Form 990-PF

Department of the Treasury

Internal Revenue Service

DLN: 93491059002102

2021

OMB No. 1545-0047

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.
 Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

For	caler	ndar year 2021, or tax year	beginning 01-01-20)21 , aı	nd er	nding 12-31-	2021	
		Indation NICE DAVIS JOHNSTON FAMILY				A Employer id	entification numbe	er
	UNDAT					45-3853337		
		l street (or P.O. box number if mail is no DBERRY ROAD	ot delivered to street address)	Room/suite		B Telephone nu	ımber (see instructio	ns)
J	3 WOOL	DBERRY ROAD				(501) 225-411!	5	
		i, state or province, country, and ZIP or K, AR 72212	foreign postal code	•		C If exemption	application is pendir	ng, check here
G C	neck al	l that apply: 🔲 Initial return	☐ Initial return of a	former public charity		D 1. Foreign or	ganizations, check h	ere
		☐ Final return	Amended return				rganizations meeting	
		Address chan	ge 🔲 Name change				k here and attach co	•
H C	neck ty	pe of organization: 🗹 Section 5	501(c)(3) exempt private	foundation			undation status was ın 507(b)(1)(A), che	
	Section	1 4947(a)(1) nonexempt charitable	e trust 🔲 Other taxabl	e private foundation				
		ket value of all assets at end	J Accounting method:	☑ Cash ☐ Accru	ıal	F If the found	ation is in a 60-mont	th termination
		rom Part II, col. (c), ▶\$ 2,467,008	Other (specify) (Part I, column (d) must	be on cash basis.)		under section	n 507(b)(1)(B), che	ck nere
Pa	rt I	Analysis of Revenue and	Expenses (The total	(a) Revenue and				(d) Disbursements
		of amounts in columns (b), (c), and (equal the amounts in column (a) (see		(a) Revenue and expenses per books	(b)	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., schedule)	received (attach	186,000				
	2	Check ► ☐ if the foundation is a Sch. B	not required to attach					
	3	Interest on savings and tempora	ry cash investments	5	5	5		
	4	Dividends and interest from secu	rities	45,352	2	45,352		
ne	5a	Gross rents						
	ь	Net rental income or (loss)						
	6a	Net gain or (loss) from sale of as	sets not on line 10	113,687	<u>'</u>			
Revenue	b	Gross sales price for all assets or	n li <mark>ne 6a</mark> 122,654					
Re	7	Capital gain net income (from Pa				113,687	1	
	8	Net short-term capital gain .						
	9	Income modifications						
	10a	Gross sales less returns and allow	wances					
	ь	Less: Cost of goods sold						
	C	Gross profit or (loss) (attach sch	edule)					
	11	Other income (attach schedule)						
	12			345,044		159,044		
ses	13	Compensation of officers, directo	,	C	<u> </u>	0		1
ens	14	Other employee salaries and wag						
d X	15	Pension plans, employee benefits						
Je [16a	Legal fees (attach schedule) .		2 700	<u> </u>	1 250		4.25
Operating and Administrative Expenses	b	Accounting fees (attach schedule	•	2,700	<u>' </u>	1,350		1,35
ist	_ c	Other professional fees (attach s	cnedule)					
Ē	17	Interest		1,246	-	310		
AG	18	Taxes (attach schedule) (see inst	,	1,240	<u> </u>	310		<u> </u>
D L	19	Depreciation (attach schedule) a	•		<u> </u>			
G	20 21	Occupancy			<u> </u>			
₹.	22	Printing and publications			-			
era	23	Other expenses (attach schedule		2,985	;	0		2,98
o	24	Total operating and administr	,		 			_,,,,
		Add lines 13 through 23	· · · · · · · · · · · · · · · · · · ·	6,931		1,660		4,33
	25	Contributions, gifts, grants paid		88,200	_	<u>, , , , , , , , , , , , , , , , , , , </u>		88,20
	26	Total expenses and disbursen	nents. Add lines 24 and					
		25		95,131	_	1,660		92,53
	27	Subtract line 26 from line 12:						
	a	Excess of revenue over expendisbursements	ises and	249,913	3			
	ь	Net investment income (if neg	ative, enter -0-)			157,384		
	c	Adjusted net income (if negati	ve, enter -0-)					
E ~ =	Danc	work Doduction Act Notice co.	instructions				, -	000 DE (222

