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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.
mation about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

_	calendar year 2016 or tax year beginning JUN	1, 2016	, and ending	MAY 31, 2017	Open to Fabilic Inspection
	ne of foundation			A Employer identification	number
M	ORRISON FOUNDATION TRUST			48-6268660	
	ther and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
	.O. BOX 737			(785)827-9	331
	or town, state or province, country, and ZIP or foreign province	ostal code		C If exemption application is po	ending, check here
	ALINA, KS 67402-0737			-l	
GC	heck all that apply:		ormer public charity	D 1. Foreign organizations	, check here
	Final return	Amended return		Foreign organizations me check here and attach co	eting the 85% test,
H (Address change Check type of organization: X Section 501(c)(3) ex	Name change		┫	
ï-	¬	Other taxable private founda	ation	If private foundation state under section 507(b)(1)	
I Fa		ng method: X Cash	Accrual	┨ ``^``′	• •
	· —	her (specify)		F If the foundation is in a (under section 507(b)(1)	
		mn (d) must be on cash l	basis)		(- <i>n</i> - · · · · · · · · · · · · · · · · · ·
Pa	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
	necessarily equal the amounts in column (a))	expenses per books	income	income	(cash basis only)
	1 Contributions, gifts, grants, etc., received	3,090,935.			
	2 Check Interest on savings and temporary				
	3 cash investments	618.	618		STATEMENT 1
	4 Dividends and interest from securities	18,274.	18,274		STATEMENT 2
	5a Gross rents	<22,630.	> <4,924	·P <22,630.	STATEMENT 3
	b Net rental income or (loss) <22,630.>	51,630.	·	 	
e	6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all b assets on line fia 580,671.	31,030.		 	
Revenue	7 Capital gain net income (from Part IV, line 2)		51,630	 	
æ	8 Net short-term capital gain		32,000	0.	
	9 Income modifications		- -	 	
	Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss)				
	11 Other income	79,751.	12,702		STATEMENT 4
	12 Total. Add lines 1 through 11	3,218,578.	78,300		ļ — — — — — — — — — — — — — — — — — — —
	13 Compensation of officers, directors, trustees, etc	0.	0	0.	0.
	14 Other employee salaries and wages 15 Pension plans, employee benefits			 	
S	, , ,			 	
ŠUŠ	b Accounting fees STMT 5	8,445.	8,445	8,445.	0.
×	c Other professional fees STMT 6	6,439.	6,439		0.
Š	17 Interest				
and Administrative Expense	18 Taxes DECENIENT V	113,046.	840	7,007.	0.
nist	18 Taxes FOR ENTRY 19 Depreciation and depletion				
Ē	20 Occupancy 21 Travel conferences, and meetings				
¥	20 Occupancy 21 Travel Conferences, and meetings			 	
anc	22 Printing and publications			 	ļ
Operating	23 Other expenses COE STMT 8	21.	0	0.	0.
erat	24 Total operating and administrative	127,951.	15,724	. 21,891.	0.
ŏ	expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid	343,350.	13,144	£1,031.	343,350.
	26 Total expenses and disbursements.	343,330.	 	 -	343,3300
	Add lines 24 and 25	471,301.	15,724	. 21,891.	343,350.
	27 Subtract line 26 from line 12:	2.2,002			
	Excess of revenue over expenses and disbursements	2,747,277.		}	}
	b Net investment income (if negative, enter -0-)		62,576		
	C Adjusted net income (if negative, enter -0-)			54,122.	

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions

_		Column should be for the off-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Warket Value
	1	Cash - non-interest-bearing	20.005	600 040	602.010
ı		Savings and temporary cash investments	30,925.	603,942.	603,942.
	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			
	7	Other notes and loans receivable 43,811.			
	İ	Less; allowance for doubtful accounts ▶ 0 .	44,610.	43,811.	43,811.
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
ΫI	10a	Investments - U.S. and state government obligations			
-	ь	Investments - corporate stock STMT 9	690,060.	2,935,007.	3,525,638.
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 10	560,037.	490,149.	490,149.
	14	Land, buildings, and equipment; basis			
]	Less accumulated depreciation			
	15	Other assets (describe ► STATEMENT 11)	25,996.	25,996.	25,996.
	16	Total assets (to be completed by all filers - see the			
	ļ	instructions. Also, see page 1, item I)	1,351,628.	4,098,905.	4,689,536.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ap	21	Mortgages and other notes payable			
_	22	Other liabilities (describe			
	l				
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
	1	and complete lines 24 through 26 and lines 30 and 31.	(
lances	24	Unrestricted			
an	25	Temporarily restricted			

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
30 Total net assets or fund balances

1,351,628.

