Return of Private Foundation

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

OMB No 1545-0052 2017

Do not enter social security numbers on this form as it may be made public.

inter	nai Rever	nue Service ► Go to www.irs.gov/Fo	m990PF fc	or instructions	and the	he lates	t informati	on. Open	to Public Inspection
Fo	calen	ndar year 2017 or tax year beginning			, 2017	, and e	ending		, 20
Na	me of fo	undation					A Employe	r identification number	er
TO	<u>UCHST</u>	ONE FOUNDATION						86-1044393	
Nu	mber an	d street (or P O box number if mail is not delivered to stre	eet address)		Room/	suite	B Telephor	e number (see instruct	ons)
		/ER RD			10	00		520-202-4375	
Cit	y or tow	n, state or province, country, and ZIP or foreign postal co-	de				C If exempt	ion application is pend	ıng, check here ►
TU	CSON,	AZ 85718							
G	Check		nıtıal returr	of a former p	oublic (charity	D 1. Foreign	organizations, check	here ▶ 🗌
			Amended				2. Foreigi	n organizations meeting	the 85% test.
			Name cha		\triangle		check	here and attach compu	itation ► 🗌
Н		type of organization: Section 501(c)(3)						foundation status was 07(b)(1)(A), check here	terminated under
		on 4947(a)(1) nonexempt charitable trust 🔲			-		000	o (() () () () () () () () ()	٠.
ı		narket value of all assets at J Accounting	-	. 🗹 Cash I	☐ Āc	crual	F If the four	ndation is in a 60-mont	h termination
		f year (from Part II, col. (c),					under se	ction 507(b)(1)(B), check	k here ▶ 🔲
	line 16			on cash basis	i.)				· · · · · · · · · · · · · · · · · · ·
Ρ,	art I	Analysis of Revenue and Expenses (The to		(a) Revenue		(b) Net	investment	(c) Adjusted net	(d) Disbursements for charitable
		amounts in columns (b), (c), and (d) may not necessar the amounts in column (a) (see instructions))	ny equal	expenses p books	er		come	income	purposes (cash basis only)
_									(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach s		1	0,000				
	3	Check ► ☐ if the foundation is not required to atta							<u> </u>
	4	Interest on savings and temporary cash inventional desired control of the savings and interest from securities							
	5a	Gross rents	•						
ı	b	Net rental income or (loss)	• •						
) . (1)	6a	Net gain or (loss) from sale of assets not on	line 10						
2	ь	Gross sales price for all assets on line 6a					···		
Revenue	7	Capital gain net income (from Part IV, line 2)							
5 2	8	Net short-term capital gain							
	9	Income modifications				*			i
=	10a	Gross sales less returns and allowances					"		j
	ь	Less: Cost of goods sold							
<i>9</i> -5	С	Gross profit or (loss) (attach schedule) .							
ა	11	Other income (attach schedule)							
<u>ာ</u>	12	Total. Add lines 1 through 11		1	0,005			- 	
ာတ္က	13	Compensation of officers, directors, trustee							
JSe	14	Other employee salaries and wages							
Še	15	Pension plans, employee benefits		ļ ————————————————————————————————————					<u> </u>
Expenses	16a	Legal fees (attach schedule) FOENE	$\mathbf{D} \cdot \mathbf{A}$						
ē	b	Other protections of the control of	ان	<u> </u>	$- \rightarrow$				
ativ	17	Other professional fees (attach schedule) . MAY. 22.2018	IRS-OSC			 -			
str	17 18	Taxes (attach schedule) (see instructions)	18		\longrightarrow	_		 	
Ë	19	Depreciation (attach schedule) and depletts		 					
톶	20	Depreciation (attach schedule) and depletto Occupancy		\				······································	
Ĭ	21	Travel, conferences, and meetings							<u> </u>
Į	22	Printing and publications							
g a	23	Other expenses (attach schedule)							
Ë	24	Total operating and administrative ex							
Fra	Ì	Add lines 13 through 23			}			 	
Operating and Administrative	25	Contributions, gifts, grants paid		1	2,640				12,640
_	26	Total expenses and disbursements. Add lines 2	4 and 25		2,640				12,640
	27	Subtract line 26 from line 12:	-	ļ]
	a	Excess of revenue over expenses and disbur		(i	2,635)				
	b	Net investment income (If negative, enter-	•	<u> </u>					<u> </u>
	C	Adjusted net income (if negative, enter -0-)	ľ	ł				}

