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Form 990-PF Department of the Treasury Internal Revenue Service		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. ▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.			OMB No 1545-0052 2016 Open to Public Inspection		
For calendar year 2016, or tax year beginning 01-01-2016, and ending 12-31-2016							
Name of foundation HARRY W MORRISON FOUNDATION INC				A Employer identification number 82-6008111			
Number and street (or P O box number if mail is not delivered to street address) 827 E PARK BLVD			Room/suite	B Telephone number (see instructions) (208) 345-5225			
City or town, state or province, country, and ZIP or foreign postal code BOISE, ID 83712				C If exemption application is pending, check here ▶ ☐			
G Check all that apply ☐ Initial return ☐ Final return ☐ Address change ☐ Initial return of a former public charity ☐ Amended return ☐ Name change				D 1. Foreign organizations, check here ▶ ☐ 2. Foreign organizations meeting the 85% test, check here and attach computation ▶ ☐			
H Check type of organization ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation				E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ ☐			
I Fair market value of all assets at end of year (from Part II, col (c), line 16)▶ \$ 18,172,655		J Accounting method ☒ Cash ☐ Accrual ☐ Other (specify) _____ (Part I, column (d) must be on cash basis)		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ ☐			
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))				(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1	Contributions, gifts, grants, etc , received (attach schedule)	5,168,808				
	2	Check ☐ if the foundation is not required to attach Sch B					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	266,939	266,939	266,939		
	5a	Gross rents	369,019	369,019	369,019		
	b	Net rental income or (loss) 118,358					
	6a	Net gain or (loss) from sale of assets not on line 10	391,270				
	b	Gross sales price for all assets on line 6a 1,875,620					
	7	Capital gain net income (from Part IV, line 2)		391,270			
	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					
Operating and Administrative Expenses	b	Less Cost of goods sold					
	c	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	6,196,036	1,027,228	635,958		
	13	Compensation of officers, directors, trustees, etc	56,000	10,000		46,000	
	14	Other employee salaries and wages	46,999	17,465		29,534	
	15	Pension plans, employee benefits					
	16a	Legal fees (attach schedule)	1,500			1,500	
	b	Accounting fees (attach schedule)	4,825	1,930		2,895	
	c	Other professional fees (attach schedule)					
	17	Interest					
	18	Taxes (attach schedule) (see instructions)	36,504	1,747		3,877	
	19	Depreciation (attach schedule) and depletion	62,971	57,546			
	20	Occupancy	11,312	5,658		5,654	
	21	Travel, conferences, and meetings	2,630			2,630	
	22	Printing and publications					
23	Other expenses (attach schedule)	217,132	212,233		4,899		
24	Total operating and administrative expenses. Add lines 13 through 23	439,873	306,579		96,989		
25	Contributions, gifts, grants paid	2,066,150			2,066,150		
26	Total expenses and disbursements. Add lines 24 and 25	2,506,023	306,579		2,163,139		
	27	Subtract line 26 from line 12					
	a	Excess of revenue over expenses and disbursements	3,690,013				
	b	Net investment income (if negative, enter -0-)		720,649			
	c	Adjusted net income(if negative, enter -0-)			635,958		
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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	209,533	462,710	462,710
	2 Savings and temporary cash investments	67,409	65,367	65,367
	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 ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges	48,845	61,816	61,816
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	4,748,193	4,030,930	4,944,415
	c Investments—corporate bonds (attach schedule)	3,504,567	5,451,994	5,646,722
	11 Investments—land, buildings, and equipment basis ▶ 4,746,484 Less accumulated depreciation (attach schedule) ▶ 996,016	1,573,014	3,750,468	6,229,270
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)			
	14 Land, buildings, and equipment basis ▶ 221,455 Less accumulated depreciation (attach schedule) ▶ 105,187	121,698	116,268	310,730
15 Other assets (describe ▶ _____)	432,413	427,893	451,625	
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	10,705,672	14,367,446	18,172,655	
Liabilities	17 Accounts payable and accrued expenses	8,121	10,419	
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	8,121	10,419	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ ☒ and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg, and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds	10,697,551	14,357,027	
	30 Total net assets or fund balances (see instructions)	10,697,551	14,357,027	
31 Total liabilities and net assets/fund balances (see instructions) .	10,705,672	14,367,446		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	10,697,551
2 Enter amount from Part I, line 27a	2	3,690,013
3 Other increases not included in line 2 (itemize) ▶ _____	3	31,242
4 Add lines 1, 2, and 3	4	14,418,806
5 Decreases not included in line 2 (itemize) ▶ _____	5	61,779
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	14,357,027