4,098,905.

Part III Analysis of Changes in Net Assets or Fund Balances

31 Total liabilities and net assets/fund balances

1 Tot	al net assets or fund balances at beginning of year - Part II, column (a), line 30	- 1	
(mu	ust agree with end-of-year figure reported on prior year's return)	1	1,351,628.
2 Ent	er amount from Part I, line 27a	2	2,747,277.
3 Oth	er increases not included in line 2 (itemize) 🕨	3	0.
4 Add	d lines 1, 2, and 3	4	4,098,905.
5 Dec	creases not included in line 2 (itemize)	5	0.
6_ Tota	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	4,098,905.
		_	Form 990-PF (2016)

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1,351,628

4,098,905

F	Part IV Capital Gains	and Losses fo	or Tax on Ir	rvestment	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 (mo., d	acquired ay, yr.)	(d) Date sold (mo., day, yr.)		
1a PUBLICLY TRADED SECURITIES						P					
	LONG-TERM CAPI	TAL GAIN	FROM HA	LEY AS	SOCIATES	<u> </u>		P			
_	<u>: </u>										
_	<u> </u>					├		+			
_		(f) Depreciation	an allowed	(a) Cos	t or other basis	┸			(h) G	ain or (loss	<u> </u>
_	(e) Gross sales price	(or allow			xpense of sale					s (f) minus	(g)
_	$\frac{580,654}{17}$		 	 -	529,04	<u>: L • </u>					51,613. 17.
_				 							1/.
_	<u> </u>			 		- +					
_				 		\dashv					
_	Complete only for assets shown	ng gain in column (h) and owned by	the foundation	on 12/31/69	$\neg \uparrow$		(1) Gams (C	ol. (h) gaın	minus
_	(i) F.M.V. as of 12/31/69	(j) Adjuste as of 12/			cess of col. (1) col. (1), if any				. (k), but ı	not leśs tha (from col. :	п - 0-) ог
_	 	as 01 12/1		OVE				.			51,613.
_	<u>a</u>			 		~ →					17.
_	; C			 		+					
_	<u> </u>					-					
_						\neg					
_	0	{!	f gaın, also ente	r ın Part I, lıne	7	3					51,630.
	Capital gain net income or (net ca	•	f (loss), enter -0		7	가	2				51,050.
3	Net short-term capital gain or (lo- If gain, also enter in Part I, line 8,		tions 1222(5) ar	10 (6):		11		į			
	If (loss), enter -0- in Part I, line 8	column (c).				- }	3				0.
П	Part V Qualification U	nder Section	4940(e) for	Reduced	Tax on Net	Inv	estn	nent Ind	ome		
(F	or optional use by domestic private	e foundations subjec	t to the section	4940(a) tax on	net investment in	come	1.)				
ſf	section 4940(d)(2) applies, leave t	his part blank									
		·									
	as the foundation liable for the sec			, ,	•	riod?					Yes X No
1	"Yes," the foundation does not qua Enter the appropriate amount in					ntries					
÷	(a)	Cacil coldini for cac	(b)	note detions be	lore making uny c	(c)			- - -		(d) bution ratio
	Base periód years Calendar year (or tax year beginni	ng in) Adjust	رم) ed qualifying dis:	tributions	Net value of no			use assets		Distri (col (b) di	butión ratio vided by col. (c))
_	2015	y,	22	1,413.	<u></u>	1	, 52	0,583		1-2- (-7	.145611
_	2014			9,064.				5,672			.077485
_	2013		11	2,700.		1	,60	5,072			.070215
	2012			0,568.				9,525			.176116
_	2011		15	4,167.		_1	,46	3,912			.105312
									1	1	554520
	Total of line 1, column (d)								2	 	.574739
3	Average distribution ratio for the	,		on line 2 by 5,	or by the number	of yea	ars			}	.114948
	the foundation has been in existe	nce it less than 5 ye	ars						3_	 	•114940
4	Enter the net value of noncharital	ole-use assets for 20	116 from Part X,	line 5					4		2,188,680.
5	Multiply line 4 by line 3								5		251,584.
										ł	
6	Enter 1% of net investment incor	ne (1% of Part I, line	e 27b)						6	ļ	626.
	Add been 6 10]_	ļ	250 210
7	Add lines 5 and 6								7	 -	252,210.
8	Enter qualifying distributions from	n Part XII, line 4							8	<u></u>	343,350.
	If line 8 is equal to or greater than See the Part VI instructions.	n line 7, check the bo	ox ın Part VI, lıne	e 1b, and comp	lete that part usin	ıg a 19	% tax ı	rate.			