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form **990-PF** (2017)



1 Cash—non-interest-bearing 11,674 9,040 9,040 2 Savings and temporary cash investments 11,674 9,040 9,040 3 Accounts receivable Less: allowance for doubtful accounts ▶ 4 Pledges receivable Less: allowance for doubtful accounts ▶ 5 Grants receivable Less: allowance for doubtful accounts ▶ 1 Pledges receivable Less: allowance for doubtful accounts ▶ 2 Perceivables due from officers, directors, trustees, and other disqualified persons (attach schedule) Less: allowance for doubtful accounts ▶ 2 Prepaid expenses and deferred charges Prepaid expenses	Pa	ırt II	Ralance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	
1 Cash - non-interest-bearing 11,874 9,040 9,040			should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
A Accounts receivable ▶ Less, allowance for doubtful accounts ▶ Less, allowance for doubtful accounts ▶ Care and the state of the stat		1		11,674	9,040	9,040
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27 Capital stock, trust principal, or current funds	Ĕ					
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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3	Œ					
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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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3	ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
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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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3	Ž	30	Total net assets or fund balances (see instructions) .			
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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 11,674 2 Enter amount from Part I, line 27a 2 (2,635) 3 3 4 Add lines 1, 2, and 3 4 9,040 5 5	_		ınstructions)	11,674	9,040	
end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3	Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
2 Enter amount from Part I, line 27a 2 (2,635) 3 Other increases not included in line 2 (itemize) ▶ 3 4 Add lines 1, 2, and 3 4 9,040 5 Decreases not included in line 2 (itemize) ▶ 5	1	Tota	I net assets or fund balances at beginning of year-Part II, colui	mn (a), line 30 (mus	t agree with	
2 Enter amount from Part I, line 27a 2 (2,635) 3 Other increases not included in line 2 (itemize) ▶ 3 4 Add lines 1, 2, and 3 4 9,040 5 Decreases not included in line 2 (itemize) ▶ 5		end-	of-year figure reported on prior year's return)		1	11,674
3 Other increases not included in line 2 (itemize) ▶	2			•		
4 Add lines 1, 2, and 3	3	Othe				
5 Decreases not included in line 2 (itemize) > 5	4				4	9,040
6. Total and constant and halomans at and of year (land A sound by 5). Dot II and year (b) has 60	5	Deci	reases not included in line 2 (itemize) ▶		5	
	_6	Tota	Il net assets or fund balances at end of year (line 4 minus line 5)-I	Part II, column (b), lii	ne 30 6	9,040

		(s) of property sold (for example, real est e, or common stock, 200 shs MLC Co)	ate,	(b) How acquired P-Purchase D-Donation		te acquired , day, yr)	(d) Date sold (mo , day, yr)
<u>1a</u>							
<u>b</u>							
<u>c</u>				- 	ļ <u> </u>	<u>. </u>	
<u>d</u>							
<u>е</u>							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		er other basis ense of sale			in or (loss) (f) minus (g))
a							
<u>b</u>							
<u>c</u>							
d						<u></u>	
е	Complete only for coasts show	una gain in polyma (b) and award by	the foundation	n 10/21/60			
	Complete only for assets show	ing gain in column (h) and owned by			, ا		I (h) gain minus t less than -0-) or
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (i) I (j), if any			rom col (h))
<u>a</u>				<u>.</u>			
b							
<u> </u>				.			
<u>d</u>							
е			 		ļ		
2	Capital gain net income or (lso enter in Pa enter -0- in Pa		2		
3	If gain, also enter in Part I,	or (loss) as defined in sections 1 line 8, column (c). See instruc					
		<u> </u>			3 _		
Part		r Section 4940(e) for Reduct to the section 4940(e) for Reductions subject to the section for Reductions subject to the section for Reductions are section 4940(e) for Reduction for Red					
Was t	s," the foundation doesn't qu	ection 4942 tax on the distributa alify under section 4940(e). Do r	not complete	this part.	· _		☐ Yes ☐ No
1		nt in each column for each year	; see the instr	uctions before m	akıng a	ny entries	
Cale	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value	(c) of noncharitable-use a	ssets		(d) tribution ratio divided by col (c))
	2016	10,	639		NONE		NONE
	2015	6,	613		NONE		NONE
	2014	19,	800	<u></u>	NONE		NONE
	2013		175		NONE		NONE _
	2012	22,	222		NONE		NONE
2	Total of line 1, column (d)					2	NONE
3		or the 5-year base period—divid					
	the number of years the fou	indation has been in existence if	less than 5 y	ears	· -	3	NONE
4	Enter the net value of nonch	naritable-use assets for 2017 fro	m Part X, line	95 <i>.</i> .	.	4	NONE
5	Multiply line 4 by line 3 .				.	5	NONE
6	Enter 1% of net investment	income (1% of Part I, line 27b)			.	6	NONE
7	Add lines 5 and 6				.	7	NONE
8		s from Part XII, line 4				8	12,640
	Part VI instructions.	er than line 7, check the box in	raπ vi, line 1	b, and complete	іпат раі	it using a 1	1% tax rate. See the

