EXTENDED TO NOVEMBER 15, 2018 Return of Private Foundation

Form **990-PF** Department of the Treasury Internal Revenue Service

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

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

Go to www.irs.gov/Form990PF for instructions and the latest information.

and ending

OMB No. 1545-0052

For ca	alendar year 2017 or tax year beginning			, and ending		
Name	e of foundation				A Employer identification	on number
MA	AKING A DIFFERENCE	FOUNDA	TION		81-468077	0
170,000,000	per and street (or P.O. box number if mail is not del			Room/suite	B Telephone number	
PO	BOX 730				801930300	0
	or town, state or province, country, and ZIF	or foreign p	ostal code		C If exemption application is	pending, check here
	DVALE, UT 84047-0					
	eck all that apply: Initial return		Initial return of a for	mer public charity	D 1. Foreign organization	ns, check here
	Final return		Amended return			
	Address cha	ange	Name change		Foreign organizations recheck here and attach	neeting the 85% test, computation
H Che	eck type of organization: X Section	501(c)(3) ex	kempt private foundation		E If private foundation s	tatus was terminated
	Section 4947(a)(1) nonexempt charitable	trust	Other taxable private foundati	ion		1)(A), check here
	market value of all assets at end of year		ing method: X Cash	Accrual	F If the foundation is in a	a 60-month termination
	m Part II, col. (c), line 16)	o	ther (specify)			1)(B), check here
\$	412,385.	(Part I, colur	nn (d) must be on cash basis.	.)	1.11	
Par	t Analysis of Revenue and Expenses		(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
	(The total of amounts in columns (b), (c), and necessarily equal the amounts in column (a)).)	expenses per books	income	income	(cash basis only)
	1 Contributions, gifts, grants, etc., receiv	ved	455,500.		N/A	
	2 Check I if the foundation is not required to					
	3 Interest on savings and temporary cash investments		40.	40.		STATEMENT 1
	4 Dividends and interest from securities					
	5a Gross rents					
	b Net rental income or (loss)					
ne	6a Net gain or (loss) from sale of assets not on li b Gross sales price for all assets on line 6a	ne 10				
Revenue	7 Capital gain net income (from Part IV, line 2)			0.		
Re	8 Net short-term capital gain					
- 1	9 Income modifications			***************************************		
100	10a Gross sales less returns and allowances					
	b Less: Cost of goods sold	_				
	c Gross profit or (loss)					
- 1,	11 Other income					
	12 Total, Add lines 1 through 11		455,540.	40.		
-	13 Compensation of officers, directors, trustees		0.	0.		0.
	14 Other employee salaries and wages					
1	15 Pension plans, employee benefits					
ses 1	16a Legal fees					
ens	b Accounting fees					
Expenses	c Other professional fees					
	17 Interest			0. 10. 10. 10. 10. 10. 10. 10. 10. 10. 1		
=	18 Taxes					
1 st	19 Depreciation and depletion					
Ē 2	20 Occupancy					
Ad	21 Travel, conferences, and meetings					
pug 2	22 Printing and publications					
. B. 2	23 Other expenses					
atir	24 Total operating and administrative		6033	×20 4000 180 00000000000000000000000000000		
per	expenses. Add lines 13 through 23		0.	0.		0.
0 2	25 Contributions, gifts, grants paid		528,169.			528,169.
2	26 Total expenses and disbursements.					F00 160
	Add lines 24 and 25		528,169.	0.		528,169.
2	27 Subtract line 26 from line 12:					
	a Excess of revenue over expenses and disbut	rsements	-72,629.			
	b Net investment income (if negative, ent-			40.		4
	c Adjusted net income (if negative, enter-	0-)			N/A	