Page 3

Form 990-PF (2016) MORRISON FOUNDATION TRUST			26866		Page 4
Part VI Excise Tax Based on Investment Income (Section 494		<u> 4948 - s</u>	see insti	ructio	ns)
1a Exempt operating foundations described in section 4940(d)(2), check here and e	enter "N/A" on line 1.	1 [
Date of ruling or determination letter: (attach copy of letter if ne		1_ 1.		_	
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	➤ 🛣 and enter 1%	1		6	26.
of Part I, line 27b	,				
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 49	% of Part I, line 12, col. (b).	1 1			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. C		2			0.
3 Add lines 1 and 2		3		6	26.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only.	Others enter -0-)	4			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	,	5		6	26.
6 Credits/Payments;					
a 2016 estimated tax payments and 2015 overpayment credited to 2016	6a	1 1			
b Exempt foreign organizations - tax withheld at source	6b	1			
c Tax paid with application for extension of time to file (Form 8868)	6c	 			
d Backup withholding erroneously withheld	6d	- 1			
· · · · · · · · · · · · · · · · · · ·	00	7			0.
7 Total credits and payments. Add lines 6a through 6d	and and				$\frac{0.1}{12.}$
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is att	acneo	8			38.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9			30.
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 2017 estimated tax	Refunded	11			
Part VII-A Statements Regarding Activities				177	TA1-
1a During the tax year, did the foundation attempt to influence any national, state, or local legi	islation or did it participate or interven	e in	<u> </u>	Yes	
any political campaign?			1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purpo	oses (see instructions for the definitio	n)?	<u>1b</u>		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities	and copies of any materials publis	shed or			
distributed by the foundation in connection with the activities				1	
c Did the foundation file Form 1120-POL for this year?			1c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during th			1		ĺ
(1) On the foundation. ▶ \$ 0 • (2) On foundation manager	rs.▶ \$0	•	ļ		J .
e Enter the reimbursement (if any) paid by the foundation during the year for political expend	diture tax imposed on foundation	_			Ì
managers. ▶ \$ 0 •			1		
2 Has the foundation engaged in any activities that have not previously been reported to the	IRS?		2		X
If "Yes," attach a detailed description of the activities					
3 Has the foundation made any changes, not previously reported to the IRS, in its governing	instrument, articles of incorporation,	or		1	Ι ,
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	ges		3	1 -	x
4a Did the foundation have unrelated business gross income of \$1,000 or more during the ye			48	X	
b If "Yes," has it filed a tax return on Form 990-T for this year?			4b	X	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year	?		5	+	X
If "Yes," attach the statement required by General Instruction T					
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied (either.		ł	1	l
By language in the governing instrument, or					
By state legislation that effectively amends the governing instrument so that no mandato	ary directions that conflict with the sta	te law	İ	1	1 '
remain in the governing instrument?	ny directions that connet with the sta	to law	6	- X	
	amminta Dant II and (a) and Dant V	1/	7	$+\frac{x}{x}$	┼
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," co	omplete Part II, cor (c), and Part X	V	<u>⊢</u>	 ^ -	├
	NONE				
8a Enter the states to which the foundation reports or with which it is registered (see instructi	ions) NONE			}	1
	Allows and Constant (— l		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the		ATTENTON	12 -	-	- -
of each state as required by General Instruction G? If "No," attach explanation	SEE STATE		12 86	Ч—-	X
9 Is the foundation claiming status as a private operating foundation within the meaning of s		iendar			'
year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"			9	X	
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a sched	dule listing their names and addresses		10		X
			Form 9 9	90-PF	(2016)