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	2	Savings and temporary cash investments	1,742,293	1,799,326	2,212,293
	3	Accounts receivable			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less: allowance for doubtful accounts ▶			
2	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	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) ▶			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers—see the			
		instructions. Also, see page 1, item I)	1,803,725	2,054,041	2,467,008
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ies	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
jab	21	Mortgages and other notes payable (attach schedule)			
-	22	Other liabilities (describe)			
	23	Total liabilities(add lines 17 through 22)	0	0	
Š		Foundations that follow FASB ASC 958, check here ▶			
)ce		and complete lines 24, 25, 29 and 30.			

0

2,054,041

2,054,041

2.054.041

1,803,725

2,054,041

2,054,041 Form **990-PF** (2021)

0

249,913

1

2

3

4

5

6

1,803,725

1,803,725

1,803,725

	1/
_	18
jes	18 19
Liabilities	20
jat	21
_	22
	23
s or Fund Balances	24 25
S	26
set	27
Net Assets	28
Vet	29
~	30

30

Part III

2

3

5

Net assets without donor restrictions . Net assets with donor restrictions .

and complete lines 26 through 30.

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

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3

Decreases not included in line 2 (itemize) ▶

Capital stock, trust principal, or current funds . .

Total net assets or fund balances at beginning of year—Part

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

Total net assets or fund balances (see instructions) . .

Foundations that do not follow FASB ASC 958, check here 🕨 🗹

Retained earnings, accumulated income, endowment, or other funds

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

Analysis of Changes in Net Assets or Fund Balances

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

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	kind(s) of property sold (e.g., real exse; or common stock, 200 shs. MLC	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)		
1a See Additional Data Table						
b						
c						
d						
e						
(e) Gross sales price	(e) (f) Depreciation allowed Cost of				(h) n or (loss) s (f) minus (g)	
a See Additional Data Table						
b						
С						
d						
e						
Complete only for assets showi	ing gain in column (h) and owned by	the foundation (on 12/31/69	(1)	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) of col. (i) . (j), if any	col. (k), but not	Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))	
a See Additional Data Table						
b						
С						
d						
e					<u> </u>	
2 Capital gain net income or (ne3 Net short-term capital gain or		n, also enter in Pass), enter -0- in Pass)) and (6):		2	113,687	
If gain, also enter in Part I, lir in Part I, line 8	ne 8, column (c) (see instructions). I	}	3			

а	2021 estimated tax payments and 2020 overpayment credited to 2021 6a 700					
b	Exempt foreign organizations—tax withheld at source 6b 0					
С	Tax paid with application for extension of time to file (Form 8868) 6c 0					
d	Backup withholding erroneously withheld 6d 0					
7	Total credits and payments. Add lines 6a through 6d	7				700
8	Enter any penalty for underpayment of estimated tax. Check here \Box if Form 2220 is attached.	8				3
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			1	L,491
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 2022 estimated tax ▶ Refunded ▶	11				
Pa	rt VI-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did				Yes	No
	it participate or intervene in any political campaign?		. [1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instruct	ions				
	for the definition		.	1 b		No
	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.					
С	Did the foundation file Form 1120-POL for this year?		ļ	1 c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. \triangleright \$0 (2) On foundation managers. \triangleright \$0					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed					
	on foundation managers. • \$0					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		. [2		No
	If "Yes," attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles					
	of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i> .		. [3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		.	4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?		.	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		·	5		No
	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	• 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	Yes	
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 XIV.		•	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	AR					
ь	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 .			8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section $4942(j)(3)$		ļ			
	or 4942(j)(5) for calendar year 2021 or the taxable year beginning in 2021? See the instructions for Part XIII.					
	If "Yes," complete Part XIII		.	9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their nat	nes	Ī			
	and addresses.		. [10		No

No

No

4b

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No

	Website address ►N/A					
14	The books are in care of ▶JANICE JOHNSTON	Telephone no. ▶(501) 225-411				
	Located at ►33 WOODBERRY RD LITTLE ROCK AR	ZIP+4 ▶72212				
15	Section 4047(s)(1) papayampt charitable trusts filing Form 000 PE in liqu of Form 1041	shock hara				

Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here. and enter the amount of tax-exempt interest received or accrued during the year

16

16 At any time during calendar year 2021, did the foundation have an interest in or a signature or other authority over See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign

Yes country > File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

1a(1) (1) Engage in the sale or exchange, or leasing of property with a disqualified person?

Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required Yes No **1a** During the year did the foundation (either directly or indirectly): No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) 1a(2)

(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?. 1a(3) 1a(4) (5) Transfer any income or assets to a disqualified person (or make any of either available

No No No 1a(5) No (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.). 1a(6) No 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

c Organizations relying on a current notice regarding disaster assistance check here. d Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, **1**d No

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): a At the end of tax year 2021, did the foundation have any undistributed income (Part XII, lines 6d 2a No

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) 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.

Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at No

3a b If "Yes," did it have excess business holdings in 2021 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved

by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine 3b 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? No

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 2021?.

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Pa	rt VI-B Statements Regard	ding	Activities for Which	Form 4720 May Be	Required (continued)			
5a	During the year did the foundation	рау о	r incur any amount to:				Yes	No
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?							No
	(2) Influence the outcome of any specific public election (see section 4955); or to carry							
	on, directly or indirectly, any voter registration drive?........................							No
	(3) Provide a grant to an individual for travel, study, or other similar purposes?							No
	(4) Provide a grant to an organizat	ion ot	her than a charitable, etc	, organization described	d			
	in section 4945(d)(4)(A)? See instructions							
	(5) Provide for any purpose other t							
_	educational purposes, or for the	•	·			5a(5)		No
b	If any answer is "Yes" to 5a(1)–(5)		•		· ·			
	Regulations section 53.4945 or in a					5b		
C	Organizations relying on a current i							
a	If the answer is "Yes" to question 5			•				
	tax because it maintained expendit					5d		
_	If "Yes," attach the statement requ			* *				
6a	Did the foundation, during the year	-						
	a personal benefit contract?					6a		No
b	Did the foundation, during the year	, pay	premiums, directly or ind	irectly, on a personal be	enerit contract?	6b		No
7a	If "Yes" to 6b, file Form 8870. At any time during the tax year, was	s tha	foundation a party to a r	robibited tay chalter tra	ncaction?	7a		No
	If "Yes", did the foundation receive					7a 7b		140
8	Is the foundation subject to the sec		•			10		
Ü	excess parachute payment during t		1 / ()			. 8		No
					anagers, Highly Paid Emp			
	and Contractors			•		, , , , , , , , , , , , , , , , , , ,		
1	List all officers, directors, truste		bundation managers ar b) Title, and average	(c) Compensation	1			
	(a) Name and address	`	hours per week	not paid, enter	employee benefit plans and	(e) Expen other al		
		<u> </u>	devoted to position	-0-)	deferred compensation	other ar	lowanc	
See	Additional Data Table	4						
		1						
		4						
		-						
		4						
		<u> </u>						
		4						
	Comments of fine high set	<u> </u>			1		NONE	11
	Compensation of five highest-pa	ila en	npioyees (otner than ti	nose included on line :		e, enter	NONE.	•
(a)	Name and address of each employee	paid	(b) Title, and average	() ((d) Contributions to employee benefit (e) Expens	se acco	ount,
` ′	more than \$50,000	•	hours per week devoted to position	(c) Compensation	plans and deferred	other all		
	_		devoted to position		compensation			
NON	<u>E</u>							
Total	I number of other employees well as	or to	0.000					
TOTA	I number of other employees paid ov	er \$5	0,000		•			(

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Part VII Information About Officers, Directors, Trustees, I and Contractors (continued)	Foundation Managers, Highly Pa	id Employees,
3 Five highest-paid independent contractors for professional service	es (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		0
Part VIII-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rele- organizations and other beneficiaries served, conferences convened, research papers produc		of Expenses
1		
2		-
3		
4		
Part VIII-B Summary of Program-Related Investments (see in	nstructions)	
Describe the two largest program-related investments made by the foundation during the	e tax year on lines 1 and 2.	Amount
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		0
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2a

2b

2.188

2c

3

4

5

6

7

1a

1b

2

3a

3h

4

111.055

2.188

108.867

108.867

108,867

92,535

92.535

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Distributable amount before adjustments. Subtract line 2c from line 1.