		Attached schedules a	nd amounts in the description	Beginning of year	End of ye	
Pa	art I	Balance Sheets Atlached schedules a column should be for	end-of-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value
Т	1	Cash - non-interest-bearing	***************************************	485,014.	412,385.	412,385.
- 1						
		Accounts receivable >				
		Less: allowance for doubtful accounts				
		Pledges receivable ▶				
		Less: allowance for doubtful accounts				
		40.74.2.23				
	_	Receivables due from officers, directors, tru				
		disqualified persons				
		Other notes and loans receivable				
	- 1	Less: allowance for doubtful accounts				
		Inventories for sale or use				
Assets		Prepaid expenses and deferred charges				
Ass		Investments - U.S. and state government of				
_			The state of the s			
		Investments - corporate stock	Action to the control of the control			
		Investments - corporate bonds				
	11	Investments - land, buildings, and equipment basis				
		Less, accumulated depreciation				
	12	Investments - mortgage loans	************************************			
	14	Land, buildings, and equipment; basis				
		Less: accumulated depreciation				
		Other assets (describe)			
	16	Total assets (to be completed by all filers -		405 014	412,385.	412,385.
		instructions. Also, see page 1, item I)		485,014.	412,303.	412,303.
		Accounts payable and accrued expenses				
	18	Grants payable				
S	19	Deferred revenue				
litie	20	Loans from officers, directors, trustees, and other of	isqualified persons			
Liabilities	21	Mortgages and other notes payable				
Ë	22	Other liabilities (describe)			
		ACCES 15-15-15-15-15-15-15-15-15-15-15-15-15-1				
	23	Total liabilities (add lines 17 through 22)	******************************	0.	0.	
-		Foundations that follow SFAS 117, check	here 🕨 X			
		and complete lines 24 through 26, and lin	es 30 and 31.		110 005	
es	24			485,014.	412,385.	
alances						
3al		Permanently restricted				
Net Assets or Fund B		Foundations that do not follow SFAS 117	check here 🔛			
Ē		and complete lines 27 through 31.				
ò	27	Capital stock, trust principal, or current fun	ds			
ets	28	Paid-in or capital surplus, or land, bldg., ar	d equipment fund			
Ass	29	Retained earnings, accumulated income, e				
et/	30	Total net assets or fund balances		485,014.	412,385.	
Z	100	Total not appoin of the particular and a second	4.11.0000000000000000000000000000000000			
	31	Total liabilities and net assets/fund bala	ices	485,014.	412,385.	
_	_			alances		
-	art					
1	Tota	I net assets or fund balances at beginning o	f year - Part II, column (a), line	30		485,014.
	(mu	st agree with end-of-year figure reported on	prior year's return)		1	-72,629.
2					2	- 12,029.
3		er increases not included in line 2 (itemize)			3	412,385.
4		lines 1, 2, and 3			4	0.
	Doc	reases not included in line 2 (itemize)			5	412,385.
6	Tota	al net assets or fund balances at end of year	(line 4 minus line 5) - Part II, co	olumn (b), line 30	6	Form 990-PF (2017)
-						FORM 990-PF (2017)

Part IV Capital Gains and Losses for Tax on Investment Income (a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)			(b) Hov P - P D - D	v acquired urchase onation	(c) Date acquir (mo., day, yr.		d) Date sold no., day, yr.)		
1a									
b NO	ΝE							_	
d d									
e e									
(e) Gross sales price	(f) [Depreciation allowed (or allowable)		st or other basis expense of sale			(h) Gain or ((e) plus (f) m		
a							*************		
b					_				
d d					-				
e			 						
Complete only for assets showing	g gain in	column (h) and owned by	the foundation	on 12/31/69.			(I) Gains (Col. (h)		
(i) FMV as of 12/31/69		(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (i) col. (j), if any		(col. (k), but not les Losses (from		or
a									
b									
c									
d			-		-				
e		C If well also enter	u in Dout I line	7	7				
2 Capital gain net income or (net ca	pital loss	If gain, also enter -	er in Part I, line D- in Part I, line	<i>7</i>	.	2			
3 Net short-term capital gain or (los		> 2 1							
If gain, also enter in Part I, line 8,			iid (o).		}				
If (loss) enter -0- in Part I, line 8						3			
Part V Qualification U						stment i	ncome		
If section 4940(d)(2) applies, leave the Mas the foundation liable for the sec If "Yes," the foundation doesn't quality. 1 Enter the appropriate amount in	tion 4942 fy under s	tax on the distributable al	mplete this par	t.		202.202.202.20			Yes X No
(a) Base period years Calendar year (or tax year beginni		(b) Adjusted qualifying di		Net value of no	(c)	ble-use ass	ets (col. ((d) Distribution b) divided t	y col. (c))
2016	3/		0.			477,72	25.		.00000
2015									
2014									
2013									- construction
2012									
2 Total of line 1, column (d)							2		.00000
3 Average distribution ratio for the	5-year ba	se period - divide the tota	on line 2 by 5.	0, or by the numb	er of yea	ars			
the foundation has been in existe							3		.00000
									158,804
4 Enter the net value of noncharital	ole-use as	sets for 2017 from Part X	, line 5				4		130,004
5 M 10 1 F - 11 - 10 - 0							5		0
5 Multiply line 4 by line 3									
6 Enter 1% of net investment incor	ne (1% of	f Part I, line 27b)					6		0
C Litter 170 of fict invocations area.									
7 Add lines 5 and 6				,			7		0
8 Enter qualifying distributions from	n Part XII	, line 4	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					ţ	528,169
If line 8 is equal to or greater that See the Part VI instructions.	n line 7, c	heck t <mark>h</mark> e box in Part VI, lir	e 1b, and com	plete that part usi	ng a 1%	tax rate.			