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see	instr	uctio	ns)
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		NONE	
	here ▶ ☐ and enter 1% of Part I, line 27b		ъ,	
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-)		0	
3	Add lines 1 and 2		0	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		0	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 5		0	
6	Credits/Payments:	. ,	•	
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 6	,,,	Ç.	
b	Exempt foreign organizations—tax withheld at source 6b		÷.	
C	Tax paid with application for extension of time to file (Form 8868) . 6c		4:	. 1
d	Backup withholding erroneously withheld 6d	~		
7	Total credits and payments Add lines 6a through 6d		0	
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 ▶ 9		NONE	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10	!	NONE	
11	Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ Refunded ▶ 11		NONE	
Part				
та	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	<u></u>	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 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 materials published or distributed by the foundation in connection with the activities.			
	Did the foundation file Form 1120-POL for this year?	1c		✓
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 ▶ \$			
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? If "Yes," attach a detailed description of the activities.	2		<u> </u>
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? If "Yes," attach a conformed copy of the changes			
4-		3		
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		
ь 5	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.	5		
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 accorde the governor waste as that as well as the second of the governor waste as that as well as the second of the governor waste as			-
	• 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	/	
7 92	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 XV	7	1	
	Enter the states to which the foundation reports or with which it is registered. See instructions ► ARIZONA			
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 <i>General Instruction G?</i> If "No," attach explanation	8b	7	
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 2017 or the tax year beginning in 2017? See the instructions for Part XIV If "Yes," complete Part XIV	9		—-[
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		✓

Par	VII-A Statements Regarding Activities (continued)			
			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		1
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		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	1	
	Website address ► N/A	·		
14		20-202		
	Located at ► 1980 E RIVER RD, STE 100, TUCSON, AZ ZIP+4 ►	8571		
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			▶ □
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		Yes	No
	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 the foreign country ▶	T	:	
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.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	(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?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes		•	
	(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)?			
	(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.)			
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	1b		
_	Organizations relying on a current notice regarding disaster assistance, check here		ŀ	
С	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 2017?	1c		1
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)):			
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	ł		
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.)			
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	2b	-	
·	► 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?			
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or	ļ		
	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 2017.)	26		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	3b 4a	 -	1
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	70	 -	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		\