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a PUBLICLY TRADED SECURITIES	P	2014-01-01	2016-12-31
b INVESTMENT IN SILVERKING LLC	D	2016-03-31	2016-07-08
c VISTA DEL SOL RANCHO MIRAGE CA	D	2016-03-31	2016-06-23
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 1,248,120		793,223	454,897
b 2,500		25,000	-22,500
c 625,000		666,127	-41,127
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(j) F M V as of 12/31/69	(k) Adjusted basis as of 12/31/69	(l) Excess of col (j) over col (k), if any	
a			454,897
b			-22,500
c			-41,127
d			
e			

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	391,270
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		3	-63,627

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2015	495,377	11,349,636	0 04365
2014	492,037	10,143,984	0 04851
2013	415,657	9,745,209	0 04265
2012	621,952	9,500,634	0 06546
2011	475,582	9,828,970	0 04839

2 Total of line 1, column (d)	2	0 248654
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 049731
4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5	4	16,292,937
5 Multiply line 4 by line 3	5	810,264
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	7,206
7 Add lines 5 and 6	7	817,470
8 Enter qualifying distributions from Part XII, line 4	8	2,163,139

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☒ and enter 1% of Part I, line 27b	1	7,206
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	
3	Add lines 1 and 2.	3	7,206
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	7,206
6	Credits/Payments		
a	2016 estimated tax payments and 2015 overpayment credited to 2016	6a	8,607
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	8,607
8	Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached	8	
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	1,401
11	Enter the amount of line 10 to be Credited to 2017 estimated tax ☐ 1,401 Refunded ☐	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? <i>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</i>	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ☐ \$ _____ (2) On foundation managers ☐ \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ☐ \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>	2	No
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	Yes
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	Yes
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	5	No
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? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ☐ ID _____		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i> .	8b	Yes
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	9	No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10	No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	13	Yes	
14	The books are in care of ► JUSTIN WILKERSON Telephone no ► (208) 345-5225			

Located at **►** 827 E PARK BLVD BOISE ID ZIP+4 **►** 83702

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 ► 15			
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country ►	16	Yes	No

Part 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.

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☒ 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). ☐ Yes ☒ No			
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)? ☐ Organizations relying on a current notice regarding disaster assistance check here. ► ☐	1b		No
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 2016? ☐	1c		No
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))			
a	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? ☐ Yes ☒ No If "Yes," list the years ► 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions). ☐	2b		No
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ No			
b	If "Yes," did it have excess business holdings in 2016 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 if the foundation had excess business holdings in 2016). ☐	3b		No
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	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 2016?	4b		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

5a During the year did the foundation pay or incur any amount to (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). ☐ Yes ☒ No (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? ☐ Yes ☒ No Organizations relying on a current notice regarding disaster assistance check here. ☐ Yes ☒ No c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☒ No If "Yes," attach the statement required by Regulations section 53.4945–5(d)	5b	No
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No If "Yes" to 6b, file Form 8870	6b	No
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ Yes ☒ No	7b	No

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table				
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
NONE				
Total number of other employees paid over \$50,000. ☐ Yes ☒ No				

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

3 Five highest-paid independent contractors for professional services (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.		

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 	
2 	
3 	
4 	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 	
2 	
All other program-related investments. See instructions.	
3 	
Total. Add lines 1 through 3	

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, 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	9,699,943
b	Average of monthly cash balances.	1b	611,840
c	Fair market value of all other assets (see instructions).	1c	6,229,270
d	Total (add lines 1a, b, and c).	1d	16,541,053
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	16,541,053
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	248,116
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	16,292,937
6	Minimum investment return. Enter 5% of line 5.	6	814,647

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	814,647
2a	Tax on investment income for 2016 from Part VI, line 5.	2a	7,206
b	Income tax for 2016 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	7,206
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	807,441
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	807,441
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	807,441

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	2,163,139
b	Program-related investments—total from Part IX-B.	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	4	2,163,139
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	5	7,206
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	2,155,933