of each state as required by General Instruction G? If "No," attach explanation 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

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

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X

X

8b

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Pa	rt 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			v
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		_X_
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	10		х
	If "Yes," attach statement. See instructions	12	Х	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Λ	
	Website address ► N/A The books are in care of ► SHARON GORMAN Telephone no. ►801930	300	0	
14	Located at > 7259 S. BINGHAM JUNCTION BLVD., MIDVALE, UT ZIP+4 >84	047	-47	30
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		•	
15	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
10	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
Pa	irt 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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person:			
	(3) Furnish goods, Services, or lacinities to (or accept them from) a disquamed person.			
	(4) Pay compensation to, or pay or remburse the expenses of, a disquames person			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.) Yes X No			
	of 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 reparding disaster assistance? See instructions N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
(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?	10		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
;	a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning Yes X No			
	Delote 2017?			
	If "Yes," list the years ▶,,,,,,,,,,,,,,,,			
1	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.) N/A	2b		
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
3	a 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 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.)	3b	-	X
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	4b		x
	had not been removed from jeopardy before the first day of the tax year beginning in 2017?		0-PF	(2017)
	TO THE PARTY OF TH			10011)

81-4680770 Page 6 MAKING A DIFFERENCE FOUNDATION Form 990-PF (2017) Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required (continued) No Yes 5a During the year, did the foundation pay or incur any amount to: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 4945(d)(4)(A)? See instructions (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations 5b section 53.4945 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? N/A Yes If "Yes," attach the statement required by Regulations section 53.4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes X No X 6b b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? 7b Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and their compensation. (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances (b) Title, and average hours per week devoted to position (If not paid, enter -0-) (a) Name and address 0. 0. 0. SEE STATEMENT 3 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deferred (e) Expense account, other (b) Title, and average (c) Compensation (a) Name and address of each employee paid more than \$50,000 hours per week devoted to position allowances compensation NONE

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

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Pa		

Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	dation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, en	ter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		THE SAME THE
050,000 ()		D 0
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		0
	tistical information such as the	
List the foundation's four largest direct charitable activities during the tax year. Include relevant sta number of organizations and other beneficiaries served, conferences convened, research papers p	roduced, etc.	Expenses
27/2		
1 N/A		
<u></u>		
2		
3		
		40.00
4		
	12 10 10 10 10 10 10 10 10 10 10 10 10 10	
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
Total, Add lines 1 through 3	>	0.