	1										
	00-PF (2017)	- fou \A	Osiala Farra	4700	M D - D		-1 / t			F	Page (
	VII-B Statements Regarding Activitie			4/20	мау ве н	equire	α (conτιι	iuea)		Yes	No
эа	During the year, did the foundation pay or incur (1) Carry on propaganda, or otherwise attempt (2) Influence the outcome of any specific public directly or indirectly, any voter registration directly.	to influe ic electi	ence legislatio	on 495		rry on,	☐ Yes	☑ No ☑ No		res ,	
	(3) Provide a grant to an individual for travel, sto(4) Provide a grant to an organization other that section 4945(d)(4)(A)? See instructions	n a cha	rıtable, etc.,	organız	ation descr	ibed in	☐ Yes	☑ No ☑ No) () }/ ()	
	(5) Provide for any purpose other than religious purposes, or for the prevention of cruelty to	childrer	or animals?				_ ∐Yes	✓ No	~		
b	If any answer is "Yes" to 5a(1)-(5), did any of th Regulations section 53 4945 or in a current notice							ibed in	5b		
С	Organizations relying on a current notice regard If the answer is "Yes" to question 5a(4), does because it maintained expenditure responsibility	the four	ndation claim	exemp		the tax		▶ □□ No			٠.
6a	If "Yes," attach the statement required by Regul Did the foundation, during the year, receive any on a personal benefit contract?	funds,		directly		miums	Yes	✓ No		,	
b	Did the foundation, during the year, pay premiur if "Yes" to 6b, file Form 8870.	ms, dıre	ctly or indire	ctly, on	a personal	benefit	contract	?	6b		✓
	At any time during the tax year, was the foundation If "Yes," did the foundation receive any proceed						Yes		7b		
	VIII Information About Officers, Direct and Contractors								mploy	ees,	
1	List all officers, directors, trustees, and found	dation r	nanagers ar	nd their	compensa	ation. S	ee instru	ictions			
	(a) Name and address	hou	e, and average rs per week ed to position	l i (If n	mpensation ot paid, ter -0-)	emplo	Contribution yee benefit erred compe	plans	(e) Expe	ense ace allowan	
CHAR	ES W. HORN										
	. RIVER RD, STE 100, TUCSON, AZ 85718 CIA A. HORN	PRES/1	TRES		NONE			NONE			NONE
1980 F	. RIVER RD, STE 100, TUCSON, AZ 85718	VP SE	CRETARY		NONE			NONE		ſ	NONE
	HEW C HORN	101,32	OKETAKI		HONE			110112			1011
	. RIVER RD, STE 100, TUCSON, AZ 85718	DIREC	TOR		NONE			NONE			NONE
	FER L. HORN	1		 							
1980 E	. RIVER RD, STE 100, TUCSON, AZ 85718	DIREC	ror		NONE			NONE		ſ	NONE
2	Compensation of five highest-paid employe "NONE."			se inclu		ne 1—s	see instr		s). If n		
((a) Name and address of each employee paid more than \$50,0	00	(b) Title, and a hours per v devoted to pe	veek	(c) Compen	sation	(d) Contribution (d) Co	benefit	(e) Expe	ense acc allowan	

(a) Name and address of each employee paid more than \$50,000

(b) Title, and average hours per week devoted to position

(c) Compensation

(d) Contributions to employee benefit plans and deferred compensation other allowances

(e) Expense account, other allowances

Total number of other employees paid over \$50,000

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 (c) Name and address of each person paid more than \$50,000 (d) Name and address of each person paid more than \$50,000 (e) Type of service (f) Compensation (e) Compensation (f) Name and address of each person paid more than \$50,000 (e) Type of service (f) Compensation (e) Compensation (f) Compensation (e) Compensation (f) Name and address of each person paid more than \$50,000 (e) Type of service (f) Compensation (e) Compensation (f) Compensation (e) Com	Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid	Employees,
(a) Name and address of each person pard more than \$50,000 (b) Type of service (c) Compensate ONE (c) Type of service (c) Compensate ONE (c) Type of service (c) Type	3 Five	and Contractors (CONTRUED) sighest-paid independent contractors for professional services. See instructions. If none, enter "NC	ONE."
Datal number of others receiving over \$50,000 for professional services	0 1140		
Expenses 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 beneficianes served, conferences convened, research papers produced, etc 1 N/A 2	IONE		
Expenses 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 beneficianes served, conferences convened, research papers produced, etc 1 N/A 2			
Expenses 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 beneficianes served, conferences convened, research papers produced, etc 1 N/A 2			
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Expenses 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 beneficianes served, conferences convened, research papers produced, etc 1 N/A 2			
Expenses 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 beneficianes served, conferences convened, research papers produced, etc 1 N/A 2			
Expenses 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 beneficianes served, conferences convened, research papers produced, etc 1 N/A 2			
Expenses 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 beneficianes served, conferences convened, research papers produced, etc 1 N/A 2			
Expenses 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 beneficianes served, conferences convened, research papers produced, etc 1 N/A 2	otal numbe	or of others receiving over \$50,000 for professional services	
List the foundation's four largest direct chantable 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 1		a of others receiving over 450,000 for professional services	
organizations and other beneficiaries served, conferences convened, research papers produced, etc 1 N/A 2	Part IX-A	Summary of Direct Charitable Activities	
2 3 4 Bart 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 NONE 2 All other program-related investments See instructions 3 NONE botal. Add lines 1 through 3.			of Expenses
2 3 4 Bart 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 NONE 2 All other program-related investments See instructions 3 NONE botal. Add lines 1 through 3.	1 N/A		
3			
3			
All other program-related investments See instructions All other program-related investments See instructions NONE All other program-related investments See instructions NONE All other program-related investments See instructions NONE All other program-related investments See instructions	2		
All other program-related investments See instructions All other program-related investments See instructions NONE All other program-related investments See instructions NONE All other program-related investments See instructions NONE All other program-related investments See instructions			. <u></u>
All other program-related investments See instructions All other program-related investments See instructions NONE All other program-related investments See instructions NONE All other program-related investments See instructions NONE All other program-related investments See instructions			
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 All other program-related investments See instructions NONE All other program-related investments See instructions NONE All other program-related investments See instructions	3		
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 All other program-related investments See instructions NONE All other program-related investments See instructions NONE All other program-related investments See instructions			
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 All other program-related investments See instructions NONE All other program-related investments See instructions NONE All other 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 NONE All other program-related investments See instructions NONE NONE All other program-related investments See instructions NONE Detail. Add lines 1 through 3	4		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount NONE All other program-related investments See instructions NONE NONE All other program-related investments See instructions NONE Detail. Add lines 1 through 3			·
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount NONE All other program-related investments See instructions NONE NONE All other program-related investments See instructions NONE Detail. Add lines 1 through 3	Part IX-B	Summary of Program-Related Investments (see instructions)	I
All other program-related investments See instructions 3 NONE Otal. Add lines 1 through 3			Amount
All other program-related investments See instructions 3 NONE Otal. Add lines 1 through 3	1 NONE		
All other program-related investments See instructions 3 NONE Otal. Add lines 1 through 3			·
All other program-related investments See instructions 3 NONE Otal. Add lines 1 through 3			
3 NONE	2		
3 NONE			
3 NONE			
otal. Add lines 1 through 3	=	gram-related investments. See instructions	
	3 NONE		
	otal Add I	nes 1 through 3	
	Jan. Add I	noo i anougho	

