Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

For Paperwork Reduction Act Notice, see instructions.

▶ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990PF for instructions and the latest information.

Open to Public Inspection

Fo	or caler	ndar year 2017 or tax year beginning		2017, a	and e	nding		, 20
		pundation	 			A Employe	r identification numl	per
.IA	YLOR I	MORRISON FOUNDATION					81-3940705	;
		nd street (or P O box number if mail is not delivered to street address)	F	Room/sur	te	B Telephon	e number (see instruc	
49	00 N SC	COTTSDALE RD		2000	, [480-840-810	0 1
		rn, state or province, country, and ZIP or foreign postal code	I			C. If exempt	ion application is pen	
90	OTTOD	ALE, AZ 85251				• II CAOIII PI	ion application to port	Carrier Color Color Color
		k all that apply: Initial return Initial return	of a former pu	iblic ch	arıtv	D 1 Foreign	n organizations, checl	k here ▶□
_	011001	Final return Amended			ار	•	-	_
		☐ Address change ☐ Name char			_		n organizations meetii here and attach comp	
H	Check	k type of organization: Section 501(c)(3) exempt p		ion()			foundation status was	
 —		on 4947(a)(1) nonexempt charitable trust				section 5	07(b)(1)(A), check her	▶ □
무		narket value of all assets at J Accounting method						
•		if year (from Part II, col. (c),					ndation is in a 60-mor ction 507(b)(1)(B), che	
		6) ► \$ 290,034 (Part I, column (d) must be	on cash basis)					
	Part I							(d) Disbursements
_	arti	amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue ar expenses per			investment	(c) Adjusted net	for chantable
		the amounts in column (a) (see instructions))	books		ın	come	income	purposes (cash basis only)
(–	1	Contributions, gifts, grants, etc., received (attach schedule)	404	,214				1
	2	Check ► I if the foundation is not required to attach Sch B	494	,4 14				
	3	Interest on savings and temporary cash investments		87		87		+
	4	Dividends and interest from securities		- 67		01		
	5a	Gross rents		-				+
	1 .			-		-		100
4	b	Net rental income or (loss)					\\\\	
Ž	6a	Net gain or (loss) from sale of assets not on line 10		-				B (S)
Revenue	b	Gross sales price for all assets on line 6a					(X)	
ě	7	Capital gain net income (from Part IV, line 2)						
	1 -	Net short-term capital gain					A	
<u>'</u>	9	Income modifications					10	
<u>.</u>	10a	Gross sales less returns and allowances					12	
- -	Ь	Less: Cost of goods sold .					12/1	7
	C	Gross profit or (loss) (attach schedule)					1200	
5	11	Other income (attach schedule)	40.0					
≤ -	12	Total. Add lines 1 through 11	494	,301		87	•	!
M ΔR	13	Compensation of officers, directors, trustees, etc.						
•	14	Other employee salaries and wages			_		·	
	15	Pension plans, employee benefits						
1 ox	16a	Legal fees (attach schedule)				-		.
(C) (n)	D	Accounting fees (attach schedule)						_
	_ C	Other professional fees (attach schedule)			_			
tra	17	Interest						
nis	18	Taxes (attach schedule) (see instructions)						
Ē	19	Depreciation (attach schedule) and depletion .		_				
Ď	20	Occupancy						
9	21	Travel, conferences, and meetings	ļ				–	
6) Operating and Administrative	22	Printing and publications						
5	23	Other expenses (attach schedule) STATEMENT 1		517				<u> </u>
ij	24	Total operating and administrative expenses.						
er		Add lines 13 through 23		517		0		
å	25	Contributions, gifts, grants paid		,750				203,750
_	26	Total expenses and disbursements. Add lines 24 and 25	204	,267		0		203,750
	27	Subtract line 26 from line 12.	<u> </u>					
	a	•	290	,034				
	b	, , ,				87		<u> </u>
_	_	Adjusted net income (if negative, enter -0-) .						
Fo	r Paper	work Reduction Act Notice, see instructions.	C	at No 11	1289X		F	orm 990-PF (2017)



