39455 Application for Recognition of Exemption OMB No. 1545 0056 __1023 Under Section 5/01(c)(3) of the internal Revenue Code and a life empt stoleting Department of the Treasury Read the instructions for each Part carefully. A User Fee must be attached to this application. If the required information and appropriate documents are not submitted along with Form 8718 (with payment of the appropriate user fee), the application may be returned to you. Identification of Applicant Part I 2 Employer identification number (if none; see instructions.) 1a Full name of organization (as shown in organizing document) THOMAS PHILLIPS AND JANE MOORE JOHNSON FOUNDATION 25 6357015 3 Name and telephone number of person to be contacted if additional information is needed 1b c/o Name (if applicable) tal restablice in Linhomas P. Johnson 1c : Address (number and street) TATE OF THE STATE OF THE PROPERTY OF THE mar mar makeum i ti dis at(0412) 261-9008 1500: Oliver: Bldg - *: 4' Month the annual accounting period ends 1d . City or town, state, and ZIP code Distra Breate C sherred Research EP/EO Division EO Screens December Pittsburgh, Pa. 15222 Baltanore Date incorporated or formed 6 Activity codes (See instructions.) Check here if applying under section: ь 🔲 501(f) с 🗆 560 a 501(e) 602 12/1/90 Did the organization previously apply for recognition of exemption under this Code section or under any other ीं No section of the Code? If "Yes," attach an explanation. X No Has the organization filed Federal income tax returns or exempt organization information If "Yes," state the form number(s), years filed, and Internal Revenue office where filed Check the box for your type of organization. BE SURE TO ATTACH A COMPLETE COPY OF THE CORRESPONDING DOCUMENTS TO THE APPLICATION BEFORE MAILING. Corporation --- Attach a copy of your Articles of Incorporation, (Including amendments and restatements) showing approval by the appropriate state official; also include a copy of your bylaws. Attach a copy of your Trust Indenture or Agreement, including all appropriate signatures and dates; Association — Attach a copy of your Articles of Association, Constitution, or other creating document, with a declaration (see instructions) or other evidence the organization was formed by adoption of the document by more than one person; also include a copy of your bylaws. What are or will be the organization's sources of finderlog subgest? List fel order of size. If you are a corporation or an unincorporated association that has not yet adopted bylaws, check here If you are a corporation or an unincorporated association tractions into yet outpies bytaway, these examined this application, including the Ideclare under the penalties of perjury that I am authorized to sign this application on beautiful or and complete. 2 Torophia Proof the United States and attachments, and to the best of my knowledge its true, correct and complete. 2 Torophia Proof the United States and attachments, and to the best of my knowledge its true, correct and complete. 2 Torophia Proof the United States and Indiana Proof to the United States Proof to the United Here is the of at the need and an energy of the least operation and path and a strong an energy lead to a block of the part of a part of the least o The loundablon shall accept contributions of tored without suffertanton; as well

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3 Describe the organiza (Include details of fur	ition's fundralsing program idralsing activities such as s ers, etc.) Attach representa	both actual and places belective mailings,	anned, and explain ormation of fundra	to what extent it has sing committees, use	been put into effect of volunteers or	rt 21-167 Cat 5 to 3
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4 Give the following information about the organization's governing body:	
a Names, addresses, and titles of officers, directors, trustees, etc., all: Trustees State	b'Annual Compensation
Thomas P. Johnson, 1500 Oliver Bldg., Pittsburgh, Pa. 15222 Jane M. Johnson, 1500 Oliver Bldg., Pittsburgh, Pa. 15222 Thomas P. Johnson, Jr., 1500 Oliver Bldg., Pittsburgh, Pa. 15222 James M. Johnson, 1500 Oliver Bldg., Pittsburgh, Pa. 15222 Winifred Johnson Clive, 1500 Oliver Bldg., Pittsburgh, Pa. 15222	None None None None
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c Do any of the above persons serve as members of the governing body by reason of being public officials or by appointed by public officials? If "Yes, name those persons and explain the basis of their selection or appointment, and the basis of their selection or appointment of the basis of	10 in the angle state of
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d Are any members of the organization's governing body "disqualified persons" with respect to the organization (other tran by reason of being a member of the governing body) or do any of the members have either a substiness or family relationship with "disqualified persons"? (See the Specific Instructions for line 4d.) in "Yes," explain. All of the Trustees listed are related to the trust dono	.: of s. ☑ Yes. □ No
Command of the program of a particular section and the section of the section and the section of	9 (134 (p. 1) 1 (p. 10) 2 (p. 14) 4 (p. 14)
Does the organization control or is it controlled by any other organization? Is the organization, the outgrowth of (or successor to) another organization, or does it have a special relation to another organization by reason of interlocking directorates or other factors? If either of these questions is answered "Yes," explain.	on y ne e □ Yes ag V No
Does or will the organization directly or indirectly engage in any of the following transactions with any polit organization or other exempt organization (other than 501(c)(3) organizations): (a) grants; (b) purchases or sales of assets; (c) rental of facilities or equipment; (d) loans or loan guarantees; (e) reimbursement arrangements; (f) performance of services, membership, or fundraising solicitations; or (g) sharing of facilities equipment, mailing lists or other assets, or paid employees? If "Yes," explain fully and identify the other organization(s) involved.	ical Scheminical inventorializze "JasY" 11 es,
Tourn makings to exhibite the presentage of the curreleation's time and turn and see a decide.	12 Does er will the organ. If 1765, 1 repair, Alea, or plans to devote to tr
Is the organization financially accountable to any other organization?	□ Yes 👿 No
Is the organization financially accountable to any other organization. If "Yes," explain and identify the other organization; include details concerning accountability or attached if eports if any have been submitted.	13 Doés or will me lo gelqo o' statentents : If "Yes," ëxplain huly.