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 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				807,441
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only.			172,238	
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2016				
a From 2011.				
b From 2012.				
c From 2013.				
d From 2014.				
e From 2015.				
f Total of lines 3a through e.				
4 Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ <u>2,163,139</u>				
a Applied to 2015, but not more than line 2a			172,238	
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2016 distributable amount.				807,441
e Remaining amount distributed out of corpus	1,183,460			
5 Excess distributions carryover applied to 2016 (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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,183,460			
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 2015 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017				0
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 2011 not applied on line 5 or line 7 (see instructions).				
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	1,183,460			
10 Analysis of line 9				
a Excess from 2012.				
b Excess from 2013.				
c Excess from 2014.				
d Excess from 2015.				
e Excess from 2016.	1,183,460			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling. ▶					
b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)					
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year	Prior 3 years			(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
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 for active conduct of exempt activities. 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					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .					
c "Support" alternative test—enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:	
a 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) (See section 507(d)(2))	
b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest	
2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:	
Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.	
a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed JUSTIN WILKERSON 827 EAST PARK BOULEVARD SUITE 200 BOISE, ID 83712 (208) 345-5225	
b The form in which applications should be submitted and information and materials they should include SEE STATEMENTS B AND C	
c Any submission deadlines SEE STATEMENTS B AND C	
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors SEE STATEMENTS B AND C	

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i> VARIOUS SEE ATTACHED STATEMENT A VARIOUS BOISE, ID 83701	NONE	501	STATEMENT A	2,066,150
Total			▶ 3a	2,066,150
b <i>Approved for future payment</i>				
Total			▶ 3b	

Enter gross amounts unless otherwise indicated

(See worksheet in line 13 instructions to verify calculations)

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)
----------	--

Form **990-PF** (2016)

Part XVII

- | | Yes | No |
|-------|-----|----|
| 1a(1) | | No |
| 1a(2) | | No |
| 1b(1) | | No |
| 1b(2) | | No |
| 1b(3) | | No |
| 1b(4) | | No |
| 1b(5) | | No |
| 1b(6) | | No |
| 1c | | No |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No
- b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

**Sign
Here**

* * * * *

Title

May the IRS discuss this return with the preparer shown below (see instr)? ☒ Yes ☐ No

**Paid
Preparer
Use Only**

Print/Type preparer's name Terry E Ivey	Preparer's Signature	Date	Check if self-employed ☐	PTIN P00024812
Firm's name ▶ IVEY CPAs & Associates PA				Firm's EIN ▶
Firm's address ▶ 913 W River ST Suite 110 Boise, ID 83702				Phone no (208) 345-6655

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

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
MARK DALY 101 S CAPITOL BLVD BOISE, ID 83702	Director 4 00	8,000		
JUDITH V ROBERTS 3363 S BRIDGE PORT LANE BOISE, ID 83706				
LINDA KLINGNER 4171 CRESWELL WAY BOISE, ID 83704	VICE-PRESIDENT 4 00	10,000		
BONNIE WILKERSON 110 PARKWAY DRIVE BOISE, ID 83706				
FRANK WINSOR PO BOX 3411 PALM SPRINGS, CA 933633341	Secretary 25 00	32,438		
JUSTIN WILKERSON 110 PARKWAY BOISE, ID 83706				

TY 2016 Accounting Fees Schedule**Name:** HARRY W MORRISON FOUNDATION INC**EIN:** 82-6008111**Software ID:** 16000303**Software Version:** 2016v3.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	4,825	1,930	0	2,895

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2016 Depreciation Schedule

Name: HARRY W MORRISON FOUNDATION INC

EIN: 82-6008111

Software ID: 16000303

Software Version: 2016v3.0

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
BUILDING	1998-07-01	1,798,135	804,932	SL	2 56 %	46,104	46,104		
BUILDING IMPROVEMENTS	1998-07-01	177,088	79,281	SL	2 56 %	4,541	4,541		
IMPROVEMENTS	1999-01-01	8,175	3,561	SL	2 56 %	210			
IMPROVEMENTS	2000-11-01	9,434	3,660	SL	2 56 %	242			
TENANT IMPROVEMENTS-PEAK	2009-07-29	121,091	20,055	SL	2 56 %	3,105	3,105		
TENANT IMPROVEMENTS-PEAK	2010-01-01	2,244	345	SL	2 56 %	58	58		
OFFICE EQUIPMENT	2013-06-05	507	180	SL	14 28 %	72			
CARPET -HMS	2014-07-24	15,500	8,060	200DB	19 20 %	2,976	2,976		
TENANT IMPROVEMENTS -HMS	2014-07-24	85,489	3,198	SL	2 56 %	2,192	2,192		
OFFICE EQUIPMENT-COMPUTER	2014-08-06	2,430	1,264	200DB	19 20 %	467			
TENANT IMPROVEMENTS-MWSS	2015-12-31	72,073	77	SL	2 56 %	1,848	1,848		
OFFICE DESK AND CHAIR	2015-06-10	2,444	349	200DB	24 49 %	599			
OFFICE WORK STATION	2015-10-17	744	106	200DB	24 49 %	182			
BOILER	2015-01-23	14,635	360	SL	2 56 %	375			

