300.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0	اــــــــــــــــــــــــــــــــــــــ	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	16,016,300.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	240,245.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	15,776,055.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	680,753.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a	nd certai	n
_	foreign organizations, check here and do not complete this part.)	1 . 1	680,753.
1	Minimum investment return from Part X, line 6	\vdash	080,733.
2 a	Tax on investment income for 2018 from Part VI, line 5	-	
Ь	Income tax for 2018. (This does not include the tax from Part VI.)	- -	^
C	Add lines 2a and 2b	2c	<u> </u>
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	680,753.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	680,753.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7_</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	680,753.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	759,279. 0.
b	Program-related investments - total from Part IX-B	1b	0.
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:		
а	Suitability test (prior IRS approval required)	3a	
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	759,279.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	759,279.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies	for the section

Form **990-PF** (2018)

4940(e) reduction of tax in those years.

Page 9

Part XIII Undistributed Income (see instructions) (a) (b) (c) (d) Years prior to 2017 Corpus 2017 2018 1 Distributable amount for 2018 from Part XI, 680,753. line 7 2 Undistributed income, if any, as of the end of 2018 0. a Enter amount for 2017 only **b** Total for prior years 0. 3 Excess distributions carryover, if any, to 2018 a From 2013 **b** From 2014 c From 2015 d From 2016 e From 2017 0 f Total of lines 3a through e 4 Qualifying distributions for 2018 from Part XII, line 4 ►\$___ 759,279. a Applied to 2017, but not more than line 2a 0 b Applied to undistributed income of prior years (Election required - see instructions) 0. c Treated as distributions out of corpus 0. (Election required - see instructions) 680,753 d Applied to 2018 distributable amount 78,526. e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2018 0. 0. (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 indicated below: 78,526 a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract 0. 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 0. d Subtract line 6c from line 6b. Taxable 0. amount - see instructions e Undistributed income for 2017. Subtract line 0 4a from line 2a Taxable amount - see instr 1 Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must 0. be distributed in 2019 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election 0 may be required - see instructions) 8 Excess distributions carryover from 2013 0. not applied on line 5 or line 7 9 Excess distributions carryover to 2019. 78,526. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2014 b Excess from 2015 c Excess from 2016 d Excess from 2017

e Excess from 2018

78,526.

		NSON FOUNDAT			39526 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part VII-	A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter that	it is a private operating			,
 foundation, and the ruling is effective fo 	r 2018, enter ati e date of t	he ruling	▶		
b Check box to indicate whether the found		g foundation described in		4942(j)(3) or 4	942(1)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	1	
income from Part I or the minimum	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
investment return from Part X for					
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			\ /		
e Qualifying distributions made directly			\checkmark		
for active conduct of exempt activities.			\wedge		
Subtract line 2d from line 2c		/			
3 Complete 3a, b, or c for the]
alternative test relied upon a "Assets" alternative test - enter					
(1) Value of all assets				İ	1
(2) Value of assets qualifying			•		
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter		P			
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					
Part XV Supplementary Info	rmation (Complet	te this part only if	the foundation	had \$5,000 or mo	re in assets
at any time during th	he year-see instru	uctions.)			`
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation who	o have contributed more t	han 2% of the total contri	butions received by the	foundation before the clos	e of any tax
year (but only if they have contributed m	iore than \$5,000). (See se	ection 507(d)(2).)			
NONE					
b List any managers of the foundation who	o own 10% or more of the	e stock of a corporation (c	r an equally large portion	on of the ownership of a pa	rtnership or
other entity) of which the foundation has	s a 10% or greater interes	t.			
NONE					
2 Information Regarding Contribution	on, Grant, Gift, Loan,	Scholarship, etc., Pro	grams [.]		
Check here 🕨 🗶 if the foundation o	nly makes contributions t	o preselected charitable o	rganizations and does r	ot accept unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc,	to individuals or organiza	tions under other condition	ns, complete items 2a,	b, c, and d.	
a The name, address, and telephone numb	er or email address of the	e person to whom applica	tions should be address	sed.	- :
		- <u>-</u>			
b The form in which applications should be	e submitted and informati	ion and materials they sho	ould include:		
c Any submission deadlines					
d Any restrictions or limitations on awards	s, such as by geographical	l areas, charitable fields. k	inds of institutions, or i	other factors	
,	. , , , , , , , , , , , , , , , , , , ,				