26	rt II	Rolance Shoots Attached schedules and amounts in the description column	Beginning of year	End o	f year
Ρē		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash-non-interest-bearing		290,034	290,034
	2	Savings and temporary cash investments	_		
	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 ▶			
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—US and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	С	Investments—corporate bonds (attach schedule)	···		
	11	Investments—land, buildings, and equipment. basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers-see the			
		ınstructions. Also, see page 1, item l)	0	290,034	290,034
	17	Accounts payable and accrued expenses			
s	18	Grants payable			
Ę	19	Deferred revenue			
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe ►)			
	23	Other liabilities (describe ►) Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here ▶ □	0	0	
Ś					
Balances		and complete lines 24 through 26, and lines 30 and 31.			
au	24	Unrestricted			
Ba	25	Temporarily restricted			
ᅙ	26	Permanently restricted			
Net Assets or Fund		Foundations that do not follow SFAS 117, check here ▶ ☑	ı		
<u></u>		and complete lines 27 through 31.			
S	27	Capital stock, trust principal, or current funds			
šet	28	Paid-in or capital surplus, or land, bldg., and equipment fund		200 024	
Ąŝ	29	Retained earnings, accumulated income, endowment, or other funds		290,034	
¥	30 31	Total net assets or fund balances (see instructions) Total liabilities and net assets/fund balances (see	0	290,034	1
ž	3	instructions)	0	290,034	1 - -
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances		200,004	
		I net assets or fund balances at beginning of year—Part II, colui	mn (a), line 30 (mus	at agree with	
		of-year figure reported on prior year's return)		1	0
2		r amount from Part I, line 27a		2	290,034
3		er increases not included in line 2 (itemize)			0
		lines 1, 2, and 3		4	290,034
					0
6	Tota	reases not included in line 2 (itemize) I net assets or fund balances at end of year (line 4 minus line 5)—I	Part II, column (b), li	ne 30 . 6	290,034
					Form QQD-DF (2017)

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Part	IV Capital Gains and	Losses for Tax on Investm	nent Income			
	(a) List and describe the kind(s) of property sold (for example, real estate, 2-story bnck 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)
1a						
b_						
<u>c</u>						_
<u>d</u>			<u>.</u> .			
e	(a) Grana palan prina	(f) Depreciation allowed	(g) Cost or	other basis	(h) Ga	n or (loss)
	(e) Gross sales price	(or allowable)	plus expe	nse of sale	((e) plus	f) minus (g))
<u>a</u>		- ·				
<u>b</u>						
c d						
e						
	Complete only for assets show	wing gain in column (h) and owned	by the foundation	on 12/31/69		I (h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any		t less than -0-) or rom col (h))
а						
b			_			
c			_			
<u>u</u>			-			
	Conital ages not magnes or	(net espital lass) If gain,	also enter in Pa	rt I, line 7		
2	Capital gain net income or	(net capital loss) { If (loss)	, enter -0- ın Pa	rt I, line 7 ∫	2	
3	If gain, also enter in Part	n or (loss) as defined in sections I, line 8, column (c). See instru	ctions If (loss)		3	
Part	·	er Section 4940(e) for Redu		let Investment		
		vate foundations subject to the				<u> </u>
	- -					
	ion 4940(d)(2) applies, leave					
		section 4942 tax on the distribu ualify under section 4940(e) Do			base period?	☐ Yes 🗹 No
1		unt in each column for each yea			aking any entries	
<u> </u>	(a)	(b)		(c)		(d)
Cale	Base period years andar year (or tax year beginning in)	Advicted avaliture distribution	s Net value o	f noncharitable-use a		tribution ratio divided by col (c))
	2016		0		0	0
	2015					
	2014					
	2013					
	2012					
•					2	
2 3	Total of line 1, column (d)	for the 5-year base period—div	 ude the total on	 .line 2 by 5 0 o		
3		oundation has been in existence			. 3	
			,		-	
4	Enter the net value of none	charitable-use assets for 2017 f	rom Part X, line	5	4	162,71
5	Multiply line 4 by line 3				. 5	
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)		6	<u>. </u>
7	Add lines 5 and 6				7	<u></u>
8		ns from Part XII, line 4			. 8	203,750
	If line 8 is equal to or great	ter than line 7, check the box in	n Part VI, line 1t	o, and complete	that part using a	170 tax rate See the