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

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

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

Tax on investment income for 2021 from Part V, line 5.

Income tax for 2021. (This does not include the tax from Part V.). . .

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

1

2a

3

4

5

6

1

2

3

Part XI

required—see instructions).

d Applied to 2021 distributable amount. . . e Remaining amount distributed out of corpus

5 Excess distributions carryover applied to 2021.

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 **b** Prior years' undistributed income. Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. **d** Subtract line 6c from line 6b. Taxable amount -see instructions e Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount-see instructions f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2022

same amount must be shown in column (a).)

(If an amount appears in column (d), the

6 Enter the net total of each column as

7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2016 not applied on line 5 or line 7 (see instructions) . . . Excess distributions carryover to 2022. Subtract lines 7 and 8 from line 6a

10 Analysis of line 9: a Excess from 2017. **b** Excess from 2018. c Excess from 2019. . d Excess from 2020. e Excess from 2021. .

indicated below:

92,535

5,210

11,122

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_	_	•	_		1	_	_	_
t	5	7	ī	7			Π	

Undistributed Income (see instructions)	
` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	

	(
		(a) Corpus	(b) Years prior to 2020	(c) 2020	(d) 2021
1	Distributable amount for 2021 from Part X, line 7				108,86
2	Undistributed income, if any, as of the end of 2021:				
а	Enter amount for 2020 only			0	
b	Total for prior years: 20 , 20 , 20 ,		0		
3	Excess distributions carryover, if any, to 2021:				
а	From 2016				
b	From 2017				
С	From 2018				
d	From 2019				
е	From 2020				
f	Total of lines 3a through e	5,210			
4	Qualifying distributions for 2021 from Part				
	XI, line 4: ► \$				
а	Applied to 2020, but not more than line 2a			0	
b	Applied to undistributed income of prior years (Election required—see instructions)		0		
С	Treated as distributions out of corpus (Election	0		The state of the s	

5,210

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

factors:

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3 Grants and Contributions Paid D		d for Future	Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	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 See Additional Data Table	or substantial contributor	Геарен		
Total			▶ 3a	88,200

Total	<u> </u>	 ▶ 3a	88,200
Approved for future payment			
Total		 ▶ 3b	0 Form 990-PF (2021)
			Form 990-PF (2021)

nter gross ar	mounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
_	ervice revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions.)
	d contracts from government agencies					
	nip dues and assessments					
investmen	nts			14	5	
	and interest from securities			14	45,352	
	income or (loss) from real estate:					
	t-financed property					
6 Net rental	income or (loss) from personal property					
	estment income			14		
inventory	oss) from sales of assets other than			18	113,687	
9 Net incom	e or (loss) from special events:			10	113,007	
	fit or (loss) from sales of inventory					
1 Other rev	enue: a					
D						
с						
c						
c d e 2 Subtotal.			0		159,044	
c d e 2 Subtotal. 3 Total. Add	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e)		0	13	159,044	
c d e 2 Subtotal. 3 Total. Add	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calcu	lations.)			<u> </u>	
c d e 2 Subtotal. 3 Total. Add (See work: Part XV-B	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calcu	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XV-A contribute	Bed importantly to	
c d e 2 Subtotal. 3 Total. Add (See work: Part XV-B	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XV-A contribute	Bed importantly to	
c d e 2 Subtotal. 3 Total. Add (See work: Part XV-B	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XV-A contribute	Bed importantly to	
c d e 2 Subtotal. 3 Total. Add (See work: Part XV-B	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XV-A contribute	Bed importantly to	
c d e 2 Subtotal. 3 Total. Add (See work: Part XV-B	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XV-A contribute	Bed importantly to	
c d e 2 Subtotal. 3 Total. Add (See work: Part XV-B	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XV-A contribute	Bed importantly to	
c d e 2 Subtotal. 3 Total. Add (See work: Part XV-B	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XV-A contribute	Bed importantly to	
c d e 2 Subtotal. 3 Total. Add (See work: Part XV-B	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XV-A contribute	Bed importantly to	
c d e 2 Subtotal. 3 Total. Add (See work: Part XV-B	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XV-A contribute	Bed importantly to	
c d e 2 Subtotal. 3 Total. Add (See work: Part XV-B	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XV-A contribute	Bed importantly to	
c d e 2 Subtotal. 3 Total. Add (See work: Part XV-B	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XV-A contribute	Bed importantly to	
c d e 2 Subtotal. 3 Total. Add (See work: Part XV-B	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XV-A contribute	Bed importantly to	
c d e 2 Subtotal. 3 Total. Add (See work: Part XV-B	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XV-A contribute	Bed importantly to	
c d e 2 Subtotal. 3 Total. Add (See work: Part XV-B	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XV-A contribute	Bed importantly to	
c d e 2 Subtotal. 3 Total. Add (See work: Part XV-B	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XV-A contribute	Bed importantly to	
c d e 2 Subtotal. 3 Total. Add (See work: Part XV-B	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XV-A contribute	Bed importantly to	
c de Subtotal. Total. Add (See work: Part XV-B	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XV-A contribute	Bed importantly to	
c d e 2 Subtotal. 3 Total. Add (See work: Part XV-B	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XV-A contribute	Bed importantly to	
c d e 2 Subtotal. 3 Total. Add (See work: Part XV-B	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XV-A contribute	Bed importantly to	
c d e 2 Subtotal. 3 Total. Add (See work: Part XV-B	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes f Part XV-A contribute	Bed importantly to	159,044