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	A	ns from the end of the month in which you were created or formed? . 👿 .Yes 🗓 N
	If you answer "Yes," do not answer questi	ions 2 through 6.
	awartion 7	filing requirement shown below applies, check the appropriate box and proceed to
		an exemption application within 15 months if the organization: ation, local unit of a church, a convention or association of churches, or an integrated
		normally has gross receipts of not more than \$5,000 in each tax year; or,
	(c) Is a subordinate organization co- submitted a notice covering the	wered by a group exemption letter, but only if the parent or supervisory organization timely subordinate.
3	If you do not meet any of the exceptions	in question 2, do you wish to request relief from the 15-month filing
4		give your reasons for not filing this application within 15 months from the end of the month
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_5.	qualification as a section 501(c)(3) organith your key District Director. Therefore recognition of exemption as a section for retroactively to the date you were for the date.	1 and 3 and do not meet any of the exceptions in question 2/your named anization can be recognized only from the date this application is filled fore, do you want us to consider your application as a request for 501(c)(3) organization from the date the application is received and ormed? Yes Yes Lanotheaus of on Phototrago signification on the date the application is received.
6	JU.	neitzeup of eg.,(() to.,(i),(d) kod base is ung \(\frac{1}{2} \) e and wish to request recognition of section 501(c)(4) status for the period beginning with the date your Form 1023 application was received (the effective date of your section the period base is of Form 1024 to this application.

Technical Requirements (Continued) Is the organization a private foundation? Yes (Answer question 8.) No. (Answer question 9 and proceed as instructed.) If you answer "Yes" to question 7, do you claim to be a private operating foundation? Yes (Complete Schedule E) No After answering this question, go to Part IV. If you answer "No" to question 7, indicate the public charity classification you are requesting by checking the box belt appropriately applies. THE ORGANIZATION IS NOT A PRIVATE FOUNDATION BECAUSE IT QUALIFIES: (a) As a church or a convention or association of churches (MUST COMPLETE SCHEDULE A.) (b) As a school (MUST COMPLETE SCHEDULE B.) (c) As a hospital or a cooperative hospital service organization, or a medical research organization operated in conjunction with a hospital (MUST COMPLETE SCHEDULE C). (d) As a governmental unit described in section 170(c)(1). (e) As being operated solely for the benefit of, or in connection with, one or more of the organizations described in (a) through (d), (g), (h), or (i) (MUST COMPLETE SCHEDULE D). Section 509(a) and 170(b)(1) (b) As being operated as and operated exclusively for testing for public safety. Section 509(a) As being operated for the benefit of a college or university that is owned or operated by a governmental unit. (h) As receiving a substantial part of its support in the form of contributions from publicly supported organizations, from a governmental unit, or from the general public. (g) As normally receiving not more than one-third of its support from	integrals alternate
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(D. As normally receiving not more than one-third of its support from	(A)(VI)
(i) As nothing receiving normal end and a state of the connect from	
gross investment income and more than one-third of its support from contributions, membership fees, and gross receipts from activities Section 509(a	1.
related to its exempt functions (subject to certain exceptions). Section 509(a)(2)
Sections 509(
(j) Use are a publicly supported organization but are not sure whether we and 170(b)(1)	(A)(vi)
	1)(2)
Internal Revenue Service to decide the proper classification, and the Electric decide the proper classification,	olfantari i
n as a section 501(c)(3) regunization con de sacegoized only bemithe dete this application is that dey District Direction. Therefore, as you want as to caracter your application as a request for	411,000
or examplion as a section 501(e)(3) ingenize from the date the application is a ractival and	កស់អាល្ហាននេះ។
If you checked one of the boxes (a) through (f) in question 9, go to question 14. If you checked one of the boxes (a) through (f) in question 9, go to question 14. If you checked box (g) in question 9, go to questions 11 and 12. If you checked box (h), (l), or (l), go to question 10.	aconer ton
If you checked one of the doxes (a) through (1) in questions 11 and 12.	
If you checked box (h), (l), or (j), go to question 10.	
er "Yes" to question Exhave and wish to request recognition of section 501/c1(4) status for the pench Legioning with I	
	iti you aasw
lains), check here to it and attack a completed page to all our 1004 to the application.	if you arsw date vouw