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	7 7 7 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	- !					
Part		e instr	uctio	/IS)			
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		0	├─			
_	here \triangleright and enter 1% of Part I, line 27b						
С	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-) Add lines 1 and 2			-			
3	Add lines 1 and 2		0	-			
4	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		0	 			
5							
6	Credits/Payments. 2017 estimated tax payments and 2016 overpayment credited to 2017 6a 0						
a	Exempt foreign organizations—tax withheld at source 6b 0						
b	Tax paid with application for extension of time to file (Form 8868) . 6c 0						
c d	Backup withholding erroneously withheld 6d 0						
7	Total credits and payments Add lines 6a through 6d			 			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached						
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		0	<u> </u>			
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 2018 estimated tax ▶ Refunded ▶ 11						
	VII-A Statements Regarding Activities						
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	it	Yes	No			
	participate or intervene in any political campaign?	1a		~			
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	e					
	instructions for the definition	1b		~			
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materia	s	T				
	published or distributed by the foundation in connection with the activities.		<u> </u>				
С	Did the foundation file Form 1120-POL for this year?						
d							
	(1) On the foundation ▶ \$ (2) On foundation managers. ▶ \$	_					
е	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?	2	↓	~			
	If "Yes," attach a detailed description of the activities		1				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles		-				
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	 	V			
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	+	~			
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	+	 			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	+				
	If "Yes," attach the statement required by General Instruction T.		İ				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:						
	By language in the governing instrument, or By language in the governing instrument in the governing in the						
	• By state legislation that effectively amends the governing instrument so that no mandatory directions the			-			
_	conflict with the state law remain in the governing instrument?	, 6	V	 			
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part X	V 7	-	├—			
8a	Enter the states to which the foundation reports or with which it is registered. See instructions						
1.	AZ, CA, CO, FL, GA, NC, TX If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General						
þ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General for designed by General Instruction C2 If "No." of each state or required by General Instruction C2 If "No." of each state or required by General Instruction C2 If "No." of each state or required by General Instruction C2 If "No." of each state or required by General Instruction C2 If "No." of each state or required by General Instruction C2 If "No." of each state or required by General Instruction C2 If "No." of each state or required by General Instruction C2 If "No." of each state or required by General Instruction C2 If "No." of each state or required by General Instruction C2 If "No." of each state or required by General Instruction C2 If "No." of each state or required by General Instruction C2 If "No." of each state or required by General Instruction C2 If "No." of each state or required by General Instruction C2 If "No." of each state or required by General Instruction C2 If "No." of each state or required by General Instruction C2 If "No." of each state or required by General Instruction C2 If "No." of each state or required by General Instruction C2 If "No." of each state or required by General Instruction C2 If "No." or required by General Instruction C2 I	al					
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation		<u> </u>	-			
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) of the contraction of the section 4942(j)(3) of the section 4942(j)(j) of the section 4942(j)(j) of the section 4942(j)(j) of the section 4942(j)(j) of the section 4942(j) of the s						
	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes			1.			
40	complete Part XIV	9	+-	-			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing the		ار.				
	names and addresses	10	1	1			

Part	VII-A Statements Regarding Activities (continued)						
		<u> </u>	Yes	No			
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		~			
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		~			
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?						
	Website address ► N/A		1				
14		80-840	8100				
	Located at ▶ 4900 N. SCOTTSDALE RD., STE 2000, SCOTTSDALE, AZ ZIP+4 ▶	8525	31				
15		· · · ·	•	▶ □			
	and enter the amount of tax-exempt interest received or accrued during the year 15						
16	At any time during calendar year 2017, 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?	16	<u> </u>	~			
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of	f]					
	the foreign country ▶			\Box			
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required		1 2/				
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No			
1a	During the year, did the foundation (either directly or indirectly):	1	1				
	(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?	ŀ					
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?						
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . Yes No	ı					
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			i I			
	the benefit or use of a disqualified person)?						
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	ľ					
	foundation agreed to make a grant to or to employ the official for a period after	ŀ					
	termination of government service, if terminating within 90 days.)						
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		<u> </u>				
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	ļ	 			
_	Organizations relying on a current notice regarding disaster assistance, check here $\cdot \cdot]			
С	were not corrected before the first day of the tax year beginning in 2017?	1c	├─	-			
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	10		 			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))·						
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and						
	6e, Part XIII) for tax year(s) beginning before 2017?						
_	If "Yes," list the years ▶ 20, 20, 20, 20 Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	-					
D	(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	 				
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		1				
	▶ 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?						
ь	If "Yes," did it have excess business holdings in 2017 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		ļ				
4	foundation had excess business holdings in 2017)	3b	-	 . ,			
4a b	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4a	 				
D	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b	├─	-			
		1 10	1	ــــــــــــــــــــــــــــــــــــــ			

