

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

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

For calendar year 2019 or tax year beginning , and ending

Name of foundation MORGAN FAMILY FOUNDATION		A Employer identification number 30-0205024
Number and street (or P.O. box number if mail is not delivered to street address) 506 S HIGH ST STE B	Room/suite	B Telephone number 937-767-9208
City or town, state or province, country, and ZIP or foreign postal code YELLOW SPRINGS, OH 45387-0561		C If exemption application is pending, check here ...▶
G Check all that apply: Initial return Initial return of a former public charity Final return Amended return Address change Name change		D 1. Foreign organizations, check here▶ 2. Foreign organizations meeting the 85% test, check here and attach computation▶
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ...▶
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 49,135,845.	J Accounting method: Cash Accrual <input checked="" type="checkbox"/> Other (specify) MODIFIED CASH (Part I, column (d), must be on cash basis.)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ...▶ <input type="checkbox"/>

Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received	1,038.		N/A	
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	2,276.	2,276.		STATEMENT 1
	4 Dividends and interest from securities	1,407,241.	1,407,241.		STATEMENT 2
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	1,882,721.			
	b Gross sales price for all assets on line 6a	11,337,216.			
	7 Capital gain net income (from Part IV, line 2)		1,882,721.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss)					
11 Other income	9,232.	9,232.		STATEMENT 3	
12 Total. Add lines 1 through 11	3,302,508.	3,301,470.			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	270,824.	76,862.		117,216.
	14 Other employee salaries and wages	27,791.	0.		18,082.
	15 Pension plans, employee benefits	107,085.	27,231.		49,055.
	16a Legal fees STMT 4	4,031.	0.		0.
	b Accounting fees STMT 5	25,205.	18,705.		0.
	c Other professional fees STMT 6	322,858.	232,501.		71,715.
	17 Interest				
	18 Taxes STMT 7	48,205.	5.		0.
	19 Depreciation and depletion	9,818.	0.		
	20 Occupancy	13,690.	0.		0.
	21 Travel, conferences, and meetings	33,606.	3,211.		23,189.
	22 Printing and publications				
	23 Other expenses STMT 8	62,164.	0.		12,999.
	24 Total operating and administrative expenses. Add lines 13 through 23	925,277.	358,515.		292,256.
	25 Contributions, gifts, grants paid	2,081,024.			2,081,024.
26 Total expenses and disbursements. Add lines 24 and 25	3,006,301.	358,515.		2,373,280.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements ...	296,207.				
b Net investment income (if negative, enter -0-)		2,942,955.			
c Adjusted net income (if negative, enter -0-)			N/A		

Part II Balance Sheets <small>Attached schedules and amounts in the description column should be for end-of-year amounts only.</small>		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing			
	2 Savings and temporary cash investments	941,643.	560,980.	560,980.
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock STMT 10	1,105,912.	1,370,649.	1,370,649.
	c Investments - corporate bonds			
	11 Investments - land, buildings, and equipment: basis ▶			
Less: accumulated depreciation ▶				
12 Investments - mortgage loans				
13 Investments - other STMT 11	41,049,237.	46,842,774.	46,842,774.	
14 Land, buildings, and equipment: basis ▶ 98,181.				
Less: accumulated depreciation STMT 12 ▶ 43,363.	64,636.	54,818.	54,818.	
15 Other assets (describe STATEMENT 13)	303,129.	306,624.	306,624.	
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	43,464,557.	49,135,845.	49,135,845.	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable	500,000.	817,500.	
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe DENTAL & VISION EM)	-300.	-326.	
23 Total liabilities (add lines 17 through 22)	499,700.	817,174.		
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input type="checkbox"/>			
	and complete lines 24, 25, 29, and 30.			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/>			
	and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds	0.	0.	
	27 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
28 Retained earnings, accumulated income, endowment, or other funds ...	42,964,857.	48,318,671.		
29 Total net assets or fund balances	42,964,857.	48,318,671.		
30 Total liabilities and net assets/fund balances	43,464,557.	49,135,845.		

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 29 (must agree with end-of-year figure reported on prior year's return)	1	42,964,857.
2 Enter amount from Part I, line 27a	2	296,207.
3 Other increases not included in line 2 (itemize) SEE STATEMENT 9	3	5,057,607.
4 Add lines 1, 2, and 3	4	48,318,671.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	48,318,671.

Part IV Capital Gains and Losses for Tax on Investment Income SEE ATTACHED STATEMENT

(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) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a			
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))
a			
b			
c			
d			
e	11,337,216.	9,454,495.	1,882,721.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			
b			
c			
d			
e			1,882,721.

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	1,882,721.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8	3	N/A

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No

If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part.

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	2,396,777.	47,656,818.	.050292
2017	2,241,746.	46,247,891.	.048472
2016	2,828,783.	44,075,751.	.064180
2015	2,970,151.	48,181,302.	.061645
2014	2,736,903.	49,877,441.	.054873

2 Total of line 1, column (d)	2	.279462
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	.055892
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	46,054,751.
5 Multiply line 4 by line 3	5	2,574,092.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	29,430.
7 Add lines 5 and 6	7	2,603,522.
8 Enter qualifying distributions from Part XII, line 4	8	2,373,280.

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

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

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b		1	58,859.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		2	0.
3 Add lines 1 and 2		3	58,859.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	58,859.
6 Credits/Payments:			
a 2019 estimated tax payments and 2018 overpayment credited to 2019	6a	71,539.	
b Exempt foreign organizations - tax withheld at source	6b	0.	
c Tax paid with application for extension of time to file (Form 8868)	6c	0.	
d Backup withholding erroneously withheld	6d	0.	
7 Total credits and payments. Add lines 6a through 6d	7	71,539.	
8 Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	18.	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	12,662.	
11 Enter the amount of line 10 to be: Credited to 2020 estimated tax <input type="checkbox"/> 12,662. Refunded <input checked="" type="checkbox"/>	11	0.	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition 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.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input type="checkbox"/> \$ 0. (2) On foundation managers. <input type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="checkbox"/> \$ 0.		
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.		X
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		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by <i>General Instruction T</i> .		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. <input type="checkbox"/> <u>OH</u>		
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	X	
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 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-16 containing questions about controlled entities, distributions, public inspection requirements, website address, books in care, and foreign country interests.

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.

Table with 3 columns: Question, Yes, No. Rows 1a-4b containing questions about disqualifying acts, taxes on failure to distribute income, and business enterprise interests.

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

		Yes	No
5a During the year, did the foundation pay or incur any amount to:			
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions	N/A	5b	
Organizations relying on a current notice regarding disaster assistance, check here	<input type="checkbox"/>		
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 <input type="checkbox"/> Yes <input type="checkbox"/> No		
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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		6b	X
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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	N/A	7b	
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

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

1 List all officers, directors, trustees, and foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 17		270,824.	74,106.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(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	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000 0

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

3 Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NEPC, LLC 255 STATE STREET, BOSTON, MA 02109	CONSULTING	55,770.

Total number of others receiving over \$50,000 for professional services 0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
4	

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	
3 All other program-related investments. See instructions.	

Total. Add lines 1 through 3 0.

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:			
a	Average monthly fair market value of securities	1a	46,032,343.
b	Average of monthly cash balances	1b	668,931.
c	Fair market value of all other assets	1c	54,818.
d	Total (add lines 1a, b, and c)	1d	46,756,092.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	46,756,092.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	701,341.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	46,054,751.
6	Minimum investment return. Enter 5% of line 5	6	2,302,738.

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

1	Minimum investment return from Part X, line 6	1	2,302,738.
2a	Tax on investment income for 2019 from Part VI, line 5	2a	58,859.
b	Income tax for 2019. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	58,859.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,243,879.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	2,243,879.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	2,243,879.

Part XII Qualifying Distributions (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	2,373,280.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	2,373,280.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	2,373,280.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				2,243,879.
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2019:				
a From 2014	258,375.			
b From 2015	668,212.			
c From 2016	633,819.			
d From 2017				
e From 2018	77,997.			
f Total of lines 3a through e	1,638,403.			
4 Qualifying distributions for 2019 from Part XII, line 4: ▶ \$	2,373,280.			
a Applied to 2018, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2019 distributable amount				2,243,879.
e Remaining amount distributed out of corpus	129,401.			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	1,767,804.			
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 2018. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0.			
8 Excess distributions carryover from 2014 not applied on line 5 or line 7	258,375.			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	1,509,429.			
10 Analysis of line 9:				
a Excess from 2015	668,212.			
b Excess from 2016	633,819.			
c Excess from 2017				
d Excess from 2018	77,997.			
e Excess from 2019	129,401.			

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

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

Table with 5 columns: (a) 2019, (b) 2018, (c) 2017, (d) 2016, (e) Total. Rows include 2a-e (Qualifying distributions) and 3a-d (Alternative tests).

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

1 Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

SEE STATEMENT 18

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here [] if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or email address of the person to whom applications should be addressed: SEE STATEMENT 20

SEE STATEMENT 19

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Part XV Supplementary Information *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
Total SEE CONTINUATION SHEET(S) ▶ 3a				2,081,024.
b Approved for future payment				
Total SEE CONTINUATION SHEET(S) ▶ 3b				817,500.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	
1 Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f _____					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	2,276.	
4 Dividends and interest from securities			14	1,407,241.	
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			14	9,232.	
8 Gain or (loss) from sales of assets other than inventory			18	1,882,721.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
12 Subtotal. Add columns (b), (d), and (e)		0.		3,301,470.	0.
13 Total. Add line 12, columns (b), (d), and (e)			13	3,301,470.	

(See worksheet in line 13 instructions to verify calculations.)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

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

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

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

	Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of:		
(1) Cash	X	
(2) Other assets		X
b Other transactions:		
(1) Sales of assets to a noncharitable exempt organization		X
(2) Purchases of assets from a noncharitable exempt organization		X
(3) Rental of facilities, equipment, or other assets		X
(4) Reimbursement arrangements		X
(5) Loans or loan guarantees		X
(6) Performance of services or membership or fundraising solicitations		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees		X
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.		

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
A1	90.	YELLOW SPRINGS CHAMBER OF COMMERCE	SEE STATEMENT 21

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? Yes No

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

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

Sign Here	Signature of officer or trustee	Date	Title	EXECUTIVE DIRECTOR & SECR <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	KAREN O CRIM	KAREN O CRIM	11/11/20		P00368385
	Firm's name ▶ RSM US LLP	Firm's address ▶ 6 S PATTERSON BLVD DAYTON, OH 45402		Firm's EIN ▶ 42-0714325	Phone no. 937-298-0201

MORGAN FAMILY FOUNDATION

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a PUBLICLY TRADED SECURITIES - SEE ATTACHED SCHEDULE			
b PUBLICLY TRADED SECURITIES - SEE ATTACHED SCHEDULE			
c PUBLICLY TRADED SECURITIES - SEE ATTACHED SCHEDULE			
d PARTNERSHIPS/ALTERNATIVE INVESTMENTS			
e CAPITAL GAINS DIVIDENDS			
f			
g			
h			
i			
j			
k			
l			
m			
n			
o			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 8,254,682.		7,383,162.	871,520.
b 1,640,000.		1,229,887.	410,113.
c 834,121.		841,446.	-7,325.
d 116,665.			116,665.
e 491,748.			491,748.
f			
g			
h			
i			
j			
k			
l			
m			
n			
o			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			871,520.
b			410,113.
c			-7,325.
d			116,665.
e			491,748.
f			
g			
h			
i			
j			
k			
l			
m			
n			
o			

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 }	2	1,882,721.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8	3	N/A

Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
ALZHEIMER'S DISEASE AND RELATED DISORDERS ASSOCIATION 225 N. MICHIGAN AVENUE CHICAGO, IL 60601		PC	ST. CLOUD OFFICE	500.
ALZHEIMER'S DISEASE AND RELATED DISORDERS ASSOCIATION 225 N. MICHIGAN AVENUE CHICAGO, IL 60601		PC	ST. CLOUD OFFICE	250.
ALZHEIMER'S DISEASE AND RELATED DISORDERS ASSOCIATION 225 N. MICHIGAN AVENUE CHICAGO, IL 60601		PC	UNRESTRICTED	200.
ALZHEIMER'S DISEASE AND RELATED DISORDERS ASSOCIATION 225 N. MICHIGAN AVENUE CHICAGO, IL 60601		PC	ST. CLOUD OFFICE	250.
ALZHEIMER'S DISEASE AND RELATED DISORDERS ASSOCIATION 225 N. MICHIGAN AVENUE CHICAGO, IL 60601		PC	MN-ND CHAPTER	500.
ALZHEIMER'S DISEASE AND RELATED DISORDERS ASSOCIATION 225 N. MICHIGAN AVENUE CHICAGO, IL 60601		PC	MN-ND CHAPTER	500.
ALZHEIMER'S DISEASE AND RELATED DISORDERS ASSOCIATION 225 N. MICHIGAN AVENUE CHICAGO, IL 60601		PC	UNRESTRICTED	250.
Total from continuation sheets				2,081,024.

Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
ALZHEIMER'S DISEASE AND RELATED DISORDERS ASSOCIATION 225 N. MICHIGAN AVENUE CHICAGO, IL 60601		PC	UNRESTRICTED	250.
ALZHEIMER'S DISEASE AND RELATED DISORDERS ASSOCIATION 225 N. MICHIGAN AVENUE CHICAGO, IL 60601		PC	ST. CLOUD OFFICE	500.
ALZHEIMER'S DISEASE AND RELATED DISORDERS ASSOCIATION 225 N. MICHIGAN AVENUE CHICAGO, IL 60601		PC	MN-ND CHAPTER	250.
AMERICAN CANCER SOCIETY - SAUK RAPIDS 1139 FRANKLIN AVE NE #5 SAUK RAPIDS, MN 56379		PC	UNRESTRICTED USE	250.
AMERICAN CANCER SOCIETY, INC. 250 WILLIAMS STREET ATLANTA, GA 30303		PC	UNRESTRICTED USE	250.
AMERICAN CANCER SOCIETY, INC. 250 WILLIAMS STREET ATLANTA, GA 30303		PC	UNRESTRICTED USE	250.
AMERICAN CANCER SOCIETY, INC. 250 WILLIAMS STREET ATLANTA, GA 30303		PC	UNRESTRICTED USE	250.
Total from continuation sheets				

Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
AMERICAN CANCER SOCIETY, INC. 250 WILLIAMS STREET ATLANTA, GA 30303		PC	UNRESTRICTED USE	200.
ANNANDALE AREA COMMUNITY FOOD SHELF P.O. BOX 94 ANNANDALE, MN 55302		PC	ANCHOR DOCK & LIFT HOLIDAY FOOD TRAIN FUNDRAISER	2,500.
ANTIOCH COLLEGE CORPORATION ONE MORGAN PLACE YELLOW SPRINGS, OH 45387		PC	FAST-TRACK FOR ANTIOCH: SUPPORTING THE COLLEGE'S QUEST FOR ACCREDITATION (FIFTH YEAR OF 5-YEAR GRANT)	500,000.
ANTIOCH COLLEGE CORPORATION ONE MORGAN PLACE YELLOW SPRINGS, OH 45387		PC	INCREASING SUSTAINABLE ENROLLMENT FOR A COLLEGE OF PRACTICE (FIRST YEAR OF 3-YEAR GRANT)	400,000.
ANTIOCH COLLEGE CORPORATION ONE MORGAN PLACE YELLOW SPRINGS, OH 45387		PC	UNRESTRICTED USE	3,500.
ARTHUR MORGAN INSTITUTE FOR COMMUNITY SOLUTIONS P.O. BOX 243 YELLOW SPRINGS, OH 45387		PC	OPERATING SUPPORT FOR AGRARIA: CENTER FOR REGENERATIVE PRACTICE	15,000.
ARTHUR MORGAN SCHOOL 60 AMS CIRCLE BURNSVILLE, NC 28714		PC	BUILDING FUND	3,000.
Total from continuation sheets				

Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
ARTHUR MORGAN SCHOOL 60 AMS CIRCLE BURNSVILLE, NC 28714		PC	BUILDING FUND	1,000.
ARTHUR MORGAN SCHOOL 60 AMS CIRCLE BURNSVILLE, NC 28714		PC	UNRESTRICTED USE	200.
ARTHUR MORGAN SCHOOL 60 AMS CIRCLE BURNSVILLE, NC 28714		PC	UNRESTRICTED USE	500.
ARTHUR MORGAN SCHOOL 60 AMS CIRCLE BURNSVILLE, NC 28714		PC	NEW ACADEMIC BUILDING	250.
ARTHUR MORGAN SCHOOL 60 AMS CIRCLE BURNSVILLE, NC 28714		PC	NEW BUILDING FUND	500.
ARTHUR MORGAN SCHOOL 60 AMS CIRCLE BURNSVILLE, NC 28714		PC	NEW BUILDING FUND	500.
ARTHUR MORGAN SCHOOL 60 AMS CIRCLE BURNSVILLE, NC 28714		PC	MUSIC DEPARTMENT	500.
Total from continuation sheets				

Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
ASSOCIATION OF AFRICANS LIVING IN VERMONT 20 ALLEN ST., 3RD FLOOR BURLINGTON, VT 05401		PC	GENERAL OPERATING SUPPORT	500.
AUDIENCE OF ONE YOUTH THEATER PO BOX 631340 HIGHLANDS RANCH, CO 80163		PC	A PERMANENT HOME/BUILDING	500.
AUDIENCE OF ONE YOUTH THEATER PO BOX 631340 HIGHLANDS RANCH, CO 80163		PC	A PERMANENT HOME/BUILDING	500.
AUDIENCE OF ONE YOUTH THEATER PO BOX 631340 HIGHLANDS RANCH, CO 80163		PC	SCHOLARSHIPS	500.
AUGUSTANA UNIVERSITY 2001 S. SUMMIT AVE SIOUX FALLS, SD 57197		PC	HUMANITIES BUILDING RENOVATIONS	4,000.
BIG BROTHERS BIG SISTERS MIAMI VALLEY 22 S. JEFFERSON STREET DAYTON, OH 45402-2003		PC	YOUTH MENTORING SERVICES IN YELLOW SPRINGS	16,500.
BIG BROTHERS BIG SISTERS OF CENTRAL MINNESOTA 203 COOPER AVENUE NORTH, SUITE 162 ST. CLOUD, MN 56303		PC	YOUTH MENTORING	30,000.
Total from continuation sheets				

Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
BOYS & GIRLS CLUBS OF CENTRAL MINNESOTA 345 30TH AVENUE NORTH ST. CLOUD, MN 56303-3755		PC	JUNIOR STAFF CAREER DEVELOPMENT PROGRAM	40,000.
BOYS & GIRLS CLUBS OF CENTRAL MINNESOTA 345 30TH AVENUE NORTH ST. CLOUD, MN 56303-3755		PC	UNRESTRICTED USE	1,000.
CALIFORNIANS FOR RENEWABLE ENERGY (CARE) PO BOX 682 PORTOLA, CA 96122		PC	STOP SMART METERS	250.
CAROLINA DAY SCHOOL INC. 1345 HENDERSONVILLE RD. ASHEVILLE, NC 28803		PC	ANNUAL FUND CONTRIBUTION DEDICATED FOR KEY SCHOOL SCHOLARSHIPS	1,500.
CATHOLIC CHARITIES OF THE DIOCESE OF ST. CLOUD 911 18TH STREET NORTH ST. CLOUD, MN 56303-1203		PC	SERVICES FOR HOMELESS YOUTH; CRITICAL HOUSING AND COMPREHENSIVE SERVICES	35,000.
CELLULAR PHONE TASK FORCE, INC. P.O. BOX 6216 SANTA FE, NM 87502		PC	UNRESTRICTED USE	250.
CENTER FOR VICTIMS OF TORTURE 110 2ND ST. SOUTH, SUITE 303 WAITE PARK, MN 56387-1662		PC	CVT ST. CLOUD	50,000.
Total from continuation sheets				

Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
CENTRACARE CLINIC 1406 6TH AVE. N. ST. CLOUD, MN 56303-1901		PC	BUILDING CAREGIVER SUPPORT INTO AN INCLUSIVE COMMUNITY	39,484.
CENTRAL MINNESOTA HABITAT FOR HUMANITY 3335 WEST SAINT GERMAIN STREET SAINT CLOUD, MN 56301-7321		PC	PARTNERSHIP WITH TECH HIGH SCHOOL: TIGER BUILD 5	25,000.
CENTRAL MINNESOTA YOUTH SOCCER ASSOCIATION P.O. BOX 651 ST. CLOUD, MN 56302-0651		PC	UNRESTRICTED USE	500.
CHILDREN'S HISTORICAL PUBLISHING 1616 TURNBERRY VILLAGE DR. DAYTON, OH 45458		PC	UNRESTRICTED USE	500.
CITIZENS CLIMATE EDUCATION CORP. 1330 ORANGE AVE, SUITE 309 CORONADO, CA 92118		PC	UNRESTRICTED USE	5,000.
COMMUNITYGIVING 101 7TH AVENUE SOUTH # 100 ST. CLOUD, MN 56301		PC	JUGAAD LEADERSHIP AND MENTORING PROGRAM	17,500.
COMMUNITYGIVING 101 7TH AVENUE SOUTH # 100 ST. CLOUD, MN 56301		PC	GENERAL CHARITABLE PURPOSES	25,250.
Total from continuation sheets				

Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
COMMUNITYGIVING 101 7TH AVENUE SOUTH # 100 ST. CLOUD, MN 56301		PC	SOCIAL CAPITAL SURVEY	5,000.
CONVIVIAL LEARNING INC. 1160 CORRY STREET YELLOW SPRINGS, OH 45387-1642		PC	24TH ANNUAL AUCTION GALA & COMEDY SHOW SCHOLARSHIP FUNDRAISER	10,000.
DAKOTA CENTER INC. 33 BARNETT ST. DAYTON, OH 45402		PC	UNRESTRICTED USE	150.
DAYBREAK, INC. 605 S. PATTERSON BLVD. DAYTON, OH 45402-2649		PC	UNRESTRICTED USE	350.
DAYTON CHRISTIAN CENTER, INC. 1352 W. RIVERVIEW AVENUE DAYTON, OH 45402		PC	UNRESTRICTED USE	250.
DISTRICT 742 LOCAL EDUCATION & ACTIVITIES FOUNDATION PO BOX 1132 ST. CLOUD, MN 56302-1132		PC	PARTNERS AND KIDS COUNTING ALOT TOGETHER (PAKCAT)	22,350.
DISTRICT 742 LOCAL EDUCATION & ACTIVITIES FOUNDATION PO BOX 1132 ST. CLOUD, MN 56302-1132		PC	50% ACTIVITIES FUND, 50% ACADEMIC FUND	1,500.
Total from continuation sheets				

Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
DISTRICT 742 LOCAL EDUCATION & ACTIVITIES FOUNDATION PO BOX 1132 ST. CLOUD, MN 56302-1132		PC	FOREIGN LANGUAGE IMMERSION PROGRAM	2,000.
ELDER VOICE FAMILY ADVOCATES 5770 MARSH POINTE DRIVE SHOREWOOD, MN 55331-7100		PC	CENTRAL MINNESOTA ELDER CARE EDUCATION AND ADVOCACY PROGRAM	20,000.
EXPONENT PHILANTHROPY 1720 N STREET NW WASHINGTON, DC 20036		PC	GENERAL OPERATIONS	500.
FAMILY VIOLENCE PREVENTION CENTER OF GREENE COUNTY, INC. 380 BELLBROOK AVE. XENIA, OH 45385		PC	PREVENTION OF TEEN DATING VIOLENCE AND SEXUAL VIOLENCE	5,000.
FOLDS OF HONOR - MINNESOTA 372 FERNDAL RD SOUTH WAYZATA, MN 55391		PC	UNRESTRICTED USE	250.
FOLDS OF HONOR - MINNESOTA 372 FERNDAL RD SOUTH WAYZATA, MN 55391		PC	UNRESTRICTED USE	250.
FRIENDS CARE COMMUNITY 150 EAST HERMAN ST YELLOW SPRINGS, OH 45387-1610		PC	ACCESSIBLE TRANSPORTATION	10,000.
Total from continuation sheets				

Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
FRIENDS OF CAREER SOLUTIONS 1542 NORTHWAY DRIVE ST. CLOUD, MN 56303-9501		PC	CAREERONE CAPACITY BUILDING	30,000.
FRIENDS OF NEW MEXICO FISHER HOUSE PO BOX 14276 ALBUQUERQUE, NM 87191		PC	NEW MEXICO FISHER HOUSE	250.
FRIENDS OF NEW MEXICO FISHER HOUSE PO BOX 14276 ALBUQUERQUE, NM 87191		PC	NEW MEXICO FISHER HOUSE	500.
FRIENDS OF THE HOUSE OF THE PEOPLE 201 LOOKOUT DRIVE DAYTON, OH 45419		PC	HOUSE OF THE PEOPLE - UNRESTRICTED	500.
FRIENDS OF WILLOW SPRINGS OPEN SPACE P.O. BOX 1128 MORRISON, CO 80465		PC	TOOLS	300.
GIVE AND SURF 361 PALM ISLAND LANE VERO BEACH, FL 32963		PC	SAN CRISTOBAL COMMUNITY CENTER	500.
GIVE2ASIA 2201 BROADWAY ST. OAKLAND, CA 94612		PC	MITRANIKETAN FUND	1,000.
Total from continuation sheets				

Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
GIVE2ASIA 2201 BROADWAY ST. OAKLAND, CA 94612		PC	MITRANIKETAN FUND	500.
GLEN HELEN ASSOCIATION 405 CORRY STREET YELLOW SPRINGS, OH 45387		PC	UNRESTRICTED USE	200.
GREAT RIVER CHILDREN'S MUSEUM 111 7TH AVENUE SOUTH ST CLOUD, MN 56301-4696		PC	GREAT RIVER CHILDREN'S MUSEUM OPENING DOORS PROJECT	25,000.
GREAT RIVER EDUCATIONAL ARTS THEATRE 710 SUNDIAL DRIVE WAITE PARK, MN 56387		PC	REDESIGN OF GREAT YOUTH ARTS PROGRAMING & DISCOVERY SCHOOL ARTS INTEGRATION PILOT	27,100.
GREAT RIVER EDUCATIONAL ARTS THEATRE 710 SUNDIAL DRIVE WAITE PARK, MN 56387		PC	UNRESTRICTED USE	5,000.
GREATER MINNESOTA WORKER CENTER 1546 5TH AVE S. #63 ST. CLOUD, MN 56303		PC	LACRUZ COMMUNITY CAPACITY BUILDING	50,000.
HANDS ACROSS THE WORLD 1605 GOETTENS WAY, SUITE 206 ST. CLOUD, MN 56301		PC	WE TEAM UP- WORKING IN AMERICA & GENERAL OPERATIONS SUPPORT	25,000.
Total from continuation sheets				

Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
HEARTBEAT LEARNING GARDENS PO BOX 831 YELLOW SPRINGS, OH 45387		PC	GENERAL OPERATING SUPPORT	300.
HEARTBEAT LEARNING GARDENS PO BOX 831 YELLOW SPRINGS, OH 45387		PC	UNRESTRICTED USE	500.
HOUSE OF BREAD 9 ORTH AVENUE DAYTON, OH 45406		PC	CAPITAL CAMPAIGN	2,000.
INITIATIVE FOUNDATION 405 FIRST STREET SE LITTLE FALLS, MN 56345-3007		PC	UNRESTRICTED USE	500.
IRAQI AND AMERICAN RECONCILIATION PROJECT 2021 E HENNEPIN AVE, SUITE 200 MINNEAPOLIS, MN 55413-2700		PC	"BIRDS SING DIFFERENTLY HERE" TOUR IN ST. CLOUD	3,500.
ISAIAH 2356 UNIVERSITY AVE W, SUITE 405 ST. PAUL, MN 55114-3802		PC	ADVANCING COMMUNITY-DRIVEN SOLUTIONS TO ST. CLOUD'S CHILDCARE CRISIS	50,000.
ISLAMIC CENTER OF ST. CLOUD 712 17TH AVE SOUTH SAINT CLOUD, MN 56301		PC	THE IMPROVE ACHIEVEMENT PROJECT (TAP)	33,000.
Total from continuation sheets				

Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
JOHN BRYAN COMMUNITY POTTERY 100 DAYTON ST. YELLOW SPRINGS, OH 45387		PC	UNRESTRICTED USE	250.
KNOX COUNTY FOUNDATION 101 E. GAMBIER STREET, P.O. BOX 309 MT. VERNON, OH 43050		PC	MARY HENDRICKSON NEW DIRECTIONS FUND	3,500.
LIFE ESSENTIALS, INC. 40 S. PERRY STREET #130 DAYTON, OH 45402		PC	UNRESTRICTED USE	500.
LIGHT THE LEGACY 619 WEST ST. GERMAIN ST. CLOUD, MN 56301		PC	UNRESTRICTED USE	500.
LIGHT THE LEGACY 619 WEST ST. GERMAIN ST. CLOUD, MN 56301		PC	UNRESTRICTED USE	500.
LITTLE ART THEATRE ASSOCIATION 247 XENIA AVENUE YELLOW SPRINGS, OH 45387		PC	UNRESTRICTED USE	250.
LUTHERAN SOCIAL SERVICE OF MN 2485 COMO AVE. ST. PAUL, MN 55108-0000		PC	EMERGENCY CHILDCARE TO SUPPORT VULNERABLE MOTHERS IN OUR COMMUNITY	25,000.
Total from continuation sheets				

Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
MAHARISHI FOUNDATION USA INC. PO BOX 670 FAIRFIELD, IA 52556		PC	FAIRFAX, VT TM CENTER DONATIONS ACCOUNT	500.
MANNA FOODBANK 627 SWANNANOA RIVER RD. ASHEVILLE, NC 28805-2445		PC	UNRESTRICTED USE	500.
MAPLE TREE CANCER ALLIANCE 3312 US ROUTE 42 E CEDARVILLE, OH 45314		PC	TRAIN YOUR TRAINER EVENT	1,000.
MIAMI VALLEY PUBLIC MEDIA INC 150 E. SOUTH COLLEGE STREET YELLOW SPRINGS, OH 45387		PC	UNRESTRICTED USE	500.
MIAMI VALLEY PUBLIC MEDIA INC 150 E. SOUTH COLLEGE STREET YELLOW SPRINGS, OH 45387		PC	UNRESTRICTED USE	300.
MINNESOTA COUNCIL ON FOUNDATIONS 800 WASHINGTON AVENUE N. MINNEAPOLIS, MN 55401-1167		PC	OPERATIONAL SUPPORT	3,000.
MINNESOTA PUBLIC RADIO 480 CEDAR STREET ST. PAUL, MN 55101-2217		PC	UNRESTRICTED USE	2,500.
Total from continuation sheets				

Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
MONTICELLO UNION TOWNSHIP PUBLIC LIBRARY 321 W. BROADWAY STREET MONTICELLO, IN 47960-4027		GOV	UNRESTRICTED USE	500.
NATIONAL LOW INCOME HOUSING COALITION 1000 VERMONT AVENUE NW WASHINGTON, DC 20005		PC	UNRESTRICTED USE	500.
NORTHWESTERN UNIVERSITY KELLOGG SCHOOL OF MANAGEMENT-1007 CHURCH ST. SUITE 400 EVANSTON, IL 60201		PC	KELLOGG SCHOOL OF MANAGEMENT'S ANNUAL FUND	2,000.
PARAMOUNT CENTER FOR THE ARTS 913 W ST. GERMAIN STREET ST. CLOUD, MN 56301-3460		PC	DANCE FOR ALL AND ART WHERE YOU LIVE	28,000.
PHILANTHROPY OHIO 500 S. FRONT STREET COLUMBUS, OH 43215-7628		PC	OPERATIONAL SUPPORT	3,500.
PLANNED PARENTHOOD FEDERATION OF AMERICA 123 WILLIAM STREET NEW YORK, NY 10038		PC	UNRESTRICTED USE	250.
PLANNED PARENTHOOD OF SOUTHWEST OHIO REGION 2314 AUBURN AVENUE CINCINNATI, OH 45219		PC	UNRESTRICTED USE	250.
Total from continuation sheets				

Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
PLANNED PARENTHOOD SOUTH ATLANTIC 100 S. BOYLAN AVE RALEIGH, NC 27603		PC	UNRESTRICTED USE	750.
PLANNED PARENTHOOD SOUTH ATLANTIC 100 S. BOYLAN AVE RALEIGH, NC 27603		PC	UNRESTRICTED USE	500.
PROMISE NEIGHBORHOOD OF CENTRAL MINNESOTA 1114 9TH AVENUE ST. CLOUD, MN 56302-6082		PC	DIRECT AND EQUITABLE INVESTMENT IN OUT OF SCHOOL PROGRAMMING	35,000.
PROMISE NEIGHBORHOOD OF CENTRAL MINNESOTA 1114 9TH AVENUE ST. CLOUD, MN 56302-6082		PC	UNRESTRICTED USE	2,000.
QUIET OAKS P.O. BOX 1241 ST. CLOUD, MN 56302-1241		PC	UNRESTRICTED USE	500.
RIDING CENTRE ASSOCIATION 1117 E. HYDE ROAD YELLOW SPRINGS, OH 45387		PC	UNRESTRICTED USE	500.
ROCKY MOUNTAIN LAB RESCUE PO BOX 1623 BROOMFIELD, CO 80038		PC	UNRESTRICTED USE	200.
Total from continuation sheets				

Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
SCHOOL YEAR ABROAD 120 WATER ST. NORTH ANDOVER, MA 01845		PC	DESIGNATED FOR FINANCIAL AID	2,250.
SERVEMINNESOTA 120 SOUTH SIXTH STREET, SUITE 2260 MINNEAPOLIS, MN 55402-1824		PC	READING CORPS IN LICENSED FAMILY CHILD CARE	50,000.
SHOWING UP FOR RACIAL JUSTICE 120 N JANE ST LOUISVILLE, KY 40206		PC	UNRESTRICTED GRANT	250.
SHOWING UP FOR RACIAL JUSTICE 120 N JANE ST LOUISVILLE, KY 40206		PC	UNRESTRICTED USE	500.
ST. CLOUD FAMILY YMCA 2001 STOCKINGER DRIVE ST. CLOUD, MN 56303-1243		PC	UNRESTRICTED USE	3,000.
ST. CLOUD FAMILY YMCA 2001 STOCKINGER DRIVE ST. CLOUD, MN 56303-1243		PC	PARTNERS SCHOLARSHIP FUND	1,000.
ST. CLOUD ROTARY FOUNDATION, INC. PO BOX 713 ST. CLOUD, MN 56302		PC	PATHWAYS 4 YOUTH "GROW"	40,000.
Total from continuation sheets				

Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
ST. CLOUD STATE UNIVERSITY 720 4TH AVE SOUTH ST. CLOUD, MN 56301-4498		GOV	2020 WINTER INSTITUTE	25,000.
ST. CLOUD STATE UNIVERSITY 720 4TH AVE SOUTH ST. CLOUD, MN 56301-4498		GOV	SCHOOL OF PUBLIC AFFAIRS	2,500.
TEREBINTH REFUGE 110 2ND ST, SUITE 231 WAITE PARK, MN 56387		PC	TEREBINTH REFUGE GENERAL OPERATIONS	25,000.
THE ASHEVILLE SCHOOL 360 ASHEVILLE SCHOOL RD. ASHEVILLE, NC 28806		PC	CODY FUND	750.
THE HUMANE SOCIETY OF THE UNITED STATES 1255 23RD ST NW WASHINGTON, DC 20037		PC	UNRESTRICTED USE	100.
THE UNITARIAN FELLOWSHIP FOR WORLD PEACE 234 S DUTOIT ST. DAYTON, OH 45402		PC	MISSING PIECE ART SPACE - UNRESTRICTED	500.
THE WORLD HOUSE CHOIR PO BOX 655 YELLOW SPRINGS, OH 45387		PC	OUR PLANET- OUR LIVES	2,500.
Total from continuation sheets				

Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
THE YES NETWORK PO BOX 1042 ST. CLOUD, MN 56302-1042		PC	ENGAGING YOUTH IN BUILDING HEALTHY NEIGHBORHOODS, AN INSIDE-OUT APPROACH	38,000.
TRI COUNTY HUMANE SOCIETY PO BOX 701 ST. CLOUD, MN 56301		PC	UNRESTRICTED USE	250.
TRUSTEES OF GRINNELL COLLEGE 733 BROAD STREET GRINNELL, IA 50112		PC	\$1000 FOR GENERAL OPERATING FUND, \$1000 FOR WOMEN'S SOCCER	2,000.
UNITECLOUD PO BOX 851 ST. CLOUD, MN 56302		PC	TRANSFORMING COMMUNITIES THROUGH EDUCATION AND ENGAGEMENT	22,440.
UNITED WAY OF CENTRAL MINNESOTA 921 1ST STREET NORTH, SUITE 200 ST. CLOUD, MN 56303		PC	HOUSING FIRST CENTRAL MINNESOTA	100,000.
UNITED WAY OF THE GREATER DAYTON AREA 33 WEST FIRST STREET DAYTON, OH 45402		PC	LIVE UNITED FUND	5,000.
WACOSA 310 SUNDIAL DRIVE WAITE PARK, MN 56379-0757		PC	UNRESTRICTED USE	1,500.
Total from continuation sheets				

Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
WAITE PARK SOMALI COMMUNITY ASSOCIATION 600 8TH AVENUE NORTH, # 3 ST. CLOUD, MN 56303		PC	GENERAL OPERATING SUPPORT	35,000.
WESTERN NORTH CAROLINA PUBLIC RADIO, INC. 73 BROADWAY ST ASHEVILLE, NC 28801		PC	BLUE RIDGE PUBLIC RADIO	250.
WOUNDED WARRIOR PROJECT PO BOX 758517 TOPEKA, KS 66675		PC	UNRESTRICTED USE	250.
WOUNDED WARRIOR PROJECT PO BOX 758517 TOPEKA, KS 66675		PC	UNRESTRICTED USE	250.
WRIGHT STATE UNIVERSITY FOUNDATION 3640 COLONEL GLENN HIGHWAY DAYTON, OH 45435-0001		PC	DEAN'S LEADERSHIP SCHOLARSHIP FUND	1,000.
YELLOW SPRINGS ARTS COUNCIL PO BOX 459 YELLOW SPRINGS, OH 45387-0459		PC	WHEELING GAUNT SCULPTURE PROJECT	10,000.
YELLOW SPRINGS COMMUNITY CHILDREN'S CENTER 320 CORRY STREET YELLOW SPRINGS, OH 45387		PC	OPERATIONS SUPPORT	10,000.
Total from continuation sheets				

Part XV Supplementary Information (continued)

3a Grants and Contributions Paid During the Year

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
YELLOW SPRINGS COMMUNITY CHILDREN'S CENTER 320 CORRY STREET YELLOW SPRINGS, OH 45387		PC	UNRESTRICTED USE	250.
YELLOW SPRINGS COMMUNITY FOUNDATION P.O. BOX 55 YELLOW SPRINGS, OH 45387-0055		PC	UNRESTRICTED USE IN MEMORY OF VIRGIL HERVEY	150.
YELLOW SPRINGS EXEMPTED VILLAGE SCHOOL DISTRICT 201 S. WALNUT STREET YELLOW SPRINGS, OH 45387		GOV	HIGH SCHOOL DRAMA FUND TO PURCHASE ADDITIONAL MICROPHONES	1,500.
YELLOW SPRINGS HOME, INC. P.O. BOX 503 YELLOW SPRINGS, OH 45387-1729		PC	2020 CAPACITY BUILDING TO SUPPORT STRATEGIC GROWTH	10,000.
YELLOW SPRINGS MEN'S GROUP PO BOX 263 YELLOW SPRINGS, OH 45387		PC	UPDATED BROCHURES FOR THE JAMES A. MCKEE ASSOCIATION	1,500.
YELLOW SPRINGS SENIOR CITIZENS, INC. 227 XENIA AVE. YELLOW SPRINGS, OH 45387-1965		PC	AGE FRIENDLY YELLOW SPRINGS	16,000.
Total from continuation sheets				

Part XV Supplementary Information (continued)

3b Grants and Contributions Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
ANTIOCH COLLEGE CORPORATION ONE MORGAN PLACE YELLOW SPRINGS, OH 45387		PC	YEARS 2-3 GRANT: INCREASING SUSTAINABLE ENROLLMENT FOR A COLLEGE OF PRACTICE	450,000.
ARTHUR MORGAN SCHOOL 60 AMS CIRCLE BURNSVILLE, NC 28714		PC	PAYMENT ON GRANT: BUILDING THE FUTURE, THE CAMPAIGN FOR ARTHUR MORGAN SCHOOL	200,000.
COMMUNITYGIVING 101 7TH AVENUE SOUTH # 100 ST. CLOUD, MN 56301		PC	SECOND PAYMENT ON GRANT: JUGAAD LEADERSHIP AND MENTORING PROGRAM	17,500.
YELLOW SPRINGS COMMUNITY FOUNDATION P.O. BOX 55 YELLOW SPRINGS, OH 45387-0055		PC	YEARS 1-3 OF GRANT: YELLOW SPRINGS COMMUNITY SUPPORT	150,000.
Total from continuation sheets				817,500.

Name
MORGAN FAMILY FOUNDATION

Employer identification number
30-0205024

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

Part I Required Annual Payment

1	Total tax (see instructions)	1	58,859.
2a	Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1	2a	
2b	Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method	2b	
2c	Credit for federal tax paid on fuels (see instructions)	2c	
2d	Total. Add lines 2a through 2c	2d	
3	Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation does not owe the penalty	3	58,859.
4	Enter the tax shown on the corporation's 2018 income tax return. See instructions. Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5	4	64,061.
5	Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3	5	58,859.

Part II Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it does not owe a penalty. See instructions.

- 6 The corporation is using the adjusted seasonal installment method.
- 7 The corporation is using the annualized income installment method.
- 8 The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

Part III Figuring the Underpayment

	(a)	(b)	(c)	(d)	
9 Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year	9	05/15/19	06/15/19	09/15/19	12/15/19
10 Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column	10		15,265.	19,888.	784.
11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions	11	14,539.		20,000.	2,000.
Complete lines 12 through 18 of one column before going to the next column.					
12 Enter amount, if any, from line 18 of the preceding column	12		14,539.		
13 Add lines 11 and 12	13		14,539.	20,000.	2,000.
14 Add amounts on lines 16 and 17 of the preceding column	14			726.	614.
15 Subtract line 14 from line 13. If zero or less, enter -0-	15	14,539.	14,539.	19,274.	1,386.
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-	16		0.	0.	
17 Underpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18	17		726.	614.	
18 Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column	18	14,539.			

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

Part IV Figuring the Penalty

	(a)	(b)	(c)	(d)
19 Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions	19			
20 Number of days from due date of installment on line 9 to the date shown on line 19	20			
21 Number of days on line 20 after 4/15/2019 and before 7/1/2019	21			
22 Underpayment on line 17 x $\frac{\text{Number of days on line 21} \times 6\% (0.06)}{365}$...	22 \$	\$	\$	\$
23 Number of days on line 20 after 06/30/2019 and before 10/1/2019	23			
24 Underpayment on line 17 x $\frac{\text{Number of days on line 23} \times 5\% (0.05)}{365}$...	24 \$	\$	\$	\$
25 Number of days on line 20 after 9/30/2019 and before 1/1/2020	25			
26 Underpayment on line 17 x $\frac{\text{Number of days on line 25} \times 5\% (0.05)}{365}$...	26 \$	\$	\$	\$
27 Number of days on line 20 after 12/31/2019 and before 4/1/2020	27	SEE ATTACHED WORKSHEET		
28 Underpayment on line 17 x $\frac{\text{Number of days on line 27} \times 5\% (0.05)}{366}$...	28 \$	\$	\$	\$
29 Number of days on line 20 after 3/31/2020 and before 7/1/2020	29			
30 Underpayment on line 17 x $\frac{\text{Number of days on line 29} \times \%}{366}$	30 \$	\$	\$	\$
31 Number of days on line 20 after 6/30/2020 and before 10/1/2020	31			
32 Underpayment on line 17 x $\frac{\text{Number of days on line 31} \times \%}{366}$	32 \$	\$	\$	\$
33 Number of days on line 20 after 9/30/2020 and before 1/1/2021	33			
34 Underpayment on line 17 x $\frac{\text{Number of days on line 33} \times \%}{366}$	34 \$	\$	\$	\$
35 Number of days on line 20 after 12/31/2020 and before 3/16/2021	35			
36 Underpayment on line 17 x $\frac{\text{Number of days on line 35} \times \%}{365}$	36 \$	\$	\$	\$
37 Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37 \$	\$	\$	\$
38 Penalty. Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the comparable line for other income tax returns	38			18.

* Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

Schedule A Adjusted Seasonal Installment Method and Annualized Income Installment Method

See instructions.

Form 1120-S filers: For lines 1, 2, 3, and 21, "taxable income" refers to excess net passive income or the amount on which tax is imposed under section 1374(a), whichever applies.

Part I Adjusted Seasonal Installment Method

Caution: Use this method only if the base period percentage for any 6 consecutive months is at least 70%. See instructions.