Pa	Minimum Investment Return (All domestic foundations r	nust complete this part	. Foreign foundati	ons, see	instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitab	le, etc., purposes:			0
а	Average monthly fair market value of securities				0.
b	Average of monthly cash balances		1b		465,791.
С	Fair market value of all other assets		1c		165 701
d	Total (add lines 1a, b, and c)		1d		465,791.
е	Reduction claimed for blockage or other factors reported on lines 1a and				
	1c (attach detailed explanation)	1e	0.		0
2	Acquisition indebtedness applicable to line 1 assets		2	_	0.
3	Subtract line 2 from line 1d		3		465,791.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amoun	t, see instructions)	4		6,987.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and o	n Part V, line 4	5		458,804.
6	Minimum investment return. Enter 5% of line 5		6		22,940.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) a	ınd (j)(5) private operating	foundations and ce	rtain	
_	foreign organizations, check here and do not complete this part	:.)			
1	Minimum investment return from Part X, line 6		1		22,940.
	Tax on investment income for 2017 from Part VI, line 5	2a			
	Income tax for 2017. (This does not include the tax from Part VI.)				
	Add lines 2a and 2b		20	;	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1		3		22,940.
4	Recoveries of amounts treated as qualifying distributions				0.
5	Add lines 3 and 4			8	22,940.
6	Deduction from distributable amount (see instructions)		6		0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Par	t XIII, line 1	7		22,940.
_	art XII Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., pu	rposes:	1:		528,169.
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		1		0.
b	Program-related investments - total from Part IX-B			-	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charit	able, etc., purposes			
3	Amounts set aside for specific charitable projects that satisfy the:		١,		
a	Suitability test (prior IRS approval required)		3		
b	Cash distribution test (attach the required schedule)		3		528,169.
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8;	and Part XIII, line 4		-	320,103.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net in	vestment	1.	.	0.
	income, Enter 1% of Part I, line 27b			5	528,169.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		**************	6	
.50108	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years	when calculating whether	the foundation qual	ities for the	SECTION
	4940(e) reduction of tax in those years.				Form 990-PF (2017)
-					FORM MMU-PP (2011/1

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				22,940.
2 Undistributed income, if any, as of the end of 2017:				
a Enter amount for 2016 only			1,505.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2017:		0.		
a 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; ▶\$ 528,169.			1,505.	
a Applied to 2016, but not more than line 2a			1,303.	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	0.			
(Election required - see instructions)				22,940.
d Applied to 2017 distributable amount e Remaining amount distributed out of corpus	503,724.			
5 Excess distributions carryover applied to 2017	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a),)				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f. 4c, and 4e. Subtract line 5	503,724.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2016. Subtract line				
4a from line 2a. Taxable amount - see instr			0.	
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must				0.
be distributed in 2018				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	1			
section 170(b)(1)(F) or 4942(g)(3) (Election	0.			
may be required - see instructions)	U .			
8 Excess distributions carryover from 2012 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2018.				
Subtract lines 7 and 8 from line 6a	503,724.			
10 Analysis of line 9:			D	
a Excess from 2013				
b Excess from 2014				
c Excess from 2015				
d Excess from 2016				
e Excess from 2017 503,724.				Form 990-PF (2017)

81-4680770 Page 11 MAKING A DIFFERENCE FOUNDATION Form 990-PF (2017) Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year 501(C)(3) PAYMENT TO MATCH CHG UNITED WAY OF SALT LAKE CHARITABLE ORG. HEALTHCARE EMPLOYEES 257 EAST 200 SOUTH STE 300 DONATIONS. 240,302. SALT LAKE CITY, UT 84111 ASSISTANCE TO CANCER 501(C)(3) CANCER WELLNESS HOUSE CHARITABLE ORG. PATIENTS IN UTAH 59 S 1100 E 2,500. SALT LAKE CITY, UT 84102 501(C)(3) DONATION FOR UNDER BIG BROTHERS BIG SISTERS OF UTAH CHARITABLE ORG. PRIVILEGED CHILDREN OF 2121 S. STATE STREET STE 201 750. JTAH SALT LAKE CITY, UT 84115 DONATION TO PURCHASE 501(C)(3) THE UTAH FOOD BANK CHARITABLE ORG. FOOD FOR HOMELESS 3150 S 900 W 500. SALT LAKE CITY, UT 84119 FOR SUPPORT OF THE 501(C)(3) GRAND RAPIDS CHILDREN MUSEUM CHARITABLE ORG. LOCAL CHILDRENS MUSUEM 11 SHELDON AVE NE 2,500. GRAND RAPIDS, MI 49503 528,169. CONTINUATION SHEET(S) ➤ 3a SEE Total b Approved for future payment BUILD A 2ND MEDICAL 501(C)(3) ME TO WE CHARITABLE ORG. COLLEGE 145 BERKELEY ST. 100,000. TORONTO, ONTARIO, CANADA MS5A 1S9 2018 MEDICAL PROVIDERS 501(C)(3) ME TO WE CHARITABLE ORG. TO KENYA 145 BERKELEY ST. 36,900. TORONTO, ONTARIO, CANADA MS5A 1S9

▶ 3b

136,900.