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Part	VII-B	Statements Regarding Activities	for W	hich Form	4720	May Be R	equire	d (contir	nued)			
5a	During t	the year, did the foundation pay or incur a	any am	ount to							Yes	No
	(1) Carr	y on propaganda, or otherwise attempt to	o influe	nce legislation	on (sect	ion 4945(e))?	☐ Yes	✓ No			1
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on,											1
	dire	ctly or indirectly, any voter registration dri	ve?					☐ Yes	✓ No	[
	(3) Prov	vide a grant to an individual for travel, stu-	dy, or d	other similar i	purpose	es?		☐ Yes	✓ No			
	(4) Prov	vide a grant to an organization other than	a cha	ritable, etc.,	organız	ation desc	ribed in					
	sect	ion 4945(d)(4)(A)? See instructions .						Yes	✓ No			
	(5) Prov	vide for any purpose other than religious,	charita	able, scientifi	c, litera	ary, or educ	cational			ŀ		
		poses, or for the prevention of cruelty to o						_	✓ No	ŀ		
b												
	Regulat	ions section 53.4945 or in a current notice	regardı	ng disaster as	ssistand	e? See inst	ructions		•	5b	_	
		ations relying on a current notice regardii					•		▶ □			
С		nswer is "Yes" to question 5a(4), does t								İ		
		e it maintained expenditure responsibility		_				☐ Yes	☐ No			
_		attach the statement required by Regula										
6a		foundation, during the year, receive any		·=			emiums					
								∐ Yes	_ ✓ No			بـ
b		foundation, during the year, pay premium	ns, dire	ctly or indire	ctly, on	a personal	penefit	contract		6b		
7-		to 6b, file Form 8870.	nortu (to a probibitor	t tay ch	oltar transac	stion?	☐Yes	₽ No			
		me during the tax year, was the foundation a " did the foundation receive any proceeds						_		7b		
	VIII	Information About Officers, Direct									ees.	
		and Contractors	, .	,			,	J		•	•	
1	List all	officers, directors, trustees, and found	ation r	nanagers ar	d their	compens	ation. S	ee instru	ctions			
		(a) Name and address		e, and average rs per week		mpensation not paid,		Contributions		(e) Expe		
		(a) Name and address		ed to position		ter -0-)		erred compe		other	allowan	ces
SEE S	TATEME	NT 2			<u> </u>							
					ļ		_		_			
							_	<u> </u>				
2	Compe	nsation of five highest-paid employee	es (oth	er than tho	se incl	uded on li	ne 1—	see instr	uctions	s). If n	one.	enter
_	"NONE		.5 (0111	Ci tildii tilo	JC 11101	uucu o				.,	····-,	
				(h) Talo and a				(d) Contribu	utions to			
	(a) Name a	nd address of each employee paid more than \$50,00	0	(b) Title, and a	veek "	(c) Compe	nsation	employee plans and o		(e) Expe	nse ace allowar	
				devoted to p	osition			compens	sation			
NONE							-					
						_		l				
			-]						
	·											
		· <u>- · · - · · </u>				_						
- -	· 											
Total	number	of other employees paid over \$50,000 .						· · ·			0	
		o. cc. chipicycoc paid over 400,000 .				•	<u> </u>			- 00	A DE	(0017)

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid En and Contractors (continued)	nployees,
3 Five	highest-paid independent contractors for professional services. See instructions. If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
· · · · · · · · · · · · · · · · · · ·		
Total numb	er of others receiving over \$50,000 for professional services	0
Part IX-A	Summary of Direct Charitable Activities	
List the fou	undation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ins and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 NONE		
2		
3		
4		
B . IV B		
Part IX-B	Summary of Program-Related Investments (see instructions) le two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE		Amount
I NONE		
2		
All other pr	ogram-related investments. See instructions	<u> </u>
3		
T-4-1 A-1 !		-
i otal. Add	lines 1 through 3	5 000 DE (004)
		Form 990-PF (20