orm 990-PF (2016) MORRISON FOUNDATION TRUS			<u>48-62686</u>	60 Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				1 1
(1) Carry on propaganda, or otherwise attempt to influence legislation (sectio	n 4945(e))?	Ye	es 🗶 No	
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indire			1 1
any voter registration drive?		Ye	es X No	1 1
(3) Provide a grant to an individual for travel, study, or other similar purposes	37	Ye	es 🗶 No	
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section			
4945(d)(4)(A)? (see instructions)		Y	es 🗓 No	
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or f	for		
the prevention of cruelty to children or animals?			s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described	ın Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instri		J	N/A	5b
Organizations relying on a current notice regarding disaster assistance check l	•			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption is		ined		
expenditure responsibility for the grant?		_ /	es 🔲 No	
If "Yes," attach the statement required by Regulations section 53 494				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	• •			1 1
a personal benefit contract?	pay premiums on	□ v ,	es X No	
•	norconal hanafit contract?	I		Bb X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?		 -	
If "Yes" to 6b, file Form 8870	ahaltar transastian?		es X No	
7a At any time during the tax year, was the foundation a party to a prohibited tax		11	. –	7b
b If "Yes," did the foundation receive any proceeds or have any net income attrib Part VIII Information About Officers, Directors, Trust		nagara Highl		<u> </u>
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	tees, roundation Ma	inagers, nigni	y	
List all officers, directors, trustees, foundation managers and their	compensation			
Elst all officers, directors, diastecs, roundadori managers and their	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deterred	(e) Expense account, other
OCCED WORD TOOM	to position	enter -0-)	compensation	allowances
ROGER MORRISON	TRUSTEE]]	
1700 E. IRON	۸ - ۸		ا م	0
SALINA, KS 67401	0.50	0.	0.	0.
RICHARD MORRISON	TRUSTEE			
1700 E. IRON	2 50		ا م	•
SALINA, KS 67401	0.50	0.	0.	0.
		<u> </u>		
			1	
2 Compensation of five highest-paid employees (other than those in		, enter "NONE."	[/] .	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each employee paid more than \$\phi \cdot \	hours per week devoted to position	(C) compensation	and deferred compensation	allowances
NONE				
	1			
			<u> </u>	···
				
	1	1		
	 	 	-	
	+			
F_A_L number of other ampleyees paid over #50,000		<u> </u>	<u> </u>	0
Total number of other employees paid over \$50,000				990-PF (2016)
			Form	ラジロ・アア (2016)

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48-6268660 Form 990-PF (2016) MORRISON FOUNDATION TRUST Page 8 Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 1,913,437. a Average monthly fair market value of securities 1a 282,577. 25,996. b Average of monthly cash balances 1b c Fair market value of all other assets 1c 2,222,010. 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets 2,222,010. 3 Subtract line 2 from line 1d 33,330. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 2,188,680. 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 109,434 Minimum investment return. Enter 5% of line 5 Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here \blacktriangleright X and do not complete this part.) Minimum investment return from Part X, line 6 2a Tax on investment income for 2016 from Part VI, line 5 2a 2b Income tax for 2016. (This does not include the tax from Part VI.) c Add lines 2a and 2b Distributable amount before adjustments. Subtract line 2c from line 1 Recoveries of amounts treated as qualifying distributions Add lines 3 and 4 Deduction from distributable amount (see instructions) Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 343,350. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a b Program-related investments - total from Part IX-B 1b 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) За b Cash distribution test (attach the required schedule) 3b 343,350. 4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 626.

Adjusted qualifying distributions. Subtract line 5 from line 4 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.

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income. Enter 1% of Part I, line 27b

Part XIII Undistributed Income (s	ee instructions)	N/A		
	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2015	2015	2016
1 Distributable amount for 2016 from Part XI,				
line 7				
2 Undistributed income, if any, as of the end of 2016	-			_
a Enter amount for 2015 only				
b Total for prior years:				
		<u>.</u> .		
3 Excess distributions carryover, if any, to 2016:			ľ	
a From 2011				,
b From 2012				i
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: ►\$ 				
a Applied to 2015, but not more than line 2a	,			,
b Applied to undistributed income of prior				
years (Election required - see instructions)				<u> </u>
c Treated as distributions out of corpus				
(Election required - see instructions)				
d Applied to 2016 distributable amount				
e Remaining amount distributed out of corpus				
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;		i		
& 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 2015. Subtract line				
4a from line 2a. Taxable amount - see instr.				
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must be distributed in 2017				
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				
9 Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a				
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				