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Financial Data

Complete the financial statements for the current year and for each of the 3 years immediately before it: If in existence less than 4::

years, complete the statements for each year in existence. If in existence less than 1 year, also provide proposed budgets for the 2
years following the current year.

A.—Statement of Revenue and Expenses Current tax 3 prior tax years or proposed budget for 2 years (a) From 12-1-90 N/A 1 Gifts, grants, and contributions (e) TOTAL to 12-31 received (not including unusual 1,000. 20,000. grants—see instructions) 20,000 Membership fees received . . 0. Gross investment income (see 100. instructions for definition) Net income from organization's $-5M_{\odot} \sim 10^{10}$ unrelated business activities not 0. included on line 3 Tax revenues levied for and either paid to or spent on behalf 6 Value of services or facilities Restaurable in 187 furnished by a governmental unit to the organization without Revenue charge (not including the value of services or facilities generally furnished the public without charge) Other income (not including 1 M. 145 THE MERCHA gain or loss from sale of capital assets) (attach schedule) 1,000. 20,100. 8 Total of lines 1 through 7. . . 20,100. Gross receipts from admissions, in the first of the Sec. 17. 4 sales of merchandise or services, or furnishing of from the ra-A 24. 25 E 2,735,700,7 facilities in any activity that is not an unrelated business within the meaning of section Sec. 200 6 33 कुंदर अंदर्भ स 513 Total of lines 8 and 9 1.000. 20:100:::: 10 20.21.0014 Gain or loss from sale of capital 0. assets (attach schedule) . . . Unusual grants . 0 Total revenue (add lines 10 20.100. through 12) 1,000. 20,100. 0. Ten: 0 - 0 n virto O. 14 Fundraising expenses Contributions, gifts, grants, and similar amounts paid (attach schedule) . . Disbursements to or for benefit of members (attach schedule) ... Compensation of officers, 17 directors, and trustees (attach 18 Other salaries and wages 19 Interest Occupancy (rent, utilities, etc.) . 20 Depreciation and depletion Other (attach schedule) P. Fee 21 1,000 1,000 23 Total expenses . 0. 1.000.4 1,000. 24 Excess of revenue over expenses (line 13 minus line .000. 19,100 19,100.

Financial Data (Continued)				
BBalance Sheet (at the end of the period shown)		Uatz	_12-31-90	
Assets			1,000-	
Cash	2			
Accounts receivable, net	3			
Inventories	4			
Bonds and notes receivable (attach schedule) ,				
Corporate stocks (attach schedule)				
Mortgage loans (attach schedule)		,		
7 Other investments (attach schedule)	L	В		
B Depreciable and depletable assets (attach schedule)		9		
9 Land		10		
O Other assets (attach schedule)	: .	11	1,000.	
Total assets	1	-		
Liabilitles		12		
12 Accounts payable		13		
13 Contributions, gifts, grants, etc., payable		14		
14 Mortgages and notes payable (attach schedule)		.15		
15 Other liabilities (attach schedule)	maganga.	16		
16 Total liabilities				
Fund Balances or Net Assets		17	1,000.	
17 Total fund balances or net assets		18	1,000.	
Total fund balances or net assets Total flabilities and fund balances or net assets (add line 16 and line 17) If there has been any substantial change in any aspect of your financial activities since the end of the little has detailed explanation.	neriod si	e nwo	bove, check	

(Rev. March 1986)

Department of the Treasury—Internal Revenue Service

OMB No. 1545-0056 Expires 3-31-89

Consent Fixing Period of Limitation Upon Assessment of Tax Under Section 4940 of the Internal Revenue Code

(See Form 1023 instructions for Part IV, line 3.)

To be used with Form 1023. Submit in duplicate.