Total

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Part XVI-A	Analysis of	Income-Producing	Activities
Fait AVEA	Milelyolo Us	mount roddonig	7.000,710,00

	Unrelated	business income	Excluded	by section 512, 513, or 514	(e)
nter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	Alunnin	code	RUIOBILL	intenal dicour
3					
b					
č					
d					
e-					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash-			1.4	40.	
investments			14	40.	
4 Dividerids and interest from securities	ļ				
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					· · · · · · · · · · · · · · · · · · ·
10 Gross profit or (loss) from sales of inventory	ļ				
1 Other revenue:					
a					
b					
£					
d					
0			5. 	40.	0
12 Subtotal, Addicolumns (b), (d), and (e)					40
13 Total. Add line 12, columns (b), (d), and (e)			,		7.0.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to	o the Acco	mplishment of	Exempt I	Purposes	
					unlighteeset of
Line No. Explain below how each activity for which income	me is reported in	column (e) of Part XV	I-A contributi	ed importantly to the accou	ipiisnotent oi
the foundation's exempt purposes (other than	ολ διωνισιμό μην	as for such purposes)	-		
		·			

Part XVII	Information Regarding	Transfers to and	Transactions and	Relationships \	With Noncharitable
	Exempt Organizations				

1					g with any other organization	n described in sectio	on 501(c)		Yes	NO
		n section 501(c)(3) organ from the reporting founda			to political organizations?					
a								1a(1)		X
								1a(2)		X
h	Other tran			****************						
•			ble exempt organiza	ation				1b(1)		X
					,			1b(2)		X
								1b(3)		X
	(4) Reim	bursement arrangements						1b(4)		X
	(5) Loan	s or loan guarantees			***************************************			1b(5)		X
					ns			1b(6)		X
C	Sharing o	f facilities, equipment, ma	iiling lists, ot <mark>her ass</mark>	ets, or paid emp	oloyees			1c		X
d	If the ansi	wer to any of the above is	"Yes," complete the	following sche	dule. Column (b) should alv	vays show the fair m	arket value of the goods, o	ther ass	ets,	
					ed less than fair market valu	e in any transaction	or snaring arrangement, si	now in		
		d) the value of the goods,	other assets, or ser	vices received.	exempt organization	(d) Description	of transfers, transactions, and s	haring an	rangeme	ents
(a)ı	ine no.	(b) Amount involved	(c) Name (exempt or gamzation	(u) Description	or transfers, transactions, and s	snamy an	angeme	
				N/A				_		_
-						100000000000000000000000000000000000000				
-			 							
-										
-	-									
								1000		
2a	Is the fou	ndation directly or indirec	ctly affiliated with, or	related to, one	or more tax-exempt organi	zations described		٦.,	T-0	No
				section 527?				Yes		IJ NO
b	If "Yes," o	omplete the following sch	nedule.		I my T d in-tion		(c) Description of relations	hin		
		(a) Name of or	ganization		(b) Type of organization		(c) Description of relations	ПР		
		N/A								
									= ***	
						-			111111111111111111111111111111111111111	
-	Linde	r penalties of periury. I declare	e that I have examined t	his return, includir	I ng accompanying schedules and	statements, and to the	best of my knowledge	y the IRS	diścuss	this
S	ign and t	pelief, it is true, correct, and co	mplete. Declaration of	preparer (other tha	in taxpayer) is based on all inform	nation of which preparer	has any knowledge. retu	urn with th	ne prepa	rer
	ere	MANA	TX T		11115/18	VP-TAX		Yes		No
	_	nature of officer or truste	(1)		Date	Title		-	_	
-		Print/Type preparer's n		Preparer's s	ignature	Date	Check if PTIN			
							self- employed			
P	aid									
P	reparer	Firm's name ▶					Firm's EIN ▶			
U	se Only									
		Firm's address ▶				15020				
							Phone no.		0.00	10017
							F	orm 99	U-PF	(201/)