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Fart XIV Frivate Operating I	Juliaguoria (see ilis	LIUCIONS AND FAIL VIII	-, question <i>aj</i>		
1 a If the foundation has received a ruling or				15 (06	
foundation, and the ruling is effective for	•	•		15/86	
b Check box to indicate whether the found		g foundation described in		4942(j)(3) or 494	2(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(1) 0015	Prior 3 years	741 0040	(a) Tatal
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for	54 100	76 000	00 000	66 530	070 000
each year listed	54,122.	76,029.	82,203.	66,539.	278,893.
b 85% of line 2a	46,004.	64,625.	69,873.	56,558.	237,059.
c Qualifying distributions from Part XII,	242 252	004 044	100 054	110 500	006 050
line 4 for each year listed	343,350.	221,844.	129,064.	112,700.	806,958.
d Amounts included in line 2c not					
used directly for active conduct of					•
exempt activities	0.	0.	0.	0.	0.
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets	343,350.	221,844.	129,064.	112,700.	806,958.
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0.
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed	72,956.	50,686.	55,523.	53,503.	232,668.
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)					0.
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					0.
(3) Largest amount of support from	-				
an exempt organization					0.
(4) Gross investment income					0.
Part XV Supplementary Info	rmation (Complet	te this part only i	f the foundation	had \$5,000 or mo	
at any time during the					
1 Information Regarding Foundation					
a List any managers of the foundation who		han 2% of the total contr	ibilitions received by the f	oundation before the close	of any tax
year (but only if they have contributed m	ore than \$5,000). (See se	ection 507(d)(2).)	iodilono rocalito o cy ilio i		, or any tan
SEE STATEMENT 13					
b List any managers of the foundation who			or an equally large portion	n of the ownership of a par	tnership or
other entity) of which the foundation has NONE	a 10% or greater interes	L .			
2 Information Regarding Contribution	on Grant Gift Loan	Scholarship etc. Pre	narame:	,	
Check here ► if the foundation of the foundation makes gifts, grants, etc. (nly makes contributions to	preselected charitable o	rganizations and does no		
a The name, address, and telephone numb	er or e-mail address of th	e person to whom applic	ations should be address	sed:	
MORRISON FOUNDATION, P.O. BOX 737, SALINA					
b The form in which applications should be NO FORMAL REQUIREMEN		on and materials they sh	ould include:		
c Any submission deadlines; NO SUBMISSION DEADLI	NES				
d Any restrictions or limitations on awards ORGANIZATIONS APPLYI	, such as by geographical				5.

Form **990-PF** (2016)

15131004 784056 S41735

3 Grants and Contributions Paid During th		Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
COMMUNITY FOOD BANK	NONE	PUBLIC	FOR USE IN CHARITABLE	
TULSA, OK 74106		<u> </u>		250
DOMESTIC VIOLENCE ASSOCIATION OF CENTRAL KANSAS	NONE	PUBLIC	FOR USE IN CHARITABLE	
SALINA, KS 67401				750
FIRST PREBYTERIAN CHURCH SALINA, KS 67401	NONE	PUBLIC	FOR USE IN CHARITABLE	289,150
KUEA	NONE	PUBLIC	FOR USE IN CHARITABLE ACTIVITIES	
KANSAS CITY, KS 66103		 		8,000
MIKE AHEARN SCHOLARSHIP FUND MANHATTAN, KS 66502	NONE	PUBLIC	FOR USE IN CHARITABLE	2,600
	CONTINUATION SHEE	T(S)	▶ 3a	343,350
b Approved for future payment				<u></u>
NONE				
			+	
		ļ		···-
Total	 		▶ 3b	0

nter gross amounts unless otherwise indicated.	Unrelated by	isiness income		y section 512, 513, or 514	(e)
-	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt
1 Program service revenue:	code	Allibulit	code	Amount	
å			┝╌┾╌		
<u> </u>			├		
4	_		┼╌┼╌		
			 		