3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Recipient Name and address (home or business) All stars Helping kids inc. 4675 Stevens Creek BLVD, Ste 125 SANTA CLARA CITY, CA 95051 UNITED STATES OLYMPIC & PARALYMPIC FOUNDATION 1 OLYMPIC PLAZA COLORADO SPRINGS, CO 80909	Amount 10,000.
Show any relationship to any foundation manager or substantial contributor a Paid during the year ALL STARS HELPING KIDS INC. 4675 STEVENS CREEK BLVD, STE 125 SANTA CLARA CITY, CA 95051 UNITED STATES OLYMPIC & PARALYMPIC FOUNDATION 1 OLYMPIC PLAZA	
Name and address (home or business) any foundation manager or substantial contributor a Paid during the year ALL STARS HELPING KIDS INC. 4675 STEVENS CREEK BLVD, STE 125 SANTA CLARA CITY, CA 95051 UNITED STATES OLYMPIC & PARALYMPIC FOUNDATION 1 OLYMPIC PLAZA	
ALL STARS HELPING KIDS INC. 4675 STEVENS CREEK BLVD, STE 125 SANTA CLARA CITY, CA 95051 UNITED STATES OLYMPIC & PARALYMPIC FOUNDATION 1 OLYMPIC PLAZA	10,000.
4675 STEVENS CREEK BLVD, STE 125 SANTA CLARA CITY , CA 95051 UNITED STATES OLYMPIC & PARALYMPIC FOUNDATION 1 OLYMPIC PLAZA	10,000.
4675 STEVENS CREEK BLVD, STE 125 SANTA CLARA CITY , CA 95051 UNITED STATES OLYMPIC & PARALYMPIC FOUNDATION 1 OLYMPIC PLAZA	10,000.
4675 STEVENS CREEK BLVD, STE 125 SANTA CLARA CITY , CA 95051 UNITED STATES OLYMPIC & PARALYMPIC FOUNDATION 1 OLYMPIC PLAZA	10,000.
UNITED STATES OLYMPIC & PARALYMPIC FOUNDATION 1 OLYMPIC PLAZA SANTA CLARA CITY , CA 95051 501(C)(3) GENERAL SUPPORT	10,000.
UNITED STATES OLYMPIC & PARALYMPIC 501(C)(3) GENERAL SUPPORT FOUNDATION 1 OLYMPIC PLAZA	·
FOUNDATION 1 OLYMPIC PLAZA	
FOUNDATION 1 OLYMPIC PLAZA	
COLORADO SPRINGS, CO 80909	
	75,000.
LOS ANGELES FIRE DEPARTMENT 501(C)(3) GENERAL SUPPORT	
SCHOLARSHIP	
PO BOX 222 PEBBLE BEACH, CA 93953	10,000.
Table Baren, Ch 9999	10,000.
CARMEL IDEAS FOUNDATION 501(C)(3) GENERAL SUPPORT	
PO BOX 509	
PEBBLE BEACH, CA 93953	5,000.
WASHINGTON AND LEE UNIVERSITY 501(C)(3) GENERAL SUPPORT	
OFFICE OF DEVELOPMENT LEXINGTON, VA 24450	272,930.
Total SEE CONTINUATION SHEET(S) ▶ 3a	759,279.
b Approved for future payment	
NONE	
	· · · · · · · · · · · · · · · · · · ·
Total ▶ 3b	