3 Grants and Contributions Paid During the Y				
Recipient	If recipient is an Individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (nome or business)	or substantial contributor	récipient		
ATIONAL MULTIPLE SCHEROSIS SOCIETY		F 7 = 3 = 1 • " 1	SUPPORT LOCAL MS	
440 FOOTHILL DRIVE STE 200		CHARITABLE ORG.	PATIENTS	- 400
ALT LAKE CITY, UT 84108				2,000
		<u> </u> -		
JARC		501(C)(3)	SUPPORT GROUP HOMES	
30301 NW HIGHWAY, STE 100		CHARITABLE ORG.	FOR DISABLED	750
FARMINGTON HILLS, MI 46334				750
BEST FRIENDS ANIMAL SOCIETY - UTAH		501(C)(3)	SUPPORT LOCAL NO KILL	
2005 S 1100 E		CHARITABLE ORG.	SHELTER FOR ANIMALS	500
SALT LAKE CITY, UT 84166				
			DOMESTIC TOTAL	
NIDVALE ARTS COUNCIL		501(C)(3) CHARITABLE ORG.	DONATION FOR LOCAL	
698 W CENTER STREET		CHARITABLE ORG.	HRTS PROGRAMS	750
MIDVALE, UT 84047				
		501(C)(3)	FOR LOCAL SUICIDE	
THE REACH PROGRAM		1	PREVENTION FOR THE	
9425 S RIVERSIDE DR			YOUTH	1,000
SANDY, UT 84070				
PROMISE SOUTH SALT LAKE		501(C)(3)	TO SUPPORT GRASSROT	
220 E MORRIS AVE #200		CHARITABLE ORG	LEADERS TO IMPROVE QOL FOR RESIDENTS OF SOUTH	
SOUTH SALT LAKE, UT 84115			SALT LAKE	75
YOUTHLENC		501(C)(3)	SUPPORT YOUTH IN	
1140 BRICKYARD RD #76		CHARITABLE ORG	ENGAGING IN	
SALT LAKE CITY, UT 84106			HUMANITARIAN EFFORTS	75
THE CHILDREN'S CENTER		501(C)(3)	FO SUPPORT MENTAL	
350 S 400 E		CHARITABLE ORG	HEALTH OF CHILDREN OF	أمم س
SALT LAKE CITY, UT 84111			UTAH	1,00
			CHANGE FOR THE	
WOMENS LEADERSHIP INSTITUTE OF UTAH		501(C)(3)	SUPPORT WOMEN	
175 EAST UNIVERSTY BLVD STE 600		CHARITABLE ORG	LEADERSHIP IN LOCAL DRGANIZATIONS	1,00
SALT LAKE CITY, UT 84111			ONORTH ANTI-	-,,,,
		501(C)(3)	SUPPORT TEMP, HOMES	
FAMILIES MOVING FORWARD	1		FOR FAMILIES IN CRISIS	
300 N. QUEEN STREET				75
DURHAM, NC. 27701 Total from continuation sheets		1		281,61