·	_		 		
g Fees and contracts from government agencies			 		
Membership dues and assessments	 		 		
Interest on savings and temporary cash		- 			
investments			14	618.	
4 Dividends and interest from securities			14	18,274.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property	531120	<17,706.	>01	<4,924.>	
6 Net rental income or (loss) from personal					
property			<u> </u>		
7 Other investment income	531120	66,242.	01	12,702.	
B Gain or (loss) from sales of assets other				-1 600	
than inventory			18	51,630.	
Net income or (loss) from special events	<u> </u>		 		
Gross profit or (loss) from sales of inventory			} 		
1 Other revenue: a STATE REFUNDS	531120	807.			
	531120	807.	 		
b	-		 -		
<u> </u>			 -		
e			+ +-		
2 Subtotal. Add columns (b), (d), and (e)		49,343.	 	78,300.	
3 Total. Add line 12, columns (b), (d), and (e)	<u> </u>			13	127,6
See worksheet in line 13 instructions to verify calculation	ns.)				·
		uliahmant of Fr			
Part XVI-B Relationship of Activiti	es to the Accom	plishment of Ex	kempt P	urposes	
Line No. Explain below how each activity for which	income is reported in co	olumn (e) of Part XVI-A	contributed	Importantly to the accomp	lishment of
the foundation's exempt purposes (other	than by providing funds	for such purposes).			

	the foundation's exempt purposes (other than by providing funds for such purposes).	.
		
		
		
 +		
		
		
623621 11-23-	16	Form 990-PF (2016

For	orm 990-PF (2016) MORRISON FOUNDATION TRUST 48-0		Pa	age 13
Pa	art XVII Information Regarding Transfers To and Transactions and Relationships With No	ncharitable	•	
	Exempt Organizations			
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of		Yes	No
	the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?	İ		
a	Transfers from the reporting foundation to a noncharitable exempt organization of:			ļ
	(1) Cash	1a(1)	-	X
	(2) Other assets	1a(2)		X
b	Other transactions:			
	(1) Sales of assets to a noncharitable exempt organization	1b(1)		X
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)		X

a	Transfers from the reporting foundation to a noncharitable exempt organization of:			
	(1) Cash	1a(1)		X
	(2) Other assets	1a(2)		X
b	Other transactions:]		
	(1) Sales of assets to a noncharitable exempt organization	1b(1)		X
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)		X
	(3) Rental of facilities, equipment, or other assets	1b(3)		X
	(4) Reimbursement arrangements	1b(4)		X
	(5) Loans or loan guarantees	1b(5)		X
	(6) Performance of services or membership or fundraising solicitations	1b(6)		X
C	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	10		X
d	If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, of or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, sh		ets,	

column (d) the value of the goods, other assets, or services received. (a)Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A

										_
								_		
				,						
	+									
2a c	the four	1 Indation directly or indirectly	v affiliated with	or related to one	or more tay-evennt o	raanizatione d	accribad			
		501(c) of the Code (other	•	•	•	rgamzations o	CSCHDCG		Yes	X No
		mplete the following sche		.(0)(0)) 0 000						<u></u>
	,	(a) Name of orga			(b) Type of organiza	tion	(c) I	Description of re	lationship	
		N/A								
0:		penalties of perjury, I declare the elief, it is twe, correct, and com							May the IRS dis	scuss this
Sign Here		Roa . A	7A 4 4 44.		10-4-7	1			shown below (s	see instr)?
11010		ature of officer or trustee	Msin	1	Date	Title			_ X Yes	L N∙
	Joigi	Print/Type preparer's nar	ne	Preparer's s		Date		eck If	PTIN	
		i i ililo i ype preparer 3 mai	110		Ma			f- employed		
Paid		LOREN J. YO	NING	LOREN	J YOUNG	10/0	4/17		P000052	242
Prep	arer	Firm's name ► KCOI		LLP		= 0 / 0		rm's EIN ▶ 4	8-056770	
Use (,				'	• =		
		Firm's address ► 30:	OCORT	LAND, P.	O. BOX 110	0				
		SAI	JINA, K	S 67402-	1100		P	hone по. (7)	85)825-1	L561

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

Employer identification number Name of the organization 48-6268660 MORRISON FOUNDATION TRUST 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 property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Employer identification number

MODDICON	FOUNDATION	mpriom
MOKKIDOM	LOUNDATION	IKODI

48-6268660

HORKE			<u> </u>
Part I	Contributors (See instructions). Use duplicate copies of Part I		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	P.O. BOX 737 SALINA, KS 67402-0737	\$ <u>3,090,935</u> .	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
623452 10-1	R-16	\$Schedule B (Forn	Person Payroli Noncash (Complete Part II for noncash contributions.)