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Part	X Minimum Investment Return (All domestic foundations must complete this part. Forei	gn found	ations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes.		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	165,196
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	165,196
е	Reduction claimed for blockage or other factors reported on lines 1a and	!	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	165,196
4	Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	2,478
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	162,718
6	Minimum investment return. Enter 5% of line 5	6	8,136
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations, check here ► and do not complete this part.)	oundatio	าร
1	Minimum investment return from Part X, line 6	1	8,136
2a	Tax on investment income for 2017 from Part VI, line 5 2a		5,.55
b	Income tax for 2017 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	1
3	Distributable amount before adjustments Subtract line 2c from line 1	3	8,135
4	Recoveries of amounts treated as qualifying distributions	4	0,100
5	Add lines 3 and 4	5	8,135
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	8,135
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	203,750
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required) .	3a	0
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	203,750
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	1
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	203,741
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	a whether	
	qualifies for the section 4940(e) reduction of tax in those years.		

Part	XIII Undistributed Income (see instruction	ons)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2017 from Part XI,	Corpus	Years prior to 2016	2016	2017
	line 7			_	8,135
2	Undistributed income, if any, as of the end of 2017.				
а	Enter amount for 2016 only			0	
b	Total for prior years: 20 ,20 ,20			_ ` `	
3	Excess distributions carryover, if any, to 2017:	_			
а	From 2012				
b	From 2013				
c	From 2014				
d	From 2015				
e	From 2016				
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2017 from Part XII,				
•	line 4: ▶ \$ 203,750				
а	Applied to 2016, but not more than line 2a				
	Applied to undistributed income of prior years				
_	(Election required—see instructions)		0		ĺ
С	Treated as distributions out of corpus (Election				i
v	required—see instructions)	٥			1
d	Applied to 2017 distributable amount				8,135
e	Remaining amount distributed out of corpus	195,615			0,100
5	Excess distributions carryover applied to 2017	193,019			0
3	(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				
J	indicated below:				
•	Corpus. Add lines 3f, 4c, and 4e Subtract line 5	195,615			
a b	Prior years' undistributed income. Subtract	193,013			
_	line 4b from line 2b		0		
С	Enter the amount of prior years' undistributed				
C	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		0		
е	Undistributed income for 2016 Subtract line				
_	4a from line 2a Taxable amount—see				
	instructions			0	
f	Undistributed income for 2017. Subtract lines		-		
	4d and 5 from line 1. This amount must be				
	distributed in 2018				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				İ
	required—see instructions)				
8	Excess distributions carryover from 2012 not				
	applied on line 5 or line 7 (see instructions).				
9	Excess distributions carryover to 2018.				
	Subtract lines 7 and 8 from line 6a	195,615			
10	Analysis of line 9:	19,510			
а	Excess from 2013				
b	Excess from 2014				
c	Excess from 2015				
d	Excess from 2016				
e	Excess from 2017 195,615				

	90-FF (2017)					- rage 10
Part					9)	
1a	If the foundation has received a ruling			private operating		
	foundation, and the ruling is effective fo		_	. ▶		PLICABLE
b	Check box to indicate whether the four		e operating founda		ection 4942(j	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years	, _	(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
	each year listed			<u> </u>		
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					
е	Qualifying distributions made directly		-	-	1	
Ū	for active conduct of exempt activities.					
	Subtract line 2d from line 2c					:
3	Complete 3a, b, or c for the		-	<u> </u>	<i>II</i>	
	alternative test relied upon					
а	"Assets" alternative test—enter.					
	(1) Value of all assets					
	(2) Value of assets qualifying under		-			
	section 4942(j)(3)(B)(j) .	•				
b	"Endowment" alternative test-enter 2/3		 	1	-	
	of minimum investment return shown in					
_	Part X, line 6 for each year listed "Support" alternative test—enter		 	 -	_	
С	• •					
	(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					
D - 4	(4) Gross investment income .	(0 1 - 1 - 1		Also formadosional	had \$5,000 as as	l constant
Part				tne toundation	nad \$5,000 or m	iore in assets at
	any time during the year-		ns.)			
1	Information Regarding Foundation			04 - 645 - 4-4-1	A.u.b A. a. a. a. a. a. a. a. a. a.	
а	List any managers of the foundation					by the foundation
	before the close of any tax year (but o	only if they have c	contributed more t	nan \$5,000) (See	section 507 (d)(2).)	
N/A						
b	List any managers of the foundation					arge portion of the
	ownership of a partnership or other e	ntity) of which the	e toundation has a	or greater in	terest.	
N/A	_					
2	Information Regarding Contribution					
	Check here ▶ ☑ If the foundation	•				
	unsolicited requests for funds. If the f		s gitts, grants, etc	, to individuals or	organizations unde	er otner conditions,
	complete items 2a, b, c, and d See in					
а	The name, address, and telephone nu	imber or email ad	dress of the pers	on to whom applic	ations should be a	addressed
_						
b	The form in which applications should	t be submitted ar	nd information and	d materials they sh	ould include.	
С	Any submission deadlines:				-	
d	Any restrictions or limitations on av	vards, such as h	by geographical	areas, charitable f	ields, kinds of in	stitutions, or other
	factors					