3 Grants and Contributions Paid During the \(\)				
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		
A CANADA A A CANADA DIVADI		501(C)(3)	TO TEACH YOUTH THE	
200TH MAKING A DIFFERENCE 2176 S 2000 E		, , - ,	VALUES OF LEADERSHIP	
RALT LAKE CITY, UT 84106			AND HUMANITARIAN	
ZALI DANE CARA, KI VALVA			efforts:	7.00
ENCIRCLE		s01(c)(3)	SUPPORT LOCAL LEBTO	
91 w 20 0 s		CHARITABLE ORG.	СОЙМИЙІТУ	
PROVO, UT 84601				1,000
AMERICAN ASSOCIATION OF CAREGIVING		501(C)(3)	PO SUPPORT CHILDREN	
YOUTH	ļ	CHARITABLE ORG.	WHO HAVE CAREGIVING	
1515 N. FEDERAL HWY			RESPONSIBILITIES	
BOCA RATON, FL 33432				750
ME TO WE		501(C)(3)	SUPPORT HUMANITARIAN	
145 BERKELEY ST.		CHARITABLE ORG.	TRIPS FOR MEDICAL	
TORONTO, ONTARIO, CANADA MSSA 189			PROFESSIONALS	100,000
AMERICARES		501(C)(3)	HURRICAN HARVEY/IRMA	
88 HAMILTON AVE.		CHARITABLE ORG.	RELIEF EFFORTS	10,000
STAMFORD, CT 06902				19,000
		EAS (E) (2)	SUPPORT MEDICAL	
WIDAVE COMMUNITA		CHARTTABLE ORG	SERVICES FOR THE LESS	
9 W CENTER ST		CHARLES CO.	FORTUNATE	80,000
MIDVALE, UT 84047				
and the same of th		501(C)(3)	RESCUING CHILDREN FROM	
THE UMBRELLA POUNDATION 16 LONGVIEW ROAD			CORRUPT ORPHANAGES	
SOUTH SALEM, NY 10590				5,000
JUNIOR LEAGUE OF SALT LAKE		501(C)(3)	DONATION FOR THE CARE	
526 E 300 S		CHARITABLE ORG	.FAIR	1-0 - 00
SALT LAKE CITY, UT 84102				10,000
			TOO NUMBER OF THE PARTY OF THE	
CHOICE HUMANITARIAN		501.(C)(3)	FOR RURAL COMMUNITIES AROUND THE WORLD.	
7879 S 1530 W		CHARLTABLE ORG	.MAGOND INS HORMD,	6,98
WEST JORDAN, UT 84088				- , - \
		501(G)(3)	2018 MEDICAL PROVIDERS	
ME TO WE		CHARITABLE ORG	i	
145 BERKELEY ST.		Junitarions ove	•	6,00
TORONTO, ONTARTO, CANADA MS5A 189 Total from continuation sheets			<u> </u>	

I if recipiont is an individual			
show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
or substantial contributor	recipient		
	ł.	1	
	CHARITABLE ORG.	LO KENAV	
			41,93
	501(0)(3)	MISSION TRIP TO HAITI	
	CHARITABLE ORG		
			10,00
			•
	İ		
1			
	Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor	If recipient is an individual, show any relationship to any foundation manager or substantial contributor 5.01(C)(3) CHÄRITABLE ORG.	If recipient is an individual, show any relationship to any foundation manager status of recipient Purpose of grant or contribution 5.61(C)(3) 2017 MEDICAL PROVIDERS CHARITABLE ORG. TO KENYA

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

Name of the organization

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

81-4680770 MAKING A DIFFERENCE FOUNDATION Organization type (check one): Section: Filers of: 501(c)() (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 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 [X] 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 contributors. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990 EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts Land 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. Eor an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990 EZ or on its Form 990 PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Employer identification number

MAKING A DIFFERENCE FOUNDATION

81-4680770

Part I	Contributors (see instructions). Use duplicate copies of Part Hif additional space is needed.							
(a) No.	(b) Name, address, ånd ZIP + 4	(c) Total contributions	(d) Type of contribution					
1	CHG COMPANIES, INC. 7259 S. BINGHAM JUNCTION BLVD. MIDVALE, UT 84047	\$ 350,000,	Person X Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c). Total contributions	(d) Type of contribution					
2	SCOTT BECK 7259 S. BINGHAM JUNCTION BLVD. MIDVALE, UT 84047	ss	Person X Payroll					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZiP + 4	(c) Total contributions	(d) Type of contribution					
		s	Person Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Námě, áddress, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
			Person Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
798457 14		\$Schedule B (For	Person Payroll Noncash (Complete Part II for noncash contributions:)					

Employer identification number

MAKING A DIFFERENCE FOUNDATION

81-4680770

Part II	Noncash Property (see instructions). Use duplicate copies of Part	It 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
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
A BANCO AND THE OWNER OF THE OWNER OW		\$	
(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
- Land		\$	
(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
		S. Schodnia B (Form)	990, 990-EZ, or 990-PF) (2017