TY 2016 Investments - Land Schedule**Name:** HARRY W MORRISON FOUNDATION INC**EIN:** 82-6008111**Software ID:** 16000303**Software Version:** 2016v3.0

Category/ Item	Cost/Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
Buildings	1,750,040	870,280	879,760	3,490,992
Improvements	473,485	125,736	347,749	
Land	2,522,959		2,522,959	2,738,278

**TY 2016 Land, Etc.
Schedule****Name:** HARRY W MORRISON FOUNDATION INC**EIN:** 82-6008111**Software ID:** 16000303**Software Version:** 2016v3.0

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
Furniture and Fixtures	20,031	16,979	3,052	5,000
Buildings	133,952	66,613	67,339	267,208
Improvements	45,431	21,595	23,836	
Land	22,041		22,041	38,522

TY 2016 Legal Fees Schedule**Name:** HARRY W MORRISON FOUNDATION INC**EIN:** 82-6008111**Software ID:** 16000303**Software Version:** 2016v3.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	1,500	0	0	1,500

TY 2016 Other Assets Schedule**Name:** HARRY W MORRISON FOUNDATION INC**EIN:** 82-6008111**Software ID:** 16000303**Software Version:** 2016v3.0**Other Assets Schedule**

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
WORKING INTEREST OIL AND GAS PROPERTY	432,413	427,893	451,625

TY 2016 Other Decreases Schedule**Name:** HARRY W MORRISON FOUNDATION INC**EIN:** 82-6008111**Software ID:** 16000303**Software Version:** 2016v3.0

Description	Amount
OIL AN GAS EXPENSES REPORTED ON FORM 990-T	61,779

TY 2016 Other Expenses Schedule**Name:** HARRY W MORRISON FOUNDATION INC**EIN:** 82-6008111**Software ID:** 16000303**Software Version:** 2016v3.0**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT EXPENSES	16,396	16,396		
MISCELLANEOUS	413	413		
OFFICE SUPPLIES	2,901	290		2,611
POSTAGE	801	80		721
Rental Expenses	193,115	193,115		
SUBSCRIPTIONS	275			275
UTILITIES & TELEPHONE	3,231	1,939		1,292

TY 2016 Other Increases Schedule**Name:** HARRY W MORRISON FOUNDATION INC**EIN:** 82-6008111**Software ID:** 16000303**Software Version:** 2016v3.0

Description	Amount
OIL AND GAS INCOME REPORT ON FORM 990-T	31,242

TY 2016 Taxes Schedule**Name:** HARRY W MORRISON FOUNDATION INC**EIN:** 82-6008111**Software ID:** 16000303**Software Version:** 2016v3.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAXES	30,880			
PAYROLL TAXES	5,624	1,747		3,877

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990 .	OMB No 1545-0047 2016
	Name of the organization HARRY W MORRISON FOUNDATION INC	Employer identification number 82-6008111

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	☒ 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

☒ 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 other 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 33¹/₃% 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, 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. Do not 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 is not covered by the General Rule and/or the Special Rules does not 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 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization HARRY W MORRISON FOUNDATION INC	Employer identification number 82-6008111
--	---

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	VELMA V MORRISON FAMILY TRUST	\$ 5,143,808	Person ☒
	827 E PARK BLVD SUITE 200		Payroll ☐
	BOISE, ID83712		Noncash ☒
(Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	VELMA V MORRISON FAMILY TRUST	\$ 25,000	Person ☐
	827 E PARK BLVD SUITE 200		Payroll ☐
	BOISE, ID83712		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)			

Name of organization HARRY W MORRISON FOUNDATION INC	Employer identification number 82-6008111
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Part II Noncash Property			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	REAL ESTATE IN IDAHO AND CALIFORNIA	\$ 4,760 000	2016-03-31
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	INVESTMENT IN SILVER KING LLC	\$ 25 000	2016-03-31
(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
		\$	

Name of organization HARRY W MORRISON FOUNDATION INC	Employer identification number 82-6008111
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Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ _____ Use duplicate copies of Part III if additional space is needed
-----------------	--