		(a)	(b)	(c)	(d)
		First 3 months	First 5 months	First 8 months	First 11 months
1 Enter taxable income for the following periods.					
a Tax year beginning in 2016	1a				
b Tax year beginning in 2017	1b				
c Tax year beginning in 2018	1c				
2 Enter taxable income for each period for the tax year beginning in 2019. See the instructions for the treatment of extraordinary items	2				
3 Enter taxable income for the following periods.		First 4 months	First 6 months	First 9 months	Entire year
a Tax year beginning in 2016	3a				
b Tax year beginning in 2017	3b				
c Tax year beginning in 2018	3c				
4 Divide the amount in each column on line 1a by the amount in column (d) on line 3a	4				
5 Divide the amount in each column on line 1b by the amount in column (d) on line 3b	5				
6 Divide the amount in each column on line 1c by the amount in column (d) on line 3c	6				
7 Add lines 4 through 6	7				
8 Divide line 7 by 3.0	8				
9a Divide line 2 by line 8	9a				
b Extraordinary items (see instructions)	9b				
c Add lines 9a and 9b	9c				
10 Figure the tax on the amt on ln 9c using the instr for Form 1120, Sch J, line 2, or comparable line of corp's return ...	10				
11a Divide the amount in columns (a) through (c) on line 3a by the amount in column (d) on line 3a	11a				
b Divide the amount in columns (a) through (c) on line 3b by the amount in column (d) on line 3b	11b				
c Divide the amount in columns (a) through (c) on line 3c by the amount in column (d) on line 3c	11c				
12 Add lines 11a through 11c	12				
13 Divide line 12 by 3.0	13				
14 Multiply the amount in columns (a) through (c) of line 10 by columns (a) through (c) of line 13. In column (d), enter the amount from line 10, column (d)	14				
15 Enter any alternative minimum tax (trusts only) for each payment period. See instructions	15				
16 Enter any other taxes for each payment period. See instr.	16				
17 Add lines 14 through 16	17				
18 For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c. See instructions	18				
19 Total tax after credits. Subtract line 18 from line 17. If zero or less, enter -0-	19				

Part II ^{**} **Annualized Income Installment Method**

		(a)	(b)	(c)	(d)
		First <u>2</u> months	First <u>3</u> months	First <u>6</u> months	First <u>9</u> months
20	Annualization periods (see instructions)	20			
21	Enter taxable income for each annualization period. See instructions for the treatment of extraordinary items	21	381,608.	1,171,770.	1,347,631.
22	Annualization amounts (see instructions)	22	6.000000	4.000000	2.000000
23a	Annualized taxable income. Multiply line 21 by line 22 ...	23a	1,526,432.	2,343,540.	1,796,837.
b	Extraordinary items (see instructions)	23b			
c	Add lines 23a and 23b	23c	1,526,432.	2,343,540.	1,796,837.
24	Figure the tax on the amount on line 23c using the instructions for Form 1120, Schedule J, line 2, or comparable line of corporation's return	24	30,529.	46,871.	35,937.
25	Enter any alternative minimum tax (trusts only) for each payment period (see instructions)	25			
26	Enter any other taxes for each payment period. See instr.	26			
27	Total tax. Add lines 24 through 26	27	30,529.	46,871.	35,937.
28	For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c. See instructions	28			
29	Total tax after credits. Subtract line 28 from line 27. If zero or less, enter -0-	29	30,529.	46,871.	35,937.
30	Applicable percentage	30	25%	50%	75%
31	Multiply line 29 by line 30	31	15,265.	35,153.	35,937.

Part III **Required Installments**

		1st	2nd	3rd	4th	
		installment	installment	installment	installment	
Note: Complete lines 32 through 38 of one column before completing the next column.						
32	If only Part I or Part II is completed, enter the amount in each column from line 19 or line 31. If both parts are completed, enter the smaller of the amounts in each column from line 19 or line 31	32	0.	15,265.	35,153.	35,937.
33	Add the amounts in all preceding columns of line 38. See instructions	33		15,265.	35,153.	
34	Adjusted seasonal or annualized income installments. Subtract line 33 from line 32. If zero or less, enter -0- ...	34		15,265.	19,888.	784.
35	Enter 25% (0.25) of line 5 on page 1 of Form 2220 in each column. Note: "Large corporations," see the instructions for line 10 for the amounts to enter	35	14,715.	14,715.	14,714.	14,715.
36	Subtract line 38 of the preceding column from line 37 of the preceding column	36		14,715.	14,165.	8,991.
37	Add lines 35 and 36	37	14,715.	29,430.	28,879.	23,706.
38	Required installments. Enter the smaller of line 34 or line 37 here and on page 1 of Form 2220, line 10. See instructions	38	0.	15,265.	19,888.	784.

Form 2220 (2019)

**** ANNUALIZED INCOME INSTALLMENT METHOD USING STANDARD OPTION**

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
CHECKING ACCOUNT	7.	7.	
SAVINGS ACCOUNT	2,269.	2,269.	
TOTAL TO PART I, LINE 3	2,276.	2,276.	

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
HUNTINGTON	1,898,989.	491,748.	1,407,241.	1,407,241.	
TO PART I, LINE 4	1,898,989.	491,748.	1,407,241.	1,407,241.	

FORM 990-PF OTHER INCOME STATEMENT 3

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
PRI LOAN INTEREST INCOME	5,952.	5,952.	
MISCELLANEOUS INCOME	224.	224.	
OTHER INVESTMENT INCOME	3,056.	3,056.	
TOTAL TO FORM 990-PF, PART I, LINE 11	9,232.	9,232.	

FORM 990-PF LEGAL FEES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	4,031.	0.		0.
TO FM 990-PF, PG 1, LN 16A	4,031.	0.		0.

FORM 990-PF

ACCOUNTING FEES

STATEMENT 5

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	25,205.	18,705.		0.
TO FORM 990-PF, PG 1, LN 16B	25,205.	18,705.		0.

FORM 990-PF

OTHER PROFESSIONAL FEES

STATEMENT 6

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PAYROLL SERVICE	2,542.	0.		0.
CONTRACT LABOR	67,609.	0.		67,609.
ACCOUNT FEES	21,435.	21,435.		0.
INVESTMENT CONSULTANT FEES	96,148.	96,148.		0.
OTHER CONSULTING FEES	13,800.	0.		2,550.
DESIGN COMMUNICATION CONSULTANT FEES	2,621.	0.		0.
NONBOARD COMMITTEE COMP	2,400.	844.		1,556.
OTHER INVESTMENT FEES	3,782.	3,782.		0.
INVESTMENT INTEREST EXPENSE	19,070.	16,841.		0.
CUSTODIAN FEES	14,818.	14,818.		0.
INVESTMENT MANAGER FEES	78,633.	78,633.		0.
TO FORM 990-PF, PG 1, LN 16C	322,858.	232,501.		71,715.

FORM 990-PF

TAXES

STATEMENT 7

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAXES	5.	5.		0.
FEDERAL EXCISE TAXES	48,000.	0.		0.
OHIO FILING FEES	200.	0.		0.
TO FORM 990-PF, PG 1, LN 18	48,205.	5.		0.

FORM 990-PF

OTHER EXPENSES

STATEMENT 8

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INSURANCE	7,858.	0.		0.
DUES AND SUBSCRIPTIONS	13,886.	0.		924.
OFFICE EQUIPMENT, SOFTWARE & SUPPLIES	12,415.	0.		7,365.
INTERNET & TECHNOLOGY SERVICES	27,249.	0.		4,710.
POSTAGE & DELIVERY	562.	0.		0.
POST OFFICE BOX	194.	0.		0.
INVESTMENT WIRE FEES	0.	0.		0.
TO FORM 990-PF, PG 1, LN 23	62,164.	0.		12,999.

FORM 990-PF

OTHER INCREASES IN NET ASSETS OR FUND BALANCES

STATEMENT 9

DESCRIPTION	AMOUNT
UNREALIZED GAINS/LOSSES ON INVESTMENTS	4,740,107.
CHANGE IN RESERVES FOR GRANTS PAYABLE	317,500.
TOTAL TO FORM 990-PF, PART III, LINE 3	5,057,607.

FORM 990-PF

CORPORATE STOCK

STATEMENT 10

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
AEROJET ROCKETDYNE HOLDINGS INC	9,634.	9,634.
ALLEGHENY TECHNOLOGIES INC	6,735.	6,735.
ALLETE INC NEW COMMON	11,770.	11,770.
AMC ENTERTAINMENT HOLDINGS INC - CL A	4,496.	4,496.
AMERICAN EAGLE OUTFITTERS INC NEW	9,114.	9,114.
AMERICAN EQUITY INVT LIFE	8,710.	8,710.
ASBURY AUTOMOTIVE GROUP	8,608.	8,608.
BANC OF CALIFORNIA INC	5,515.	5,515.
BANCORPSOUTH BANK	18,469.	18,469.
BANKUNITED INC	15,282.	15,282.
BEACON ROOFING SUPPLY INC	10,841.	10,841.
BELDEN INC	10,615.	10,615.
BLACK HILLS CORP	10,289.	10,289.
BROOKDALE SENIOR LIVING INC	6,398.	6,398.
BRUNSWICK CORP	11,156.	11,156.
CALERES INC	11,020.	11,020.
CALLON PETROLEUM CORP	3,168.	3,168.
CARPENTER TECHNOLOGY	6,919.	6,919.
DELEK US HOLDINGS INC	8,584.	8,584.
DIAMONDROCK HOSPITALITY CO	9,141.	9,141.
DIODES INC	10,710.	10,710.
DYCOM INDS INC	13,202.	13,202.
EMCOR GROUP INC	9,579.	9,579.
FIRST COMWLTH FINL CORP	11,100.	11,100.
FIRST FINANCIAL BANCORP	8,115.	8,115.
FIRST INDUSTRIAL REALTY TRUST W/1 RT/SH	16,687.	16,687.
FLEXTRONICS INTL LTD	9,919.	9,919.
FORMFACTOR INC	13,712.	13,712.
FULTON FINANCIAL CORP	13,229.	13,229.
G-III APPAREL GROUP LTD	11,993.	11,993.
GRAY TELEVISION INC	11,578.	11,578.
HANCOCK HOLDING CO	13,691.	13,691.
HANOVER INSURANCE GROUP COMMON	10,524.	10,524.
HELIX ENERGY SOLUTIONS GROUP COMMON STOCK	13,896.	13,896.
HUB GROUP INC CL A	9,130.	9,130.
IBERIABANK CORP	5,612.	5,612.
JACK IN THE BOX INC	9,442.	9,442.
KBR INC	15,342.	15,342.
KEMPER CORP 1 RT PER SHARE EXP 08-04-14	10,075.	10,075.
KITE REALTY GROUP TRUST	9,062.	9,062.

