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## Form 990-PF (2015) THE MORRIS FOUNDATION 75-2137184 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

	<del> </del>	. <u></u>		
Did the organization directly or indirectly engaged described in section 501(c) of the Code (other relating to political organizations?	ge in any of the following with any other than section 501(c)(3) organizations) o	r organization or in section 527,	Yes	s No
a Transfers from the reporting foundation to a no	ncharitable exempt organization of:			
(1) Cash			1 a (1)	X
(2) Other assets			1 a (2)	X
b Other transactions:		<b>†</b>	· · · · · · · · ·	1
(1) Sales of assets to a noncharitable exempt	organization		1 b (1)	x
(2) Purchases of assets from a noncharitable	=		1 b (2)	$\frac{\lambda}{x}$
(3) Rental of facilities, equipment, or other ass			1 b (3)	
* *				X
(4) Reimbursement arrangements			1 b (4)	X
(6) Performance of services or membership or fundraising solicitations			1 b (5)	X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.			1 b (6)	<u> </u>
c Sharing of facilities, equipment, mailing lists, of	ther assets, or paid employees		1c	<u> </u>
d If the answer to any of the above is 'Yes,' comp the goods, other assets, or services given by the any transaction or sharing arrangement, show				
(a) Line no (b) Amount involved (c) Name of	noncharitable exempt organization	(d) Description of transfers, transactions, and s	haring arrangeme	:nts
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2 a Is the foundation directly or indirectly affiliated described in section 501(c) of the Code (other b If 'Yes,' complete the following schedule.	with, or related to, one or more tax-ex- than section 501(c)(3)) or in section 53	empt organizations 27?	. Yes	XNo
(a) Name of organization	(b) Type of organization	(c) Description of relat	ionship	
Sign Here	this return, including accompanying schedules and taxpayer) is based on all information of which prep	statements, and to the best of my knowledge and be arer has any knowledge	May the IRS d this return with preparer show	n the In below
Signature of officer of trustee	Date	Title	_ (see instruction	
Print/Type preparer's name	Preparer's signature	Date Check X if	PTIN	لتتل
		Check All	[	: 6
Paid JOSEPH A. MONTELEONE			P0015455	<u>D</u>
	Monteleone, CPA	Firm's EIN ► 75-2	742923	
Use Only Firm's address 3707 Camp				
Fort Worth	TX	76107   Phone no. (817		
BAA			Form 990-Pi	F (2015)

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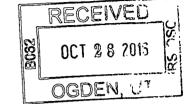
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THE MORRIS FOUNDATION 3707 CAMP BOWIE BLVD STE 260 FORT WORTH TX 76107



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## **DECLARATION**

Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I understand that this declaration will become a permanent part of that return.

Signature of Officer or Trustee

υa

EXECUTIVE DIRECTOR

Title