TRACY AND GREG JOHNSON FOUNDATION, INC. 83-2639526

3 Grants and Contributions Paid During the	Year (Continuation)		·	
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
reach for america inc.		501(C)(3)	GENERAL SUPPORT	
25 BROADWAY, 12TH FLOOR				
NEW YORK, NY 10004				25,00
SAN FRANCISCO SYMPHONY		501(C)(3)	GENERAL SUPPORT	
201 VAN NESS AVE				
SAN FRANCISCO, CA 94102		<u> </u>		125,00
JUMPSTART FOR YOUNG CHILDREN INC.		501(C)(3)	GENERAL SUPPORT	
308 CONGREE ST				
BOSTON, MA 02210				200,00
SUN VALLEY CENTER FOR THE ARTS INC.		501(C)(3)	GENERAL SUPPORT	
PO BOX 656				10.3
SUN VALLEY , ID 83353				10,34
SAN FRANCISCO FIRST TEE		501(C)(3)	GENERAL SUPPORT	
99 HARDING ROAD				
SAN FRANCISCO, CA 94132				25,00
MICHAEL HARRIS FOUNDATION		501(C)(3)	GENERAL SUPPORT	
3135 FRANKLIN ST				
SAN FRANCISCO, CA 94132				1,00
·				
Total from continuation sheets		<u> </u>		386,34

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated	Unrelate	ed business income	Exclu	ided by section 512, 513, or 514	(e)
Enter gross amounts unioss otherwise indicated	(a) Business	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue	Business code	Amount	sion	Amount	function income
-					·
b	~				
c	·	···········			
· · · · · · · · · · · · · · · · · · ·					
f		 			
·					
g Fees and contracts from government agencies 2 Membership dues and assessments					
3 Interest on savings and temporary cash					
Investments 4 Dividends and interest from convinting					
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate.					
a Debt-financed property			 		
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					·
b					
C		 -			
d					,
e		- 			
12 Subtotal Add columns (b), (d), and (e)		0.		0.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	0.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to	the Acco	mplishment of Exe	mpt	Purposes	
		·			
Line No. Explain below how each activity for which incom			contrit	outed importantly to the accom	plishment of
▼ the foundation's exempt purposes (other than by	providing fur	nds for such purposes).			
		·			
					

				ON FOUNDATION			2639526	Page 1
Part :			nsters to a	nd Transactions ar	nd Relations	hips With Non	charitable	
1 Die	Exempt Organ		v of the follows	ag with any other pressization	on decembed in sec	ation E01(a)	r	Yes No
	I the organization directly or inc					3000 50 1(C)		163 14
	her than section 501(c)(3) orga insfers from the reporting found	•		= =				i
	Cash	Dation to a nuncham	table exempt of	yanızatıdı di			12/1	- x
, ,	Other assets						1a(1)	X
							1a(2)	^
	ner transactions	able evenut organia	intion				45/43	X
	Sales of assets to a noncharit						1b(1)	X
	Purchases of assets from a no	•	Organization				1b(2)	X
, ,	Rental of facilities, equipment	-					1b(3)	X
	Reimbursement arrangements Loans or loan guarantees	•					1b(4) 1b(5)	X
	Performance of services or m	ambarchin or fundr	aleina eolieitatio	ine			1b(6)	X
٠,,	aring of facilities, equipment, m	•	-				1c	X
	he answer to any of the above is				wave chow the fair	market value of the		
	services given by the reporting							sto,
	umn (d) the value of the goods,			ed 1635 tilali ilali illaliket valu	ic in any nansacho	in or snaring arrange	andry snow m	
(a) Line n	T			e exempt organization	(d) Descripti	on of transfers, transacti	ons, and sharing arra	ngements
1-7	(0)	(6)	N/A		(4)			
			11,11					
		<u> </u>			<u> </u>			
								•
								
	· · · · · · · · · · · · · · · · · · ·	*		···				
		†	•					
		<u> </u>						
		†						
		-	·					
ın s	the foundation directly or indirect section 501(c) (other than section Yes," complete the following sct	on 501(c)(3)) or in s	•	or more tax-exempt organi	zations described		Yes	X No
	(a) Name of or	ganization		(b) Type of organization		(c) Description of	elationship	
	N/A							
							·	
Sign Here	Under penalties of perjury, I declare and belief, it is true, correct, and co				PRESI	has any knowledge	May the IRS direturn with the shown below? X Yes	preparer
	Signature of office or truste	e 	Tä .	Date	Title	Lobaria Control	L DTIN	
.		ame		wer	Date	Check if self- employed	PTIN	
Paid	TAMARA L.	MCINERNE	<u> TAMARA </u>	L. MCINERN	06/15/20		P00011	<u> 197 </u>

Form **990-PF** (2018)