Par	Supplementary Information (cont	tinued)			
3	Grants and Contributions Paid During	the Year or Approv	ed for Fut	ture Payment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient		<u> </u>
а	Paid during the year				
SEE A	TTACHMENT	NONE	PC		203,750
			ļ		
			ļ		
			ļ		
			1		
	,				
	•				
		,			
	Total			▶ 3a	203,750
b	Approved for future payment				200,700
_	, pp. 2. 22 . 2 2 2 2				
	•				
	Total	-	•	21	_

Pa	rt XVI	-A Analysis of Income-Producing Ac	tivities				
Ente	r gros	s amounts unless otherwise indicated.		isiness income	Excluded by section	on 512, 513, or 514	(e)
			(a)	(b)	(c)	(d)	Related or exempt
			Business code	Amount	Exclusion code	Amount	function income (See instructions)
1	Prog	ram service revenue.					(000 111011101101101101
	аď						
	b _	·					
	c -		-				
	d -			_			
	е –					-	
	, -					· -	
	' <u>=</u>						
	-	ees and contracts from government agencies			_		
2		bership dues and assessments				_	
3	Intere	est on savings and temporary cash investments	900099	0	14	87	
4	Divid	ends and interest from securities .					<u> </u>
5	Net r	ental income or (loss) from real estate:					
	a D	Debt-financed property					
	b N	lot debt-financed property					
6		rental income or (loss) from personal property		· <u> </u>			
7		r investment income					
8		or (loss) from sales of assets other than inventory					
9		ncome or (loss) from special events					
		s profit or (loss) from sales of inventory	·				
						- 	
• • •		r revenue: a	_				
	ь _						
	c _					-	
	d _						
	е _					· -	
	Subt	otal. Add columns (b), (d), and (e)		l o	l I	87	
					1		
13	Tota	I. Add line 12, columns (b), (d), and (e)				13	87
13 (See	Tota works	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation 	s.)				87
13 (See Pa	Tota works	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A 	s.) .ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Total works rt XV e No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A 	s.) .ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Tota works	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation 	s.) .ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Total works rt XV e No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A 	s.) .ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Total works rt XV e No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A 	s.) .ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Total works rt XV e No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A 	s.) .ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Total works rt XV e No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A 	s.) .ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Total works rt XV e No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A 	s.) .ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Total works rt XV e No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A 	s.) .ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Total works rt XV e No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A 	s.) .ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Total works rt XV e No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A 	s.) .ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Total works rt XV e No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A 	s.) .ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Total works rt XV e No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A 	s.) .ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Total works rt XV e No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A 	s.) .ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Total works rt XV e No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A 	s.) .ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Total works rt XV e No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A 	s.) .ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Total works rt XV e No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A 	s.) .ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Total works rt XV e No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A 	s.) .ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Total works rt XV e No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A 	s.) .ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Total works rt XV e No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A 	s.) .ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Total works rt XV e No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A 	s.) .ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Total works rt XV e No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A 	s.) .ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Total works rt XV e No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A 	s.) .ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Total works rt XV e No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A 	s.) .ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Total works rt XV e No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A 	s.) .ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Total works rt XV e No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A 	s.) .ccomplishm	ent of Exemp	t Purposes	13	
13 (See Pa	Total works rt XV e No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A 	s.) .ccomplishm	ent of Exemp	t Purposes	13	