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MACK-CALI REALTY CORP	12,837.	12,837.
MAGELLAN HEALTH INC NEW COMMON	17,059.	17,059.
MAGNOLIA OIL & GAS CORP	13,322.	13,322.
NCR CORP	11,075.	11,075.
NEW JERSEY RESOURCES	9,984.	9,984.
NORTHWESTERN CORPORATION	10,034.	10,034.
NUANCE COMMUNICATIONS COMMON STOCK NEW 1RT PER SHARE EXP 8/19/15	12,178.	12,178.
ONE GAS INC	9,731.	9,731.
PACWEST BANCORP	10,409.	10,409.
PENN NATIONAL GAMING INC	17,202.	17,202.
PENNSYLVANIA REAL ESTATE INVESTMENT TRUST	3,385.	3,385.
PERFORMANCE FOOD GROUP CO	14,106.	14,106.
PHYSICIANS REALTY TRUST	13,656.	13,656.
PIPER JAFFRAY CO	8,234.	8,234.
PNM RESOURCES INC	12,627.	12,627.
PRIMERICA INC	10,314.	10,314.
PROSPERITY BANCSHARES INC	9,489.	9,489.
RLI CORP	12,873.	12,873.
SAIA INC COMMON STOCK	12,571.	12,571.
SANMINA CORPORATION	9,211.	9,211.
SELECT MEDICAL HOLDINGS CORP	16,455.	16,455.
SKYWEST INC	14,994.	14,994.
SOUTHWEST GAS HOLDINGS INC	12,383.	12,383.
STAG INDUSTRIAL INC	13,038.	13,038.
STIFEL FINANCIAL CORP	14,738.	14,738.
SUMMIT HOTEL PROPERTIES INC	8,984.	8,984.
SYNOVUS FINL CORP	13,739.	13,739.
TEAM INC	6,372.	6,372.
TTM TECHNOLOGIES	10,460.	10,460.
UNITED COMMUNITY BANK	13,309.	13,309.
VERINT SYSTEMS INC	8,692.	8,692.
WERNER ENTERPRISE	9,025.	9,025.
AAR CORP 1 RT PER	11,275.	11,275.
ALEXANDER & BALDWIN INC	7,986.	7,986.
AZZ INCORPORATED	12,131.	12,131.
BED BATH & BEYOND INC	10,501.	10,501.
BERKSHIRE HILLS BANCORP INC	14,007.	14,007.
BJ'S WHOLESALE CLUB HOLDINGS INC	8,982.	8,982.
CARETRUST REIT INC	9,841.	9,841.
CAROLINA FINANCIAL CORP	5,793.	5,793.
CATHAY GENERAL BANCORP	13,698.	13,698.
CENTURY COMMUNITIES INC	10,448.	10,448.
CHART INDS INC	12,823.	12,823.
CITY OFFICE REIT, INC.	4,759.	4,759.
CLEAN HARBORS INC	10,890.	10,890.
CLEVELAND-CLIFFS INC	11,567.	11,567.
COHU INC W/1 RT/SH	6,307.	6,307.
COLFAX CORP	10,186.	10,186.
CONDUENT INC	6,064.	6,064.
CONMED CORP	12,860.	12,860.
CONTINENTAL BUILDING PRODUCTS INC	11,475.	11,475.
COUSINS PROPERTIES INC	742.	742.
CTS CORP	6,512.	6,512.
DANA INC	8,627.	8,627.
DIEBOLD NIXDORF INC W/1 RT/SH	8,744.	8,744.
ESSENTIAL PROPERTIES REALTY TRUST INC	10,470.	10,470.
FIRST BANCORP NORTH CAROLINA	5,707.	5,707.

MORGAN FAMILY FOUNDATION

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FIRST MERCHANTS CORP COM	13,226.	13,226.
GREAT WESTERN BANCORP INC	17,648.	17,648.
HELEN OF TROY LTD	7,371.	7,371.
HERITAGE FINANCIAL CORP	5,660.	5,660.
INFINERA CORP	7,559.	7,559.
INGEVITY CORPORATION	9,262.	9,262.
KENNAMETAL INC W/1 RT/SH	10,366.	10,366.
KNOWLES CORPORATION	6,387.	6,387.
LADDER CAPITAL CORP - REIT	1,588.	1,588.
LEXINGTON REALTY TRUST	10,259.	10,259.
LIONS GATE ENTERTAINMENT CORP	5,511.	5,511.
LOUISIANA PAC W/1 RT/SH EXPIRES 06/06/2008	12,343.	12,343.
LUMENTUM HOLDINGS INC	12,926.	12,926.
MACOM TECHNOLOGY SOLUTIONS HOLDINGS INC	12,130.	12,130.
MARCUS CORPORATION	5,941.	5,941.
MATADOR RESOURCES CO	8,554.	8,554.
MERITOR INC	13,200.	13,200.
MGIC INVESTMENT CORP W/1 RT/SH EXPIRES 07/22/2009	9,466.	9,466.
PDC ENERGY INC	8,270.	8,270.
PERSPECTA INC	9,624.	9,624.
REGAL BELOIT CORPORATION	9,331.	9,331.
SANDERSON FARMS INC W/1 RT/SH	10,926.	10,926.
SITE CENTERS CORP	10,753.	10,753.
SPIRE INC	9,497.	9,497.
STERLING BANCORP	9,423.	9,423.
STEWART INFO SVCS	5,384.	5,384.
SUMMIT MATERIALS INC - CL A	8,795.	8,795.
SUNSTONE HOTEL INVESTORS	4,092.	4,092.
THE SIMPLY GOOD FOODS COMPANY	7,991.	7,991.
TRIUMPH GROUP INC	7,177.	7,177.
US CONCRETE INC	7,207.	7,207.
VERITEX HOLDINGS INC	13,109.	13,109.
VIAVI SOLUTIONS INC	9,780.	9,780.
WES BANCO INC	13,529.	13,529.
WESTERN ALLIANCE BANCORP	15,276.	15,276.
WESTERN ASSET MORTGAGE CAPITAL CORP	2,076.	2,076.
WOLVERINE WORLD WIDE INC	10,561.	10,561.
WORLD FUEL SERVICES	10,508.	10,508.
TOTAL TO FORM 990-PF, PART II, LINE 10B	<u>1,370,649.</u>	<u>1,370,649.</u>

FORM 990-PF

OTHER INVESTMENTS

STATEMENT 11

DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
FEDERATED TOTAL RETURN BOND FUND - INSTITUTIONAL SHARES	COST	1,963,963.	1,963,963.
JP MORGAN CORE BOND FUND-CLASS I	COST	2,389,244.	2,389,244.
VANGUARD MID CAP INDEX FUND - ADMIRAL SHARES	COST	2,641,352.	2,641,352.
AQR LONG-SHORT EQUITY FUND - I	COST	1,270,022.	1,270,022.
DFA INTERNATIONAL CORE EQUITY PORTFOLIO - INVESTOR	COST	2,484,488.	2,484,488.
DIAMOND HILL LONG-SHORT FUND-Y	COST	1,316,463.	1,316,463.
LIMITED PARTNERSHIP CARLSON CAPITAL LP BLACK DIAMOND ARBITRAGE, LTD SERIES A		1,832,318.	1,832,318.
LIMITED PARTNERSHIP HCAP PARTNERS IV, LP	COST	448,965.	448,965.
LIMITED PARTNERSHIP WHITE OAK FIXED INCOME FUND C L.P.	COST	1,196,772.	1,196,772.
MERIDIAN SMALL CAP GROWTH FUND-RTR	COST	1,326,002.	1,326,002.
NEUBERGER BERMAN SOC RESP-IS	COST	1,404,137.	1,404,137.
PRUDENTIAL FLOATING RATE INCOME FUND CLASS Z	COST	965,919.	965,919.
PRUDENTIAL GLOBAL REAL ESTATE FUND - CLASS Z	COST	289,524.	289,524.
TRANSAMERICA INTERNATIONAL EQUITY - I	COST	2,728,677.	2,728,677.
VANGUARD INSTITUTIONAL INDEX FUND - INSTITUTIONAL SHARES	COST	13,602,866.	13,602,866.
VANGUARD SHORT-TERM BOND INDEX FUND - ADMIRAL SHARES	COST	1,276,584.	1,276,584.
WELLS FARGO ABSOLUTE RETURN FUND - CLASS INST	COST	1,597,330.	1,597,330.
FIDELITY FID INTER TREASURY BOND INDEX FUND	COST	1,482,245.	1,482,245.
INVESCO OPPENHEIMER DEVELOPING MARKETS FUND- I	COST	2,513,541.	2,513,541.
LIMITED PARTNERSHIP GENERATION IM SUSTAINABLE SOLUTIONS FUND III (A), L.P.		186,746.	186,746.
LIMITED PARTNERSHIP HARRISON STREET CORE PROPERTY FUND, L.P.	COST	1,514,479.	1,514,479.
NATIONWIDE INTL SMALL CAP R6	COST	1,341,021.	1,341,021.
PAX WORLD GLB ENVIR MARKETS INSTL	COST	1,070,116.	1,070,116.
TOTAL TO FORM 990-PF, PART II, LINE 13		46,842,774.	46,842,774.

FORM 990-PF DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 12

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
LEASEHOLD IMPROVEMENT	98,181.	43,363.	54,818.
TOTAL TO FM 990-PF, PART II, LN 14	98,181.	43,363.	54,818.

FORM 990-PF OTHER ASSETS STATEMENT 13

DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
PRI LOAN RECEIVABLE	297,590.	297,590.	297,590.
PRI LOAN INTEREST RECEIVABLE	3,082.	9,034.	9,034.
SOFTWARE	2,457.	0.	0.
TO FORM 990-PF, PART II, LINE 15	303,129.	306,624.	306,624.

FORM 990-PF OTHER LIABILITIES STATEMENT 14

DESCRIPTION	BOY AMOUNT	EOY AMOUNT
DENTAL & VISION EMPLOYEE WITHHOLDING	-300.	-326.
TOTAL TO FORM 990-PF, PART II, LINE 22	-300.	-326.

FORM 990-PF EXPLANATION CONCERNING PART VII-A, LINE 12
QUALIFYING DISTRIBUTION STATEMENT STATEMENT 15

EXPLANATION

THE FOUNDATION MADE A DISTRIBUTION TO A DONOR ADVISED FUND AT COMMUNITYGIVING.

FORM 990-PF

EXPLANATION CONCERNING PART VII-A, LINE 12
SECTION 170(C)(2)(B) STATEMENT

STATEMENT 16

EXPLANATION

IN ACCORDANCE WITH COMMUNITY GIVING'S POLICIES, A RECOMMENDATION WAS SUBMITTED AND SUBSEQUENTLY APPROVED FOR A DISTRIBUTION WHICH WAS PAID FROM THE DONOR ADVISED FUND TO ACCOMPLISH A CHARITABLE PURPOSE AS DESCRIBED IN SECTION 170(C)(2)(B).

FORM 990-PF

PART VIII - LIST OF OFFICERS, DIRECTORS
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 17

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
LEE M. MORGAN 506 S HIGH ST., SUITE B YELLOW SPRINGS, OH 45387	PRESIDENT 1.25	5,670.	0.	0.
VICTORIA A. MORGAN 506 S HIGH ST., SUITE B YELLOW SPRINGS, OH 45387	VICE PRESIDENT 1.00	3,200.	0.	0.
BARCLAY CARRIAR 506 S HIGH ST., SUITE B YELLOW SPRINGS, OH 45387	TREASURER 1.00	3,550.	0.	0.
ASHA MORGAN MORAN 506 S HIGH ST., SUITE B YELLOW SPRINGS, OH 45387	DIRECTOR 1.00	3,800.	0.	0.
JUDITH THOMPSON 506 S HIGH ST., SUITE B YELLOW SPRINGS, OH 45387	DIRECTOR 1.00	3,150.	0.	0.
KARLA MORGAN 506 S HIGH ST., SUITE B YELLOW SPRINGS, OH 45387	DIRECTOR 1.00	3,800.	0.	0.
RONALD BRANDENBURG 506 S HIGH ST., SUITE B YELLOW SPRINGS, OH 45387	DIRECTOR 1.00	3,200.	0.	0.
LORI M. KUHN 506 S HIGH ST., SUITE B YELLOW SPRINGS, OH 45387	EXEC. DIRECTOR/SECRETARY 32.00	156,140.	56,130.	0.
STEPHEN T. WILLIAMS 506 S HIGH ST., SUITE B YELLOW SPRINGS, OH 45387	CFO/ASSISTANT TREASURER 30.00	88,314.	17,976.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		270,824.	74,106.	0.