Employer identification number

MORRISON FOUNDATION TRUST

48-6268660

	Noncash Property (See instructions) Use duplicate copies of Pa	art II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
ŀ		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		s	
(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.	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received

623454 10-18-16

3 Grants and Contributions Paid During the				
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)	any foundation manager or substantial contributor	recipient	++	
NEW REFORM TEMPLE	NONE	PUBLIC	FOR USE IN CHARITABLE	
KANSAS CITY, MO 64112			ACTIVITIES	13,80
SMEF/SHARE	NONE	PUBLIC	SME RENOVATION	
TURENPE MICCION VC 6600E			SENSATION	25
HAWNEE MISSION, KS 66085	- 	 	 	
ELVELVIL EDVOLUTOV CODD		DVD1 TQ	THE TOP TOP WHITNESON	
PANZANIA EDUCATION CORP	NONE	PUBLIC	TUITION FOR HUNINGTON H. MROSSO	
CHESTNUT HILL, MA 02467		<u> </u>		1,80
TRINITY UNITED METHODIST CHURCH	NONE	PUBLIC	FOR USE IN CHARITABLE	
SALINA, KS 67401			ACTIVITIES	1,00
				
NOUNDED WARRIORS	NONE	PUBLIC	FOR USE IN CHARITABLE	
			ACTIVITIES	
TOPEKA, KS 66675		 	 	25
FRIENDS OF THE RIVER	NONE	PUBLIC	FOR USE IN CHARITABLE ACTIVITIES	
SALINA, KS 67401		<u> </u>		5 (
U FOUNDATION	NONE	PUBLIC	FOR USE IN CHARITABLE	
BLOOMINGTON, IN 47402			ACTIVITIES	5,00
DOMINGTON, IN 17402				
MCPHERSON COLLEGE	NONE	PUBLIC	BUD HEE IN UNVERWEEL	
ACTIERSON COLLEGE	NONE	FORDIC	FOR USE IN CHARITABLE ACTIVITIES	
ACPHERSON, KS 67450		 		5,00
SALINA CHRISTIAN ACADEMY	NONE	PUBLIC	FOR USE IN CHARITABLE	
SALINA, KS 67401			ACTIVITIES	5(
		†	†	
SALINA COMMUNITY THEATRE	NONE	PUBLIC	FOR USE IN CHARITABLE	
			ACTIVITIES	
SALINA, KS 67401		1	1	1,00

Part XV Supplementary Information 3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	Amount
SALINA SYMPHONY SALINA, KS 67401	NONE	PUBLIC	FOR USE IN CHARITABLE ACTIVITIES	3,000
		 	 	
THE COBRA EXPERIENCE	NONE	PUBLIC	FOR USE IN CHARITABLE	
MARTINEZ, CA 94553		 		1,500
RIVERVIEW ESTATES, INC.	NONE	PUBLIC	FOR USE IN CHARITABLE	1,000
mangobili, no o/101		 	 	
ROLLING HILLS ZOO	NONE	PUBLIC	FOR USE IN CHARITABLE ACTIVITIES	
SALINA, KS 67401		 		500
KANSAS WESLEYAN UNIVERSITY	NONE	PUBLIC	ARTIST IN RESIDENCE PROGRAM	
SALINA, KS 67401		 		7,000
SUNFLOWER ADULT DAY SERVICES SALINA, KS 67401	NONE	PUBLIC	FOR USE IN CHARITABLE	50
Salina, no 07401		 	-	
			-	
Total from continuation sheets		L		

	ST ON SAVING	S AND TEMPO	RARY	CASH :	INVESTMENTS	STATEMENT 1
SOURCE		(A) REVENU PER BOO			(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME
BENNINGTON STATE BA			492.		492.	492.
HALEY ASSOCIATES LT PARTNERSHIP HALEY COMMUNITIES L			1.		1.	1.
PARTNERSHIP HALEY COMMUNITIES L			14.		14.	14.
PARTNERSHIP	110		55.		55.	55.
STATE OF ILLINOIS			1.		1.	1.
US TREASURY			55.		55.	55.
TOTAL TO PART I, LI	NE 3		618.		618.	618.
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS		(A) EVENUE R BOOK		
SOURCE GREAT PLAINS EQUITY FUND MIDWEST TRUST		GAINS	PE	EVENUE	NET INVES MENT INCO	OT- ADJUSTED NET INCOME
GREAT PLAINS EQUITY FUND	AMOUNT 901.	GAINS DIVIDENDS	PE	EVENUE R BOOK	NET INVES MENT INCO 1. 90 3. 17,37	OHE NET INCOME 01. 901. 73. 17,373.
GREAT PLAINS EQUITY FUND MIDWEST TRUST	901. 17,373. 18,274.	GAINS DIVIDENDS 0	PE	90: 17,37	NET INVES MENT INCO 1. 90 3. 17,37	OHE NET INCOME 01. 901. 73. 17,373.
GREAT PLAINS EQUITY FUND MIDWEST TRUST TO PART I, LINE 4	901. 17,373. 18,274.	GAINS DIVIDENDS 0	PE	90: 17,37	NET INVES MENT INCO 1. 90 3. 17,37	OHE NET INCOME 11. 901. 173. 17,373. 18,274.
GREAT PLAINS EQUITY FUND MIDWEST TRUST TO PART I, LINE 4 FORM 990-PF	AMOUNT 901. 17,373. 18,274. F PROPERTY CLATES LTD F	GAINS DIVIDENDS 0 0 RENTAL INCO	PEI	90: 17,37	NET INVES MENT INCO 1. 90 3. 17,37 4. 18,27	ST- ADJUSTED OME NET INCOME 11. 901. 73. 17,373. 74. 18,274. STATEMENT 3