Under section 6501(c)(4) of the Internal Revenue Code, and as part of a request filed with Form 1023 that the organization named below be treated as a publicly supported organization under section 170(b)(1)(A)(vi) or section 509(a)(2) during an advance ruling period,

The Thomas Phillips and Jane Moore Johnson Foundation
(Exact legal name of organization) District Director of Internal Revenue 1500 Oliver Bldg., Pittsburgh, PA 15222 Baltimore, MD (Number, street, city or town, state, and ZIP code)

Consent and agree that the period for assessing tax (imposed under section 4940 of the Code) for any of the 5 tax years in the advance ruling period will extend 8 years, 4 months, and 15 days beyond the end of the first fax year.

However, if a notice of deficiency in tax for any of these years is sent to the organization before the period expires, then nowever, it a notice of denoted by it tak for only of these years is sent to the digenteration before the period expires, their lime for making an assessment will be further extended by the number of days the assessment is prohibited, plus 60 days. .

Ending date of first tax year December 31, 1990 Name of organization The Thomas Phillips and Jane Moore Johnson Foundation Officer or trustee having authority to sign Signature > District Director

For Paperwork Reduction Act Notice, see page 1 of the Form 1023 instructions.

form 8718 (Rev. January 1989)

User Fee for Exempt Organization

For IRS Use Only **Determination Letter Request** Department of the Treasury ➤ Attach to determination letter applications. Amount paid internal Revenue Service User fee screener 2 Name of organization THOMAS PHILLIPS AND JANE MOORE JOHNSON FOUNDATION Type of request (check only one box and include a check or money order made payable to Internal Revenue Service for the amount of the indicated fee): a 🔲 Initial request for recognition of tax-exempt status under section 501(a) (except a section 401(a) trust) by an organization whose gross receipts have not exceeded (or are not expected to exceed) \$10,000 annually, averaged over its first four taxable years. If you check this box you must complete the income certification below \$ 150 Certification expected to exceed) \$10,000 annually, averaged over its first four years of operation. Signature F_______Title 501(c)(3)
All other initial requests for recognition of tax-exempt status under section 501(c)(3) \$375 c \square Private foundation which has completed a section 507 termination and which seeks a setermination letter that it is now be sure that your application is sent to the applicable address shown below. These addresses supersede the addresses listed in Publication 557 and all application forms. Instructions Dallas, Albuquerque, Austin, Cheyenne, Denver, Houston, Oklahoma City, Phoenix, Sall Lake City, Wichita Internal Revenue Service EP/EO Division Mail Code 4950 DAL 1100 Commerce Street Dallas, TX 75242 The Revenue Act of 1987 requires payment of a user fee for determination letter requests submitted to the Internal Revenue Service. The fee must accompany each request submitted to a key district office. Atlanta, Birmingham, Columbia, Ft. Lauderdale, Greensbord Jackson, Jacksonville, Little Rock, Nashville, New Orleans Send fee and request for determination letter to this address Internal Revenue Service EP/EO Division C-1130 Atlanta, GA 30301 Hentity is in this IRS District request submitted to a key district office.

The fee for each type of request for an exempt organization determination letter is listed in item 2 of this form. Check the block that describes the type of request you are submitting, and attach this form to the front of your request form along with a check or money order for the amount indicated. Make the check or money order payable to the Internal Revenue Service. Brooklyn, Albany, Augusta, Boston, Buffalo, Burington, Hartford, Manhattan, Portsmouth, Providence Internal Revenue Service EP/EO Division P. O. Box 1680, GPO Brooklyn, NY 11202 Anchorage, Las Vegas, Boise, Los Angeles, Honolulu, Portland, Laguna Niguel, San Jose, Seattle Internal Revenue Service EO Application Receiving Room 5127, P. O. Box 486 Los Angeles, CA 90053-0486 Baltimore, District of Columbia, Pittsburgh, Richmond, Newark Internal Revenue Service EP/EO Division P. O. Box 17010 Baltimore, MD 21203 Internal Revenue Service EO Application Receiving Stop SF 4446 P. O. Box 36001 San Francisco, CA 94102 Vilmington, any U.S. possession or foreign Determination letter requests received Determination letter requests received with no payment or with an insufficient payment will be returned to the applicant for submission of the proper fee. To avoid delays in receiving a determination letter, country Internal Revenue Servi EP/EO Division P. O. Box 3159 Cincinnati, OH 48 201 Cincinnati, Cleveland, Internal Revenue Service EP/EO Division 230 S. Dearborn DPN 20-5 Chicago, IL 60604 Detroit, Indianapolis, Louisville, Parkersburg