NAME OF MANAGER

LEE M. MORGAN
VICTORIA A. MORGAN

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

PLEASE VISIT WWW.MORGANFAMILYFDN.ORG FOR MORE INFORMATION.
506 S HIGH ST. SUITE B
YELLOW SPRINGS, OH 45387

TELEPHONE NUMBER

937-767-9208

EMAIL ADDRESS

INFO@MORGANFAMILYFDN.ORG

FORM AND CONTENT OF APPLICATIONS

ORGANIZATIONS SEEKING GRANTS SHOULD FIRST REVIEW THE FOUNDATION'S GRANT GUIDELINES AND PROCESS AVAILABLE AT WWW.MORGANFAMILYFDN.ORG. IF APPROPRIATE, GRANTSEEKERS SHOULD COMPLETE THE FOUNDATION'S ONLINE LETTER OF INQUIRY (LOI) PROCESS, AVAILABLE AT HTTP://MORGANFAMILYFDN.EGRANT.NET. THE FOUNDATION THEN SELECTS ORGANIZATIONS TO CONTINUE IN THE GRANTSEEKING PROCESS. FOR THOSE THAT CONTINUE, THE ORGANIZATIONS PROVIDE ADDITIONAL INFORMATION ABOUT THE APPLICANT ORGANIZATION, DETAILS OF THE REQUEST, BUDGET AND FINANCES, WHICH ARE MOSTLY SUBMITTED ONLINE WITH SOME INFORMATION PROVIDED VERBALLY THROUGH SCHEDULED VISIT(S) OR CONVERSATION(S) WITH A FOUNDATION REPRESENTATIVE.

ANY SUBMISSION DEADLINES

NO DEADLINES HAVE BEEN SET YET FOR 2021, ALTHOUGH THE FIRST DEADLINE IS USUALLY IN JANUARY.

RESTRICTIONS AND LIMITATIONS ON AWARDS

MOST FOUNDATION GRANTS ARE AWARDED TO 501(C)(3) PUBLIC CHARITIES, AND HISTORICALLY HAVE HAD A GEOGRAPHICAL FOCUS ON THE COMMUNITIES OF YELLOW SPRINGS, OHIO AND ST. CLOUD, MINNESOTA. BEGINNING IN 2020, NEW GRANTS FOCUS ON ADVANCING SOCIAL EQUITY IN ST. CLOUD, MITIGATING GLOBAL WARMING IN MINNESOTA, AND ADDRESSING END-OF-LIFE ISSUES IN CENTRAL MINNESOTA. THE ST. CLOUD SOCIAL EQUITY THEME IS THE ONLY GRANT PROGRAM CURRENTLY WITH AN OPEN REQUEST PROCESS. GLOBAL WARMING AND END-OF-LIFE ARE NOT OPEN TO UNSOLICITED REQUESTS AT PRESENT. FURTHER DETAILS ARE AVAILABLE ON THE FOUNDATION'S WEBSITE, WWW.MORGANFAMILYFDN.ORG. THE FOUNDATION DOES NOT MAKE GRANTS TO INDIVIDUALS OR FOR LOBBYING LEGISLATION OR INFLUENCING PUBLIC ELECTIONS. THE FOUNDATION ALSO AWARDS OCCASIONAL GRANTS TO PRE-SELECTED PUBLIC

RESTRICTIONS AND LIMITATIONS ON AWARDS

CHARITIES IN OTHER LOCALITIES AND/OR FOR OTHER PURPOSES.

990-PF

INVOLVEMENT WITH NONCHARITABLE ORGANIZATIONS
PART XVII, LINE 1, COLUMN (D)

STATEMENT 21

NAME OF NONCHARITABLE EXEMPT ORGANIZATION

YELLOW SPRINGS CHAMBER OF COMMERCE

DESCRIPTION OF TRANSFERS, TRANSACTIONS, AND SHARING ARRANGEMENTS

PAYMENT OF ANNUAL MEMBERSHIP DUES

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

2019

For calendar year 2019 or other tax year beginning _____, and ending _____

▶ Go to www.irs.gov/Form990T for instructions and the latest information.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Department of the Treasury
Internal Revenue Service

Open to Public Inspection for
501(c)(3) Organizations Only

<p>A <input type="checkbox"/> Check box if address changed</p> <p>B Exempt under section <input checked="" type="checkbox"/> 501(c)(3)) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a)</p>	Print or Type	<p>Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.) MORGAN FAMILY FOUNDATION</p> <p>Number, street, and room or suite no. If a P.O. box, see instructions. 506 S HIGH ST STE B</p> <p>City or town, state or province, country, and ZIP or foreign postal code YELLOW SPRINGS, OH 45387-0561</p>	<p>D Employer identification number (Employees' trust, see instructions.) 30-0205024</p> <p>E Unrelated business activity code (See instructions.) 523000</p>
--	----------------------	--	---

<p>C Book value of all assets at end of year 49,135,845.</p>	<p>F Group exemption number (See instructions.) ▶</p>	<p>G Check organization type ▶ <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust</p>
---	--	---

H Enter the number of the organization's unrelated trades or businesses. ▶ 1 Describe the only (or first) unrelated trade or business here ▶ **PARTNERSHIP INVESTMENTS**. If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V.

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No
 If "Yes," enter the name and identifying number of the parent corporation. ▶

J The books are in care of ▶ **THE FOUNDATION** Telephone number ▶ **937-767-9208**

Part I Unrelated Trade or Business Income	(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales			
b Less returns and allowances			
c Balance	1c		
2 Cost of goods sold (Schedule A, line 7)	2		
3 Gross profit. Subtract line 2 from line 1c	3		
4a Capital gain net income (attach Schedule D)	1.		1.
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b		
c Capital loss deduction for trusts	4c		
5 Income (loss) from a partnership or an S corporation (attach statement)	-6,871.	STMT 22	-6,871.
6 Rent income (Schedule C)	6		
7 Unrelated debt-financed income (Schedule E)	7		
8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F)	8		
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9		
10 Exploited exempt activity income (Schedule I)	10		
11 Advertising income (Schedule J)	11		
12 Other income (See instructions; attach schedule)	12		
13 Total. Combine lines 3 through 12	-6,870.		-6,870.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Deductions must be directly connected with the unrelated business income.)			
14 Compensation of officers, directors, and trustees (Schedule K)		14	
15 Salaries and wages		15	
16 Repairs and maintenance		16	
17 Bad debts		17	
18 Interest (attach schedule) (see instructions)		18	
19 Taxes and licenses		19	
20 Depreciation (attach Form 4562)	20		
21 Less depreciation claimed on Schedule A and elsewhere on return	21a	21b	
22 Depletion		22	
23 Contributions to deferred compensation plans		23	
24 Employee benefit programs		24	
25 Excess exempt expenses (Schedule I)		25	
26 Excess readership costs (Schedule J)		26	
27 Other deductions (attach schedule)		27	
28 Total deductions. Add lines 14 through 27		28	0.
29 Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13		29	-6,870.
30 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)	SEE STATEMENT 23	30	0.
31 Unrelated business taxable income. Subtract line 30 from line 29		31	-6,870.

Part III Total Unrelated Business Taxable Income

32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	32	-6,870.
33	Amounts paid for disallowed fringes	33	
34	Charitable contributions (see instructions for limitation rules)	34	0.
35	Total unrelated business taxable income before pre-2018 NOLs and specific deduction. Subtract line 34 from the sum of lines 32 and 33	35	-6,870.
36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	36	
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35	37	-6,870.
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	38	1,000.
39	Unrelated business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37, enter the smaller of zero or line 37	39	-6,870.

Part IV Tax Computation

40	Organizations Taxable as Corporations. Multiply line 39 by 21% (0.21)	40	0.
41	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 39 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	41	
42	Proxy tax. See instructions	42	
43	Alternative minimum tax (trusts only)	43	
44	Tax on Noncompliant Facility Income. See instructions	44	
45	Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies	45	0.

Part V Tax and Payments

46a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	46a	
b	Other credits (see instructions)	46b	
c	General business credit. Attach Form 3800	46c	
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	46d	
e	Total credits. Add lines 46a through 46d	46e	
47	Subtract line 46e from line 45	47	0.
48	Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule)	48	
49	Total tax. Add lines 47 and 48 (see instructions)	49	0.
50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	50	0.
51a	Payments: A 2018 overpayment credited to 2019	51a	
b	2019 estimated tax payments	51b	
c	Tax deposited with Form 8868	51c	
d	Foreign organizations: Tax paid or withheld at source (see instructions)	51d	
e	Backup withholding (see instructions)	51e	
f	Credit for small employer health insurance premiums (attach Form 8941)	51f	
g	Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other Total	51g	
52	Total payments. Add lines 51a through 51g	52	
53	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	53	
54	Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	54	
55	Overpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	55	
56	Enter the amount of line 55 you want: Credited to 2020 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	56	

Part VI Statements Regarding Certain Activities and Other Information (see instructions)

57	At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here	Yes	No
58	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.		X
59	Enter the amount of tax-exempt interest received or accrued during the tax year \$		

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

EXECUTIVE DIRECTOR & SECRETARY

Signature of officer _____ Date _____ Title _____

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

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	KAREN O CRIM	KAREN O CRIM	11/11/20		P00368385
	Firm's name RSM US LLP	Firm's address 6 S PATTERSON BLVD DAYTON, OH 45402		Firm's EIN 42-0714325	Phone no. 937-298-0201

Schedule A - Cost of Goods Sold. Enter method of inventory valuation ► **N/A**

1	Inventory at beginning of year	1		6	Inventory at end of year	6			
2	Purchases	2		7	Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	7			
3	Cost of labor	3		8	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?			Yes	No
4a	Additional section 263A costs (attach schedule)	4a							
b	Other costs (attach schedule)	4b							
5	Total. Add lines 1 through 4b	5							

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions)

1. Description of property

(1)	
(2)	
(3)	
(4)	

2. Rent received or accrued

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total	0.	Total 0.

(c) **Total income.** Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A)

(b) **Total deductions.** Enter here and on page 1, Part I, line 6, column (B) ... 0.

Schedule E - Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property	2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property		
		(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)	
(1)				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
Totals			Enter here and on page 1, Part I, line 7, column (A). 0.	Enter here and on page 1, Part I, line 7, column (B). 0.
Total dividends-received deductions included in column 8			0.	0.

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
			Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A).	Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).
Totals			0.	0.

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
		Enter here and on page 1, Part I, line 9, column (A).		Enter here and on page 1, Part I, line 9, column (B).
Totals		0.		0.

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
	Enter here and on page 1, Part I, line 10, col. (A).	Enter here and on page 1, Part I, line 10, col. (B).				Enter here and on page 1, Part II, line 25.
Totals	0.	0.				0.

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))	0.	0.				0.

Part II **Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals from Part I	0.	0.				0.
Totals, Part II (lines 1-5)	Enter here and on page 1, Part I, line 11, col. (A). 0.	Enter here and on page 1, Part I, line 11, col. (B). 0.				Enter here and on page 1, Part II, line 26. 0.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14			0.

FORM 990-T	INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 22
DESCRIPTION		NET INCOME OR (LOSS)
WHITE OAK FIXED INCOME FUND C, LP - ORDINARY BUSINESS INCOME (LOSS)		1,191.
WHITE OAK FIXED INCOME FUND C, LP - OTHER NET RENTAL INCOME (LOSS)		-5,833.
GENERATION IM SUSTAINABLE SOLUTIONS FUND III (A) LP - OTHER INCOME (LOSS)		-2,229.
TOTAL INCLUDED ON FORM 990-T, PAGE 1, LINE 5		-6,871.