Firm's EIN ► 81-4234542

Phone no 650-855-6800

Preparer

Use Only

Firm's name ► BPM LLP

Firm's address ▶ 4200 BOHANNON DRIVE, SUITE 250 MENLO PARK, CA 94025-1021

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

Name of the organization Employer identification number TRACY AND GREG JOHNSON FOUNDATION, INC. 83-2639526 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 private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file 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 Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization

Employer identification number

TRACY A	ND GREG	JOHNSON	FOUNDATION,	INC.
---------	---------	---------	-------------	------

TRACY	AND GREG JOHNSON FOUNDATION, INC.	83	<u>-2639526</u>
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	al space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	THE CHARLES AND ANN JOHNSON FAMILY TRUST 176 SUNSET AVE PALM BEACH, FL 33480	\$ <u>16,223,740.</u>	Person X Payroll X Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occash If for noncash contributions)

Name of organization

Employer identification number

TRACY AND CREC TOHNSON FOUNDATION INC.

83-2639526

TRACI	AND GREG JOHNSON FOUNDATION, INC.		2039320
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
1	PUBLICLY TRADED STOCKS	_	
			12/26/18
(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
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	

Namte of or	ganization			Employer identification number				
racy	AND GREG JOHNSON FOUNDA	TION, INC.		83-2639526				
Part III	Exclusively religious, charitable, etc., contributi	ons to organizations described in						
	from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, or	charitable, etc., contributions of \$1,000	or less for the year (Enter this	info once) ► \$				
(a) No.	Use duplicate copies of Part III if additional	space is needed	- 					
from	(b) Purpose of gift	(c) Use of gift	(d)	Description of how gift is held				
Part I		. -						
ł								
1		 						
1		(e) Transfer of g	pft					
	Transferee's name, address, ar	nd 7IP + 4	Relationship (of transferor to transferee				
	Transferee 3 hame, dudress, ar		neidilonising (Transferor to transferoe				
(a) No.	1							
from Part I	(b) Purpose of gift	(c) Use of gift	(d)	Description of how gift is held				
]					
	Astronom de 19							
	(e) Transfer of gift							
L	Transferee's name, address, an	nd ZIP + 4	Relationship o	of transferor to transferee				
	-							
	-							
(a) No. from	411		(4)	D				
Part I	(b) Purpose of gift	(c) Use of gift	(0)	Description of how gift is held				
								
ł		-						
	(e) Transfer of grit							
-	Transferee's name, address, an	Relationship o	f transferor to transferee					
1								
(=\ \\ \)								
(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			f transferor to transferee				
				····				

FORM 990-PF	LEGAL	FEES	S	TATEMENT 1
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	ADJUSTED	
LEGAL	13,985.	0.		0.
TO FM 990-PF, PG 1, LN 16A	13,985.	0.		0.
FORM 990-PF	TAX	ES	S	TATEMENT 2
DESCRIPTION		(B) NET INVEST- MENT INCOME		CHARITABLE
TAXES	25.	0.		0.
TO FORM 990-PF, PG 1, LN 18	25.	0.		0.
FORM 990-PF	OTHER E	XPENSES	S	TATEMENT 3
DESCRIPTION		(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
BANK FEE	15.	0.		0.
TO FORM 990-PF, PG 1, LN 23	15.	0.		0.

FORM 990-PF CORPORATE STOCK		STATEMENT 4
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
FRANKLIN RESOURCES, INC. (BEN)	15,223,740.	15,613,260.
TOTAL TO FORM 990-PF, PART II, LINE 10B	15,223,740.	15,613,260.

ጥጽልሮፕ	AND	GREG	TOHNSON	FOUNDATION.	TNC.
TIVACT	TILL	CALG	OCHIOCH	LOOMDWITON.	TIME

83-2639526

FORM 990-PF EXPLANATION CONCERNING PART VII-A, LINE 8B

STATEMENT 5

EXPLANATION

ATTORNEY GENERAL OF DELAWARE DOES NOT REQUIRE A COPY OF 990-PF.

FORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10

STATEMENT 6

NAME OF CONTRIBUTOR

ADDRESS

THE CHARLES AND ANN JOHNSON FAMILY 176 SUNSET AVE

PALM BEACH, FL 33480