Part	X Minimum Investment Return (All domestic foundations must complete this part. Forei	ign found	lations,
	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	
b	Average of monthly cash balances	1b	
С	Fair market value of all other assets (see instructions)	10	NONE
d	Total (add lines 1a, b, and c)	1d	NONE
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	NONE
3	Subtract line 2 from line 1d	3	NONE
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see	1	
	ınstructions)	4	NONE
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5_	<u>N</u> ONE
6	Minimum investment return. Enter 5% of line 5	6_	NONE
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	ns
1	Minimum investment return from Part X, line 6	1	NONE
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.)		
C		2c	NONE
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	NONE
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	NONE
6 7	Deduction from distributable amount (see instructions)	6	NONE
	line 1	7	NONE
Parl	Qualifying Distributions (see instructions)		
==		(Secondary	
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	12,640
ь	Program-related investments—total from Part IX-B	1b	NONE
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
_	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	12,640
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	NONE
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	12,640
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculatin qualifies for the section 4940(e) reduction of tax in those years.	g whether	the foundation

² art	XIII Undistributed Income (see instruction	ns)			
1	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
^	line 7				NONE
2 a	Undistributed income, if any, as of the end of 2017: Enter amount for 2016 only		-	NONE	
b	Enter amount for 2016 only		NONE	NONE	
3	Excess distributions carryover, if any, to 2017:		NONE		
а	From 2012 NONE				
b	From 2013 NONE				
c	From 2014 NONE				
d	From 2015 NONE				
е	From 2016 NONE]			
f	Total of lines 3a through e	NONE			
4	Qualifying distributions for 2017 from Part XII,				
	line 4. ► \$12,640				
а	Applied to 2016, but not more than line 2a .			NONE	
b	Applied to undistributed income of prior years				
	(Election required—see instructions)		NONE		
С	Treated as distributions out of corpus (Election	İ			i
_	required—see instructions)	NONE			
d	Applied to 2017 distributable amount				NONE
е	Remaining amount distributed out of corpus	NONE			
5	Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same	NONE			NONE
	amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	NONE			
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b		NONE		
С	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		NONE		
u	amount—see instructions		NONE		
е	Undistributed income for 2016. Subtract line				
	4a from line 2a. Taxable amount-see				
	instructions			NONE	
f	Undistributed income for 2017. Subtract lines				
	4d and 5 from line 1. This amount must be distributed in 2018				
_	⊢				NONE
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)	NONE			
8	Excess distributions carryover from 2012 not	NONE			
-	applied on line 5 or line 7 (see instructions) .	NONE			
9	Excess distributions carryover to 2018.	NONE			
	Subtract lines 7 and 8 from line 6a	NONE			
0	Analysis of line 9.				
а	Excess from 2013 NONE				
b	Excess from 2014 NONE		1		
С	Excess from 2015 NONE				
d	Excess from 2016 NONE				
е	Excess from 2017 NONE				