Employer identification number

MAKING	A DIFFERENCE FOUNDATION	N	81-4680770						
Part III	Exclusively religious, charitable, etc., contrible year from any one contributor. Complete completing Part is, enter use total of exclusively religious	ibutions to organizations described in plumns (a) through (e) and the followin , charitable, etc., contributions of \$ 1,000 or let	section:501(c)(7), (8), or (10) that total more than \$1,000 for ig line entry. For organizations set the year. (Enter this into once) \$ \$						
(-1 b)	Use duplicate copies of Part III if additiona	l space is needed.							
(a) No. from Pari I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
		(e) Transfer of gift							
-	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee						
- (a) No.									
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
-									
		(e) Transfer of gift							
<u> </u>	Transferee's name, address, ar	nd ZIP + 4	Relationship 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								
	Transferce's name, address, ar	nd ZIP + 4	Relationship 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	nd ZtP + 4	Relationship of transferor to transferee						
The state of the s									
			Schedule B (Form 990, 990-EZ, or 990-PF) (2017						

FORM 990-PF	INTEREST	ON	SAVINGS	AND	TEMPORARY	CASH	INVESTMENTS	STATEMENT	1
SOURCE					(A) REVENUE ER BOOKS	NET	(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME	
CHECKING ACC	OŲNT		-	·	40.		40.		
TOTAL TO PAR	T I. LINE	3	-	·····	40.		40.		
FORM 990-PF		LI			NTIAL CONT		ORS	STATEMENT	2
NAME OF CONT	RIBUTOR				ADDRESS				
CHG COMPANIE	S, INC.				7259 S. BI		JUNCTION BL	VD.	
SCOTT BECK					7259 S. BI MIDVALE, U		JUNCTION BL	VĎ.	

FORM 990-PF PART VIII - LIST TRUSTEES AND	OF OFFICERS, DI FOUNDATION MANAG	RECTORS ERS	STATI	ement 3
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
KEVIN RICKLEFS 7259 S. BINGHAM JUNCTION BLVD. MIDVALE, UT 84047	PRESIDENT 0.00	0.	0.	Ö.
CHRISTINE VANCAMPEN 7259 S. BINGHAM JUNCTION BLVD. MIDVALE, UT 84047	VICE PRESIDENT 0.00	0.	0.	0.
MORRIS JENSBY 7259 S. BINGHAM JUNCTION BLVD. MIDVALE, UT 84047	SECRETARY 0.00	0.	0.	0.
RONNIE WILLIAMS 7259 S. BINGHAM JUNCTION BLVD. MIDVALE, UT 84047	TREASURER 0.00	0.	0,	0.
SHARON GORMAN 7259 S. BINGHAM JUNCTION BLVD. MIDVALE, UT 84047	VICE PRESIDENT, 0.00	ТАХ 0.	0.	0.
EDDIE CHRISTENSEN 7259 S. BINGHAM JUNCTION BLVD. MIDVALE, UT 84047	VICE PRESIDENT, 0.00	LEGAL 0.	0.	0
SCOTT BECK 7259 S. BINGHAM JUNCTION BLVD. MIDVALE, UT 84047	DIRECTOR 0.00	0, .	0.	0.
DAN THOMSON 7259 S. BINGHAM JUNCTION BLVD. MIDVALE, UT 84047	DIRECTOR 0.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6	, PART VIII	0.	0.	0.

FORM 990 PF GRANT APPLICATION SUBMISSION INFORMATION STATEMENT 4 PART XV, LINES 2A THROUGH 2D

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

MAKING A DIFFERENCE GRANT REQUEST TEAM 7259 S. BINGHAM BLVD. MIDVALE, UT 84047

TELEPHONE NUMBER NAME OF GRANT PROGRAM

8019303000 LOCAL GRANT PROGRAM

FORM AND CONTENT OF APPLICATIONS

GRANT REQUEST FORM. NAME OF CHARITY, INVOLVEMENT WITH CHARITY, HOW THE GRANT MONEY WILL BE USED.

ANY SUBMISSION DEADLINES

QUARTERLY

RESTRICTIONS AND LIMITATIONS ON AWARDS

LOCAL GRANTS - \$200 - \$5000 STRATEGIC GRANTS - GREATER THAN \$5000