Information Regarding Transfers To and Transactions and Relationships With Noncharitable

Par	t XVI	Exempt Organi	zations										
		ganization directly or in than section 501(c)(3)	directly enga							on 501		Yes	No
a Tra	nsfers	from the reporting foun	dation to a n	oncha	ritable exe	empt organizatio	on of	f:					
(1)	Cash									. [:	La(1)		No
(2)) Othe	r assets								. [La(2)		No
b Oth	ner trar	nsactions:											
		s of assets to a nonchari	•	_						—	lb(1)		No
		hases of assets from a n									Lb(2)		No
		al of facilities, equipmer	*								Lb(3)		No
		bursement arrangemen								-	Lb(4)		No
		s or loan guarantees.									lb(5)		No
٠.		rmance of services or m	•		-						lb(6) 1c		No No
	-	f facilities, equipment, n wer to any of the above											NO
of t	he god	ds, other assets, or ser	vices given b	y the	reporting f	foundation. If th	ne fo	oundation receive	d less than fair marl	ket value	iiue		
in a	any tra	nsaction or sharing arra	ngement, sh	ow in	column (d) the value of t	he g	goods, other asse	ts, or services receiv	ved.			
(a) Line	e No. I	(b) Amount involved	(c) Name of	noncha	aritable exer	npt organization	ı	(d) Description of	transfers, transactions,	and sharii	na arrai	naemen:	ts
(-,		(2)	(-)					(u) - company					
	_												
	-												
3- T- I						J. L							
		ndation directly or indire in section 501(c) (other								. .	No		
				1 301((3)) 01 11	ii section 527?				=5 🗷	NO		
D 11	res, c	omplete the following so (a) Name of organization			l (b) Type of organiza	ation		(c) Description	of relation	ship		
		(=,			,-	, .,pg			(-)				
	1 .												_
		ler penalties of perjury, ny knowledge and belief											
Sign		ch preparer has any kno		Ji i CCC,	and comp	nete. Declaratio) II OI	preparer (other	chan taxpayer, is be	asca on a	11 111101	mation	1 01
Here	1	*****				2022-02-23		*****		May the IRS			
	▮₽	Signature of officer or to	ristee			Date		Title		with the pre		_	
		T						, marc		See Histrac	dons.	165 -	- 140
		Print/Type preparer's	name	Prep	arer's Sign	ature		Date		PTIN			
									Check if self- employed ▶ □	P	01064	483	
D-:4		MICHELLE MANN						2022-02-23					
Paid													
	arer		ANTAYLOR L	LP					$\top_{\scriptscriptstyleF}$	Firm's EII	N ► 73-	-14139	77
use	Only		300 CANTRE	II PO	אף פווידר	301			<u> </u>				
		ininis audress ► 11	JOU CANTRE	LL KU	WD 2011E	201				Dhone -	/E01	\	5000
		LI	ITLE ROCK, A	AR 72	2212					Phone no	. (501	22/-5	0000