Form 99	90-PF (2017)					Page 10
Part	XIV Private Operating Founda	tions (see instri	uctions and Part	VII-A. guestion 9	3)	
	If the foundation has received a ruling foundation, and the ruling is effective fo	or determination	letter that it is a			
b	Check box to indicate whether the four		-		ection	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years	3011011 1 10 12(1)	1 //
20	income from Part I or the minimum		(h) 2016	,	(4) 2014	(e) Total
	investment return from Part X for	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
	each year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII,					
	line 4 for each year listed		1			
ď	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					
е	Qualifying distributions made directly	1				
	for active conduct of exempt activities.		\			
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
•	alternative test relied upon.					1
_	·					l
а	"Assets" alternative test—enter					
	(1) Value of all assets		1	\		
	(2) Value of assets qualifying under					
_	section 4942(j)(3)(B)(i) "Endowment" alternative test—enter 2/3		 			
b	of minimum investment return shown in		1			
	Part X, line 6 for each year listed					
С	"Support" alternative test—enter					
	(1) Total support other than gross					
	investment income (interest, dividends, rents, payments on		}	\		
	securities loans (section		İ	,		ļ
	512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt					
	organizátions as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization		İ		`	
	(4) Gross investment income	<u> </u>	 			\
Part		n (Complete t	hie part only if t	he foundation b	ad \$5,000 or m	ore in accete at
rait	any time during the year-			ne roundation n	au \$5,000 01 111	ore in assets at
- 1			115.1			
' ,	Information Regarding Foundation List any managers of the foundation		utad mara than 20	K of the total cent	ributions received	by the foundation
a	before the close of any tax year (but of					by the loundation
		my in they have o	ontributed more tr	iaii 45,000). (See s	ection 507 (d)(2).)	
	LES & PATRICIA HORN	ha a 100/ a		-i f	- /	
b	List any managers of the foundation ownership of a partnership or other el					irge portion of the
	Ownership of a partitership of other el	nary) or willion the	, iouiiuauUii iias a	1070 Or greater int	6163L	
<u>N/A</u>						
2	Information Regarding Contribution					
	Check here ▶ ☐ if the foundation					
	unsolicited requests for funds. If the f		gitts, grants, etc.,	to individuals or o	rganizations unde	r other conditions,
	complete items 2a, b, c, and d. See in					
а	The name, address, and telephone nu	ımber or email ad	dress of the perso	n to whom applica	itions should be a	ddressed:
<u>N/A</u>			··			
b	The form in which applications should	d be submitted an	nd information and	materials they sho	uld include:	
N/A						
C	Any submission deadlines:				_ _	
N/A						
d	Any restrictions or limitations on av	vards, such as t	by geographical a	reas, charitable fi	elds, kinds of ins	stitutions, or other
	factors:					
N/A						
						Form 990-PF (2017)

_3 _3	Grants and Contributions Paid During t	he Year or Approve	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	contribution	1
a	Paid during the year				
SEE S	STATEMENT 2				
			'		
		}			1
			ļ		
	Total			▶ 3a	12,64
b	Approved for future payment				
		ł	}		1
					1
			ľ		
]		
	Total	<u> </u>	<u></u>	31	
	I OTAL			■ 21	- ·