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	

Harry W. Morrison Foundation, Inc.
GRANTS - 2016

<u>Name & Address</u>	<u>Tax I.D. #</u>	<u>Purpose</u>	<u>Amount</u>
American Red Cross <i>Boise, ID</i>	53-0196605	500 - Year Floods in Texas	\$5,000
American Red Cross <i>Boise, ID</i>	53-0196605	Contribution for Louisiana Flooding	\$5,000
American Red Cross <i>Boise, ID</i>	53-0196605	Contribution for Hurricane Matthew	\$5,000
Boys & Girls Clubs of Ada County <i>Boise, ID</i>	82-0481687	Last Installment for New Teen Center	\$50,000
Friends of MK Nature Center <i>Boise, ID</i>	46-4834270	Matching Grant to Build New Membership Base	\$2,000
Garden City Library <i>Garden City, ID</i>	82-0479365	"Bells for Books" Bookmobile	\$5,000
Genesis World Mission/G.C. Clinic <i>Boise, ID</i>	82-0505073	2016 General Fund	\$5,000
Idaho Humane Society <i>Boise, ID</i>	82-0212536	2016 General Fund	\$300
Idaho School for Deaf & Blind <i>Gooding, ID</i>	82-0464126	Theatre for Students with Disabilities	\$850
Launch Ministries <i>Meridian, ID</i>	20-5006374	Launch Ministries Development Project	\$10,000
Meridian Food Bank <i>Meridian, ID</i>	20-3062024	Contribution for School Backpack Program	\$4,000
Meridian Valley Humane Society <i>Meridian, ID</i>	71-1037616	Veterinary Care for Dogs	\$3,000
Minidoka Health Care Foundation <i>Rupert, ID</i>	82-0531304	Challenge Grant/Disinfectant-Washer	\$15,000

Harry W. Morrison Foundation, Inc.
GRANTS - 2016

<u>Name & Address</u>	<u>Tax I.D. #</u>	<u>Purpose</u>	<u>Amount</u>
Northwest Nazarene University <i>Nampa, ID</i>	82-0200907	New 3-D Printer & 3-D Printing Lab	\$15,000
Salmon Library Association <i>Salmon, ID</i>	82-0328208	New Salmon Public Library Building	\$10,000
Solid Rock Ministry <i>West Palm Beach, FL</i>	22-2601963	New Prison Initiative	\$10,000
Specialized Needs Recreation <i>Coeur d'Alene, ID</i>	82-0370987	2016 Grant for Camp Allstars	\$2,000
Syringa Mountain School <i>Hailey, ID</i>	35-2450606	General Fund "Close the Gap 2015-2016"	\$10,000
The Boise Chordsmen <i>Boise, ID</i>	39-0926339	Barbershop Harmony Society Mid-Winter Convention	\$3,000
The Boise Chordsmen <i>Boise, ID</i>	39-0926339	Community Outreach Performance Series	\$6,000
Treasure Valley Family YMCA <i>Boise, ID</i>	82-0200908	South Meridian "Y" Project	\$1,900,000
Total for 2016			\$2,066,150

Officers

Judyth Roberts

Chairman

Justin Wilkerson

President

HARRY W. MORRISON FOUNDATION, INC. (HMF)

827 East Park Boulevard, Suite 200

Boise, Idaho 83712

(208) 345-5225

APPLICATION FOR FUNDING

Date _____

Name and address of organization _____

Primary function of organization _____

I R S identification number/& attach copy of Section 501 exemption letter

Organization Executive (Name & Title) _____ Telephone _____

Name & address of the principal officers, directors or trustees _____

Title of project _____

Amount of request _____ Total cost of project _____

Who will benefit? _____

How many will benefit? _____

Brief description of purposes & objectives of your organization _____

What other similar services are available in your area? _____

Are you applying to other funding sources? Please list, showing requested amounts _____

Would this grant produce matching funds? (Describe) _____

If applicable, describe the plans for sustaining this project beyond funding from the HMF _____

Have we contributed to your organization before? (Describe) _____

Please explain, on a separate page (1 page or less), why the Harry Morrison Foundation should approve this grant _____

PLEASE PROVIDE ANNUAL FINANCIAL REPORTS (prior 2 fiscal years): INCOME STATEMENT AND BALANCE SHEET!!

STATEMENT B

HARRY W. MORRISON FOUNDATION, INC.
EIN: 82-6008111

STATEMENT C

The salaries of officers and employees, reported in Part I, were allocated between grant-making and investment activities on the basis of time spent on each. The remaining expenses were allocated according to amount spent per activity.