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income List and describe the kind(s) of property sold (e.g., real estate, (b) (c) (d) (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) Date acquired Date sold How acquired (mo., day, yr.) (mo., day, yr.) P-Purchase D-Donation TD AMERITRADE - 200 SHARES PHILIP MORRIS TD AMERITRADE - 50 SHARES BOEING TWEEDY, BROWNE FUND INC. - LONG TERM CAPITAL GAINS TWEEDY, BROWNE FUND INC. - SHORT TERM CAPITAL GAINS FRANKLIN TEMPLETON - LONG TERM CAPITAL GAINS FRANKLIN TEMPLETON - SHORT TERM CAPITAL GAINS Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) (f) 20,420 5.676 14,744 10,944 3,291 7,653 12,557 12,557 116 116 70,737 70,737 7,880 7,880 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col. (h) gain minus col. (k), but not less than -0-) or (i) F.M.V. as of 12/31/69 Adjusted basis Excess of col. (i) **(I)** Losses (from col.(h)) (i) as of 12/31/69 (k) over col. (j), if any 14,744 7,653 12,557 116 70,737

7,880

(a) Name and address (c) Compensation (If (d) Title, and average Expense account, Contributions to hours per week not paid, enter (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation DALE E JOHNSTON PRESIDENT 0.00 33 WOODBERRY RD LITTLE ROCK, AR 72212 JANICE D JOHNSTON SECRETARY/TREASURER 0 0 0.00

Form 990PF Part VII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

33 WOODBERRY RD LITTLE ROCK, AR 72212	0.00			
JILL E JOHNSTON	BOARD MEMBER	0	0	0
585 GALWAY DR BETHEL PARK, PA 15102	0.00			
NEAL D JOHNSTON	BOARD MEMBER	n	n	n

585 GALWAY DR BETHEL PARK, PA 15102	0.00			
NEAL D JOHNSTON	BOARD MEMBER	0	0	0
3309 CITATION DR	0.00			

BETHEL PARK, PA 15102				
NEAL D JOHNSTON	BOARD MEMBER	0	0	0
3309 CITATION DR DALLAS, TX 75229	0.00			

NEAL D JOHNSTON	BOARD MEMBER	0	0	0
3309 CITATION DR DALLAS, TX 75229	0.00			
· · · · · · · · · · · · · · · · · · ·		I		· · · · · · · · · · · · · · · · · · ·

3309 CITATION DR DALLAS, TX 75229	0.00			
GORDON D JOHNSTON	BOARD MEMBER	0	C	0

DALLAS, TX 75229				
GORDON D JOHNSTON	BOARD MEMBER	0	0	0
7727 SCARBOROUGH DR	0.00			

COLORADO SPRINGS, CO 80920

Form 990PF Part XIV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

| DALE E JOHNSTON

JANICE D JOHNSTON

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

AMERICAN RED CROSS 431 18TH STREET NW WASHINGTON, DC 20006	501(C)(3)	GENERAL OPERATING FUND	1,000
	501(C)(3)	GENERAL OPERATING FUND	1.000

WASHINGTON, DC 20006			
CHI ST VINCENT FOUNDATION 2 ST VINCENT CIRCLE LITTLE ROCK, AR 72205	501(C)(3)	GENERAL OPERATING FUND	1,000
CYSTIC FIBROSIS FOUNDATION	501(C)(3)	GENERAL OPERATING FUND	5,000

2 ST VINCENT CIRCLE LITTLE ROCK, AR 72205			
CYSTIC FIBROSIS FOUNDATION 4550 MONTGOMERY AVENUE SUITE 1100 N BETHESDA, MD 20814	501(C)(3)	GENERAL OPERATING FUND	5,000

LITTLE ROCK, AR 72205			
CYSTIC FIBROSIS FOUNDATION 4550 MONTGOMERY AVENUE SUITE 1100 N BETHESDA, MD 20814	501(C)(3)	GENERAL OPERATING FUND	5,000
Total	 	▶ 3a	88,200

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
EPISCOPAL RELIEF AND DEVELOPMENT 815 SECOND AVENUE	501(C)(3)	GENERAL OPERATING FUND	1,000

NEW YORK, NY 10017			
GARY SINISE FOUNDATION PO BOX 368	501(C)(3)	GENERAL OPERATING FUND	

Total .