nter gross amounts unless otherwise indicated		siness income	Excluded by secti	on 512, 513, or 51	4 (a)
J	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
1 Program service revenue:					<u> </u>
a					1
b					
<u> </u>	<u> </u>				
d			-		
			1		<u> </u>
Topo and contracts from government agencies			1		
g Fees and contracts from government agencies					-
2 Membership dues and assessments3 Interest on savings and temporary cash investments					
Interest on savings and temporary cash investmentsDividends and interest from securities	 		1		
` '			 		
a Debt-financed propertyb Not debt-financed property	 				-
and the second s					
Net rental income or (loss) from personal propertyOther investment income					
8 Gain or (loss) from sales of assets other than inventory	-		 		
9 Net income or (loss) from special events	 		<u> </u>		
10 Gross profit or (loss) from sales of inventory .			 		
11 Other revenue: a	-		-		
h				-	-
					-
d	-		-		
e					
12 Subtotal. Add columns (b), (d), and (e)					-
13 Total, Add line 12 columns (b) (d) and (e)				13	
				13	
See worksheet in line 13 instructions to verify calculation	ons)			13	
See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activities to the	ons) Accomplishm e	ent of Exemp	ot Purposes		importantly to the uctions)
See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activities to the	ons) Accomplishm e	ent of Exemp	ot Purposes		importantly to the uctions)
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exempt p	ons) Accomplishm e	ent of Exemp	ot Purposes		importantly to the uctions)
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exempt p	ons) Accomplishm e	ent of Exemp	ot Purposes		importantly to the uctions)
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Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exempt p	ons) Accomplishm e	ent of Exemp	ot Purposes		importantly to the uctions)
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exempt p	ons) Accomplishm e	ent of Exemp	ot Purposes		importantly to the uctions)
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Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exempt p	ons) Accomplishm e	ent of Exemp	ot Purposes		importantly to the uctions)
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exempt p	ons) Accomplishm e	ent of Exemp	ot Purposes		Importantly to the uctions)
Part XVI-B Relationship of Activities to the Line No. ▼ Explain below how each activity for which accomplishment of the foundation's exempt p	ons) Accomplishm e	ent of Exemp	ot Purposes		Importantly to the uctions)
Part XVI-B Relationship of Activities to the Line No. ▼ Explain below how each activity for which accomplishment of the foundation's exempt p	ons) Accomplishm e	ent of Exemp	ot Purposes		Importantly to the uctions)
Part XVI-B Relationship of Activities to the Line No. ▼ Explain below how each activity for which accomplishment of the foundation's exempt p	ons) Accomplishm e	ent of Exemp	ot Purposes		importantly to the uctions)

Part	XVII		n Regarding	Transfers	to and Tran	saction	ns and Re	elationshi	ps Wi	th No	onchar	itabl	e Exe	mpt
a b	Did the in secondarians (1) Ca (2) Other (1) Sa (2) Pt (3) Re (4) Re (5) Lo (6) Pe Sharir	Organization of ction 501(c) (or izations? fers from the repash	porting foundat a noncharitable of from a nonce, equipment, or rangements. arantees ervices or memory and porting foundat arantees ervices or memory arantees ervices or memory and porting foundat arantees ervices or memory and porting foundat arantees ervices or memory and porting foundat arantees ervices or memory and porting foundat arantees ervices or memory and porting foundat arantees ervices or memory and porting foundat arantees ervices or memory and porting foundat arantees ervices or memory and porting foundat arantees ervices or me	ectly engage trion 501(c)(ion to a noncommon common in any of the 3) organization chantable exe	following or or or or or or or or or or or or or	g with any in section of anization of the section o	other organ	nizatio	n desito po	cribed olitical	1a(1) 1a(2) 1b(1) 1b(2) 1b(3) 1b(4) 1b(5) 1b(6)	Yes	No	
	value	answer to any of the goods, or	ther assets, or	services give	en by the repo	orting fo	undation.	If the found	lation	receiv	ed less	than	faır m	narket
		in any transaction	 _											
(a) Line	no (t	Amount involved		noncharitable e	exempt organizati	on	(d) Descrip	otion of transfe	rs, trans	sactions	s, and sha	ring arr	angem	ents
	-		N/A		. — — — –									
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	descr	foundation direction 5 bed in section 5 s," complete the	501(c) (other the e following sche	an section 50		section		e tax-exem	• •		_	Yes	. Z	No
		, a,		+ -	(=, .,,=0 0, 0/9				,., _,	.,				
				-+										
				-+										
	Under	penalties of perjury, I	declare that I have e	xamined this retu	ım, including accor	npanying s	chedules and	statements, and	to the b	est of n	ny knowled	ige and	belief, i	ı ıs true,
Sign Here		ature of officer or true	Men	Iner than taxpaye	Date	N	SIDENT/TF	REASURER		- 1	May the If with the posterior	reparer	shown I	below?
	T 2.8.16			TBroose				Date	—т		Te	TIN	===	===
Paid	ļ	Print/Type preparer	i a ridirit	Frepar	er's signature			Date		Check		THN		
Prepa	arer	 						L		self-en	nployed			
Use (Firm's name ▶							Firm's	EIN ▶				
		Firm's address ▶							Phone	no				
											Fo	orm 9 9	0-PF	(2017)

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

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

Go to www.irs.gov/Form990 for the latest information.