FORM 990-PF	OTHER I	INCOME		STATEMENT 4
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	
ROYALTY PAYMENTS	_	8,644.	8,644.	8,644.
SECT 1231 GAIN FROM HALEY ASSOCIATES LTD PARTNERSHIP K-		69,907.	3,665.	69,907.
ORDINARY BUSINESS INCOME FROM ASSOCIATES LTD PARTNERSHIP K-	1	397.	397.	397.
OTHER INCOME FROM HALEY ASSOC LTD PARTNERSHIP K-1 STATE REFUNDS	TATES	<4.3 807.	<4. 0.	
TOTAL TO FORM 990-PF, PART I,	LINE 11	79,751.	12,702.	79,751.
FORM 990-PF	ACCOUNT	ING FEES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
ACCOUNTING AND LEGAL	8,445	8,445	8,445	ō. 0.
TO FORM 990-PF, PG 1, LN 16B	8,445	8,445	8,445	0.
FORM 990-PF O	THER PROFES	SSIONAL FEES		STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
INVESTMENT FEES	6,439	6,439	6,439	0.
TO FORM 990-PF, PG 1, LN 16C	6,439	6,439	6,439	0.
			= =====================================	======================================

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE				(D) HARITA PURPOS	
PROPERTY TAXES FEDERAL TAXES OTHER TAXES	840. 106,039. 6,167.		840. 0. 0.		0.		0.
TO FORM 990-PF, PG 1, LN 18 =	113,046.		840.	7,00	7.		0.
FORM 990-PF	OTHER E	XPENSES			STATI	EMENT	8
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC				(D) HARITA PURPOS	
ADMINISTRATIVE EXPENSE FROM K-1 HALEY ASSOCIATES LTD PARTNERSHIP K-1	21.		0.		0.	-	0.
TO FORM 990-PF, PG 1, LN 23	21.		0.		0.		0.
FORM 990-PF	CORPORAT	E STOCK			STAT	EMENT	9
DESCRIPTION			вос	OK VALUE		MARKE ALUE	T
CORPORATE STOCKS		-		2,935,007.	3	,525,6	38.
TOTAL TO FORM 990-PF, PART II	, LINE 10B	=		2,935,007.	3	,525,6	38.
FORM 990-PF	OTHER INV	ESTMENTS			STAT	EMENT	10
DESCRIPTION		LUATION ETHOD	вос	OK VALUE		MARKE ALUE	T.
LIMITED PARTNERSHIPS		COST		490,149.		490,1	49.
	, LINE 13	-		490,149.			49.

FORM 990-PF	OTHER ASSETS		STATEMENT	11
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKE VALUE	Т
OVERRIDING ROYALTY INTEREST	25,996.	25,996.	25,9	96.
TO FORM 990-PF, PART II, LINE 15	25,996.	25,996.	25,9	96.
FORM 990-PF EXPLANATION CONCER	MINO DADO VITTA	T TATE OD	COS DELCES	1 2
FORM 990 DE EVEL ANAMION CONCER	NITNO DADE VITTA	I TNE OD		1.0
EXPLANATION CONCER	NING PART VII-A	TINE OB	STATEMENT	12
EXPLANATION	NING PARI VII-A	LINE OB	STATEMENT	
	NING PARI VII-A	, LINE OB	STATEMENT	

NAME OF MANAGER

ROGER MORRISON RICHARD MORRISON