GARY SINISE FOUNDATION PO BOX 368 WOODLAND HILLS, CA 91365	501(C)(3)	GENERAL OPERATING FUND	10,000
JDRF	501(C)(3)	GENERAL OPERATING FUND	15,000

WOODLAND HILLS, CA 91365			
JDRF	501(C)(3)	GENERAL OPERATING FUND	15,000
11324 ARCADE DRIVE SUITE 16			

1005	501(C)(3)	GENERAL OPERATING FUND	15,000
JDRF			
11324 ARCADE DRIVE SUITE 16			
LITTLE ROCK, AR 72212			
,			

▶ 3a

88,200

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
NATIONAL MULTIPLE SCLEROSIS SOCIETY 1100 N UNIVERSITY AVE LITTLE ROCK, AR 72207	501(C)(3)	GENERAL OPERATING FUND	1,500

LITTLE ROCK, AR 72207			
ST FRANCIS HOUSE 2701 SOUTH ELM STREET LITTLE ROCK, AR 72204	501(C)(3)	GENERAL OPERATING FUND	10,000
ST MARKS EDISCOPAL CHURCH	501(C)(3)	GENERAL OPERATING FUND	5,200

2701 SOUTH ELM STREET LITTLE ROCK, AR 72204			
ST MARKS EPISCOPAL CHURCH 1000 N MISSISSIPPI ST LITTLE ROCK. AR 72207	501(C)(3)	GENERAL OPERATING FUND	5,200

LITTLE ROCK, AR 72204			
ST MARKS EPISCOPAL CHURCH 1000 N MISSISSIPPI ST LITTLE ROCK, AR 72207	501(C)(3)	GENERAL OPERATING FUND	5,200
Total	 	▶ 3a	88,200

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

501(C	GENERAL OPERATING	FUND 500
	501(C)	501(C)(3) GENERAL OPERATING

PO BOX 164668 LITTLE ROCK, AR 72216			
THE NATIONAL WWII MUSEUM 945 MAGAZINE ST NEW ORLEANS, LA 70130	501(C)(3)	GENERAL OPERATING FUND	15,000
TUNNEL TO TOWER FOUNDATION	501(C)(3)	GENERAL OPERATING FUND	5,000

THE NATIONAL WWII MUSEUM 945 MAGAZINE ST NEW ORLEANS, LA 70130			
TUNNEL TO TOWER FOUNDATION 2361 HYLAN BLVD STATEN ISLAND, NY 10306	501(C)(3)	GENERAL OPERATING FUND	5,000

Total	 	▶ 3a	88,200
TUNNEL TO TOWER FOUNDATION 2361 HYLAN BLVD STATEN ISLAND, NY 10306	501(C)(3)	GENERAL OPERATING FUND	5,000
NEW ORLEANS, LA 70130			

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
UNIVESITY OF PITTSBURGH 4200 FIFTH AVENUE PITTSBURGH, PA 15260	501(C)(3)	GENERAL OPERATING FUND	2,000

4200 FIFTH AVENUE PITTSBURGH, PA 15260			
WASHINGTON UNIVERSITY ST LOUIS 1 BROOKINGS DRIVE ST LOUIS, MO 63130	501(C)(3)	GENERAL OPERATING FUND	1,000
CAMADETANIC DUDGE	501(C)(3)	GENERAL OPERATING FUND	5,000

WASHINGTON UNIVERSITY ST LOUIS 1 BROOKINGS DRIVE ST LOUIS, MO 63130			
SAMARITAN'S PURSE PO BOX 3000 BOONE NC 28607	501(C)(3)	GENERAL OPERATING FUND	5,000

ST LOUIS, MO 63130			
SAMARITAN'S PURSE PO BOX 3000 BOONE, NC 28607	501(C)(3)	GENERAL OPERATING FUND	5,000
Total	 	▶ 3a	88,200

Recipient If recipient is an individual, show any relationship to status of any foundation manager or substantial contributor

a Paid during the year			
HOPE LODGE 20TH CENTURY CLUB OF LITTLE ROCK INC 4011 MARYLAND AVENUE LITTLE ROCK, AR 72204	501(C)(3)	GENERAL OPERATING FUND	5,000