Schedule of Contributors

OMB No 1545-0047

2017

Employer identification number Name of the organization **TOUCHSTONE FOUNDATION** 86-1044393 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 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. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions

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).

Schedule B (Form 990, 990-EZ, or 990-PF) (2017) **Employer identification number** Name of organization **TOUCHSTONE FOUNDATION** 86-1044393 Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (c) (d) (a) (b) Type of contribution **Total contributions** No. Name, address, and ZIP + 4 Person ☑ __1_ CHARLES & PATRICIA HORN EXEMPT TRUST Payroll Noncash 10,000 4400 W CUSH CANYON LOOP (Complete Part II for noncash contributions.) **MARANA, AZ 85658** (d) (a) (c) Type of contribution No. **Total contributions** Name, address, and ZIP + 4 Person Payroll Noncash (Complete Part II for noncash contributions) (d) (a) (b) (c) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person Payroli Noncash (Complete Part II for noncash contributions.) (d) (b) (c) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroli Noncash (Complete Part II for noncash contributions.) (b) (c) (d) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions) (d) (b) (c) (a) **Total contributions** Type of contribution No. Name, address, and ZIP + 4

Person

Payroll

Noncash (Complete Part II for noncash contributions.)

Employer identification number

TOUCHSTONE FOUNDATION 86-1044393 Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given **Date received** (See instructions.) Part I (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received (See instructions.) Part I (a) No. from (c) (d) FMV (or estimate) Description of noncash property given **Date received** Part I (See instructions.) (a) No. from (c) FMV (or estimate) (b) Description of noncash property given (d) **Date received** Part I (See instructions.) (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** (See instructions.) Part I

Schedule	R	(Form 990	990-F7	or 990-PF	120	17
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Page 4

Name of or	ganization			Employer Identification number						
TOUCHSTO	ONE FOUNDATION			86-1044393						
Part III	(10) that total more than \$1,000 fo	r the year from any ations completing Pa	one contributor. Int III, enter the tota	escribed in section 501(c)(7), (8), or Complete columns (a) through (e) and of exclusively religious, charitable, etc., ee instructions.)						
	Use duplicate copies of Part III if ad	ditional space is nee	ded.							
(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, a	ınd ZIP + 4	Relation	nship of transferor to transferee						
(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, a	ING ZIP + 4	Relation	nship of transferor to transferee						
(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, a	Relation	nship of transferor to transferee							
				••••••						
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held						
┌		(e) Trans	fer of gift	<u> </u>						
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee							
			l							

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TOUCHSTONE FOUNDATION

86-1044393

FORM 990-PF, PART 1: CONTRUBUTIONS	2016		
DESCRIPTION	PURPOSE OF GRANT		MOUNT
CHARLES & PATRICIA HORN EXEMPT TRUST 4400 W CUSH CANYON LOOP	VARIOUS		10,000.00
MARANA, AZ 85658 TOTAL CONTRIBUTION	DN, GIFTS, AND GRANTS RECEIVED	\$	10,000.00

Distributions for Twelve Months Ended December 31, 2017

DESCRIPTION	PURPOSE OF GRANT	AMOUNT
	/	
GOLF FORE AFRICA	CHARITABLE CONTRIBUTION	1,500.00
GOLF FORE AFRICA	CHARITABLE CONTRIBUTION	5,000.00
RONALD MCDONALD	CHARITABLE CONTRIBUTION	100.00
RONALD MCDONALD	CHARITABLE CONTRIBUTION	635.00
ARIZONA SONORA DESERT MUSUEM	CHARITABLE CONTRIBUTION	1,755.00
BRIDGEWAY CHRISTIAN	CHARITABLE CONTRIBUTION	100.00
EASTER SEALS	CHARITABLE CONTRIBUTION	1,000.00
UNIVERSITY OF ARIZONA FOUNDATION	CHARITABLE CONTRIBUTION	2,000.00
ANNA AND ETHAN MENTZ FUND	CHARITABLE CONTRIBUTION	500.00
VFW	CHARITABLE CONTRIBUTION	50.00
	TOTAL DISTRIBUTIONS	\$ 12,640.00