	VVIII	Info	n Dogordina Tara	ofore to and Tran	cootions and I	Polotionali	oc With No.	nobaritabl	a Ev	-m-+
Part	XVII	Informatio Organizati		sfers to and Tran	sactions and i	Relationship	OS WILLI NO	пспагнарі	e Exe	mpt
1	Did t			engage in any of the	following with an	v other organ	nization desc	ribed	Yes	No
•	ın s			501(c)(3) organizati						-
а	Transfers from the reporting foundation to a noncharitable exempt organization of.									
-	· · · · · · · · · · · · · · · · · · ·							. 1a(1)	 -	~
		Other assets		. , ,	• • •	•		1a(2)	+	~
b								14(2)	+	
b	Other transactions.							. 1b(1)	1	
	(1) Sales of assets to a noncharitable exempt organization							1b(2)	1	~
						• • •	• •	. 1b(2)	-	~
				r assets				1b(4)	_	~
			rrangements.		• •	• • •		1b(5)		~
		_	arantees			• • •				~
_				nip or fundraising soli				. 1b(6)	+	~
C		-		sts, other assets, or p			 Should oliver	1	four m	L
d				s," complete the folloces given by the rep						
				ement, show in colur						
		(b) Amount involved		nantable exempt organizati		ription of transfe				
(a) Line	e no	(b) Amount involved	(c) Name of nonci	nantable exempt organizati	on (u) Desc	ription of transfe	rs, transactions,	and snamy an	angem	
										
								-		
				**						
			-			_				
				· · · · · · · · · · · · · · · · · · ·						
								<u> </u>		
				· —		<u> </u>				
			_	<u> </u>						
			_							
			L							
2a b	desc	ribed in section !		filiated with, or relate ction 501(c)(3)) or in :					s 🗹	No
	(a) Name of organization		(b) Type of organization			(c) Description o	f relationship			
					_					
-		•								
				ed this return, including according taxpayer) is based on all in				knowledge and	belief, r	t is true,
Sign Here)-	Ect, and complete Dec The state of officer or true	German	11/13/20	\ .	194 Office	,	lay the IRS disc of the preparer ee instructions	shown t	pelow?
	1 - 3	Print/Type prepare		Preparer's signature		Date		_ PTIN		
Paid		7,50,000,00		,			Check [self-emp	ıf		
Prep		Funda as a s				- 		,		
Use (Only						Firm's EIN ▶		_	
	Firm's address ▶ Phone no									

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

2017

Employer identification number

TAYLOR	R MORRISON FOUNDA	ATION	81-3940705				
	zation type (check or						
Filers of:		Section:					
Form 990 or 990-EZ		☐ 501(c)() (enter number) organization					
		4947(a)(1) nonexempt charitable trust not treated as a private for	undation				
		527 political organization					
Form 990-PF		✓ 501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundate	ation				
		501(c)(3) taxable private foundation					
	only a section 501(c)	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and the Gen	and a Special Rule. See				
Genera	l Rule						
V		filing Form 990, 990-EZ, or 990-PF that received, during the year, con property) from any one contributor. Complete Parts I and II. See instributions.					
Special	Rules						
	regulations under se 13, 16a, or 16b, and	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 3 ections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 9 d that received from any one contributor, during the year, total contribut f the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line	90 or 990-EZ), Part II, line utions of the greater of (1)				
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientifications, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and		s, charitable, scientific,					
contributor, during contributions totale during the year for General Rule appli		described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ the year, contributions exclusively for religious, charitable, etc., purposed more than \$1,000. If this box is checked, enter here the total contribution exclusively religious, charitable, etc., purpose. Don't complete any destroyers this organization because it received nonexclusively religious, charical during the year	ses, but no such utions that were received of the parts unless the				
		at isn't covered by the General Rule and/or the Special Rules doesn't f ust answer "No" on Part IV, line 2, of its Form 990; or check the box o					

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).

Name of organization

Employer identification number

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		
	TAYLOR MORRISON, INC 4900 N. SCOTTSDALE RD., STE 2000 SCOTTSDALE. AZ 85251	\$\$	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		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Moncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person		

Employer identification number

Part II	Noncash Property (see instructions). Use duplicate copies of Part 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			
		\$				
(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			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		\$				

Name of o	rganization			Employer identification number			
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 add	litional space is needed.					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) l	(d) Description of how gift is held			
		(e) Transfer of g		_			
	Transferee's name, address, and ZIP + 4		Relationship of	transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) l	Description of how gift is held			
-	(e) Transfer of gift						
-	Transferee's name, address, and ZIP + 4 Relation			transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d)	(d) Description of how gift is held			
+	(e) Transfer of gift						
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d)	Description of how gift is held			
Part I		(o) 030 0. gii.					
-							
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship			transferor to transferee			
Γ							
1							