Total	 	▶ 3a	88,200
HOMES FOR OUR TROOPS 6 MAIN STREET TAUNTON, MA 02780	501(C)(3)	GENERAL OPERATING FUND	5,000
LITTLE ROCK, AR 72204			

Name: DALE & JANICE DAVIS JOHNSTON FAMILY FOUNDATION						
Category		45-385333 ount	Net Investment	Adjusted Net	Disbursements for Charitable	

1,350

2,700

Purposes

ACCOUNTING

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	93491059002102		
TY 2021 Other Expenses Sche	dule			_		
Name:	DALE & JANICE	DAVIS JOHNSTO	N FAMILY			
	FOUNDATION					
EIN:	45-3853337					
Other Expenses Schedule						
Description	Revenue and Expenses per	Net Investment Income	Adjusted Net Income	Disbursements for Charitable		

2,985

2,985

Other Expenses Schedule				
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements Charitable Purposes

ANNUAL BOARD EXPENSE

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 934910590	02102			
TY 2021 Other Increases Schedule							
Name:	DALE & JANIC	E DAVIS JOHNSTON FAMILY					
	FOUNDATION						
EIN:	45-3853337						
Other Increases Schedule							
De	escription		Amount				
APPRECIATION OF STOCK				403			

efile GRAPHIC print - DO NOT PROCESS	S As Filed Data	-	D	LN: 93491059002102			
TY 2021 Taxes Schedule							
Name: DALE & JANICE DAVIS JOHNSTON FAMILY							
FOUNDATION							
EIN: 45-3853337							
Taxes Schedule							
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
FOREIGN TAXES	310	310		0			
TAXES AND LICENSES	936	0		0			

Schedule B		lule of Contributors		OMB No. 1545-0047		
(Form 990) Department of the Treasury Internal Revenue Service			2021			
Name of the organization DALE & JANICE DAVIS JO FOUNDATION			Employer 45-385333	identification number		
Organization type (ch	eck one):					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number)	organization				
	4947(a)(1) nonexempt cha	4947(a)(1) nonexempt charitable trust not treated as a private foundation				
	☐ 527 political organization	☐ 527 political organization				
Form 990-PF	✓ 501(c)(3) exempt private f	oundation				
	4947(a)(1) nonexempt cha	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private for)(3) taxable private foundation				
	ation filing Form 990, 990-EZ, or 990- r property) from any one contributor. (
Special Rules						
under sections a received from a	tion described in section 501(c)(3) filin 509(a)(1) and 170(b)(1)(A)(vi), that ch my one contributor, during the year, to ne 1h, or (ii) Form 990-EZ, line 1. Con	ecked Schedule A (Form 990 or 9) tal contributions of the greater of (90-EZ), Part II, line 1	3, 16a, or 16b, and that		
during the year,	tion described in section 501(c)(7), (8 total contributions of more than \$1,00 the prevention of cruelty to children c	00 <i>exclusively</i> for religious, charital	ble, scientific, literary			
during the year, If this box is che purpose. Don't o	tion described in section 501(c)(7), (8 contributions exclusively for religious cked, enter here the total contribution complete any of the parts unless the Cable, etc., contributions totaling \$5,000	, charitable, etc., purposes, but no ns that were received during the ye General Rule applies to this organ	such contributions to ear for an exclusively ization because it rec	otaled more than \$1,000. religious, charitable, etc., ceived <i>nonexclusively</i>		
990-EZ, or 990-PF), bu	on that isn't covered by the General R tit must answer "No" on Part IV, line Part I, line 2, to certify that it doesn't m	2, of its Form 990; or check the bo	ox on line H of its Form			
For Paperwork Reduction for Form 990, 990-EZ, or 9	Act Notice, see the Instructions 0-PF.	Cat. No. 30)613X S	Schedule B (Form 990) (2021)		

Name of organization DALE & JANICE DAVIS JOHNSTON FAMILY FOUNDATION			Employer identification number 45-3853337		
Part I Contributors	Contributors (see instructions). Use duplicate copies of Part I if ad-	ditional space is needed.			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1	DALE AND JANICE JOHNSTON 33 WOODBERRY ROAD LITTLE ROCK, AR 72212	\$ 186,000	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 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 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.)		