FORM 990-T	NET OPERATING LOSS DEDUCTION			STATEMENT 23
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/18	13,567.	0.	13,567.	13,567.
NOL CARRYOVER AVAILABLE THIS YEAR			13,567.	13,567.

Capital Gains and Losses
 Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L,
 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.
 Go to www.irs.gov/Form1120 for instructions and the latest information.

2019

Name **MORGAN FAMILY FOUNDATION** Employer identification number **30-0205024**

Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year? Yes No
 If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Part I Short-Term Capital Gains and Losses (See instructions.)

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b				
1b Totals for all transactions reported on Form(s) 8949 with Box A checked				
2 Totals for all transactions reported on Form(s) 8949 with Box B checked				
3 Totals for all transactions reported on Form(s) 8949 with Box C checked				
4 Short-term capital gain from installment sales from Form 6252, line 26 or 37				4
5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824				5
6 Unused capital loss carryover (attach computation)				6 ()
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column h				7

Part II Long-Term Capital Gains and Losses (See instructions.)

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b				
8b Totals for all transactions reported on Form(s) 8949 with Box D checked				
9 Totals for all transactions reported on Form(s) 8949 with Box E checked				
10 Totals for all transactions reported on Form(s) 8949 with Box F checked				
11 Enter gain from Form 4797, line 7 or 9				11 1.
12 Long-term capital gain from installment sales from Form 6252, line 26 or 37				12
13 Long-term capital gain or (loss) from like-kind exchanges from Form 8824				13
14 Capital gain distributions				14
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column h				15 1.

Part III Summary of Parts I and II

16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15)	16	
17 Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7)	17	1.
18 Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the proper line on other returns	18	1.

Note: If losses exceed gains, see *Capital Losses* in the instructions.

Sales of Business Property
 (Also Involuntary Conversions and Recapture Amounts
 Under Sections 179 and 280F(b)(2))
 Attach to your tax return.

OMB No. 1545-0184

2019
 Attachment
 Sequence No. **27**

▶ Go to www.irs.gov/Form4797 for instructions and the latest information.

MORGAN FAMILY FOUNDATION

Identifying number
30-0205024

1 Enter the gross proceeds from sales or exchanges reported to you for 2019 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 **1**

Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft—Most Property Held More Than 1 Year (see instructions)

2	(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
	WHITE OAK FIXED INCOME FUND C, LP-WHITE						1.
3	Gain, if any, from Form 4684, line 39						3
4	Section 1231 gain from installment sales from Form 6252, line 26 or 37						4
5	Section 1231 gain or (loss) from like-kind exchanges from Form 8824						5
6	Gain, if any, from line 32, from other than casualty or theft						6
7	Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows Partnerships and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120-S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below. Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below.						7
8	Nonrecaptured net section 1231 losses from prior years. See instructions						8
9	Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return. See instructions						9

Part II Ordinary Gains and Losses (see instructions)

10 Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less):

11	Loss, if any, from line 7	11	()
12	Gain, if any, from line 7 or amount from line 8, if applicable	12	
13	Gain, if any, from line 31	13	
14	Net gain or (loss) from Form 4684, lines 31 and 38a	14	
15	Ordinary gain from installment sales from Form 6252, line 25 or 36	15	
16	Ordinary gain or (loss) from like-kind exchanges from Form 8824	16	
17	Combine lines 10 through 16	17	
18	For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below.		
a	If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the loss from income-producing property on Schedule A (Form 1040 or Form 1040-SR), line 16. (Do not include any loss on property used as an employee.) Identify as from "Form 4797, line 18a." See instructions	18a	
b	Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1 (Form 1040 or Form 1040-SR), Part I, line 4	18b	

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **4797** (2019)

Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255 (see instructions)

19 (a) Description of section 1245, 1250, 1252, 1254, or 1255 property:		(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)
A			
B			
C			
D			
These columns relate to the properties on lines 19A through 19D.			
	▶	Property A	Property B
20	Gross sales price (Note: See line 1 before completing.)	20	
21	Cost or other basis plus expense of sale	21	
22	Depreciation (or depletion) allowed or allowable	22	
23	Adjusted basis. Subtract line 22 from line 21	23	
24	Total gain. Subtract line 23 from line 20	24	
25	If section 1245 property:		
a	Depreciation allowed or allowable from line 22	25a	
b	Enter the smaller of line 24 or 25a	25b	
26	If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.		
a	Additional depreciation after 1975. See instructions	26a	
b	Applicable percentage multiplied by the smaller of line 24 or line 26a. See instructions	26b	
c	Subtract line 26a from line 24. If residential rental property or line 24 isn't more than line 26a, skip lines 26d and 26e	26c	
d	Additional depreciation after 1969 and before 1976	26d	
e	Enter the smaller of line 26c or 26d	26e	
f	Section 291 amount (corporations only)	26f	
g	Add lines 26b, 26e, and 26f	26g	
27	If section 1252 property: Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership.		
a	Soil, water, and land clearing expenses	27a	
b	Line 27a multiplied by applicable percentage	27b	
c	Enter the smaller of line 24 or 27b	27c	
28	If section 1254 property:		
a	Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions	28a	
b	Enter the smaller of line 24 or 28a	28b	
29	If section 1255 property:		
a	Applicable percentage of payments excluded from income under section 126. See instructions	29a	
b	Enter the smaller of line 24 or 29a. See instructions	29b	

Summary of Part III Gains. Complete property columns A through D through line 29b before going to line 30.

30	Total gains for all properties. Add property columns A through D, line 24	30	
31	Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13	31	
32	Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion from other than casualty or theft on Form 4797, line 6	32	

Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less (see instructions)

		(a) Section 179	(b) Section 280F(b)(2)
33	Section 179 expense deduction or depreciation allowable in prior years	33	
34	Recomputed depreciation. See instructions	34	
35	Recapture amount. Subtract line 34 from line 33. See the instructions for where to report	35	

Return of U.S. Persons With Respect to Certain Foreign Partnerships

▶ **Go to www.irs.gov/Form8865 for instructions and the latest information.**

2019

Department of the Treasury
Internal Revenue Service

Information furnished for the foreign partnership's tax year

beginning **JAN 1**, 2019, and ending **DEC 31**, 2019

Attachment
Sequence No. **118**

Name of person filing this return

Filer's identification number

30-0205024

MORGAN FAMILY FOUNDATION

Filer's address (if you aren't filing this form with your tax return)

A Category of filer (see Categories of Filers in the instructions and check applicable box(es)):

1 2 3 4

B Filer's tax year beginning **JAN 1**, 2019, and ending **DEC 31**, 2019

C Filer's share of liabilities: Nonrecourse \$ Qualified nonrecourse financing \$ Other \$ **73,825.**

D If filer is a member of a consolidated group but not the parent, enter the following information about the parent:

Name

EIN

Address

E Check if any excepted specified foreign financial assets are reported on this form. See instructions

F Information about certain other partners (see instructions)

(1) Name	(2) Address	(3) Identification number	(4) Check applicable box(es)		
			Category 1	Category 2	Constructive owner

G1 Name and address of foreign partnership

**GENERATION IM SUSTAINABLE SOLUTIONS FUND III (A) LP
PO BOX 255, TRAFALGAR COURT
LES BANQUES, GUERNSEY GY1 3DA**

2(a) EIN (if any)

98-1450398

2(b) Reference ID number

3 Country under whose laws organized

GUERNSEY

4 Date of organization 07/17/2018	5 Principal place of business GUERNSEY	6 Principal business activity code number 523900	7 Principal business activity INVESTMENTS	8a Functional currency USD	8b Exchange rate (see instructions)
--	---	---	--	---	--

H Provide the following information for the foreign partnership's tax year:

1 Name, address, and identification number of agent (if any) in the United States

2 Check if the foreign partnership must file:

Form 1042 Form 8804 Form 1065

Service Center where Form 1065 is filed:

E-FILE

3 Name and address of foreign partnership's agent in country of organization, if any

**NORTHERN TRUST (GUERNSEY) LIMITED
TRAFALGAR COURT, LES BANQUES
ST. PETER PORT, GUERNSEY GY1 3QL**

4 Name and address of person(s) with custody of the books and records of the foreign partnership, and the location of such books and records, if different

**NORTHERN TRUST (GUERNSEY) LIMITED
TRAFALGAR COURT, LES BANQUES
ST. PETER PORT, GUERNSEY GY1 3QL**

5 During the tax year, did the foreign partnership pay or accrue any interest or royalty for which the deduction is not allowed under section 267A? See instructions

▶ Yes No

If "Yes," enter the total amount of the disallowed deductions

▶ \$

6 Is the partnership a section 721(c) partnership, as defined in Temporary Regulations section 1.721(c)-1T(b)(14)?

▶ Yes No

7 Were any special allocations made by the foreign partnership?

▶ Yes No

8 Enter the number of Forms 8858, Information Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs), attached to this return. See instructions

▶ **0**

9 How is this partnership classified under the law of the country in which it's organized?

▶ **PARTNERSHIP**

10 a Does the filer have an interest in the foreign partnership, or an interest indirectly through the foreign partnership, that's a separate unit under Reg. 1.1503(d)-1(b)(4) or part of a combined separate unit under Reg. 1.1503(d)-1(b)(4)(ii)? If "No," skip question 10b

▶ Yes No

b If "Yes," does the separate unit or combined separate unit have a dual consolidated loss, as defined in Reg. 1.1503(d)-1(b)(5)(ii)?

▶ Yes No

11 Does this partnership meet both of the following requirements?

- 1. The partnership's total receipts for the tax year were less than \$250,000.
 - 2. The value of the partnership's total assets at the end of the tax year was less than \$1 million.
- If "Yes," don't complete Schedules L, M-1, and M-2.

▶ Yes No

LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form **8865** (2019)

- 12 a** Is the filer of this Form 8865 claiming a foreign-derived intangible income deduction (under section 250) with respect to any amounts listed on Schedule N? Yes No
- b** If "Yes," enter the amount of gross income derived from sales, leases, exchanges, or other dispositions (but not licenses) from transactions with or by the foreign partnership that the filer included in its computation of foreign-derived deduction eligible income (FDDEI) ▶ _____
- c** If "Yes," enter the amount of gross income derived from a license of property to or by the foreign partnership that the filer included in its computation of FDDEI ▶ _____
- d** If "Yes," enter the amount of gross income derived from services provided to or by the foreign partnership that the filer included in its computation of FDDEI ▶ _____
- 13** Enter the number of foreign partners subject to section 864(c)(8) as a result of transferring all or a portion of an interest in the partnership or of receiving a distribution from the partnership ▶ _____
- 14** At any time during the tax year were any transfers between the partnership and its partners subject to the disclosure requirements of Regulations section 1.707-8? Yes No
- 15 a** Were there any transfers of property or money within a 2-year period between the partnership and any of its partners that would require disclosure under Regs. 1.703-3 or 1.707-6? If "Yes," attach a statement identifying the transfers, the amount or value of each transfer, and an explanation of the tax treatment. See instructions for exceptions Yes No
- b** Did the partnership assume a liability or receive property subject to a liability where such liability was incurred by a partner within a 2-year period of transferring the property to the partnership? If "Yes," attach a statement identifying the property transferred, the amount or value of each transfer, the debt assumed or taken by the partnership, and an explanation of the tax treatment Yes No

Sign Here Only if You're Filing This Form Separately and Not With Your Tax Return. Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than general partner or limited liability company member) is based on all information of which preparer has any knowledge.

▶ _____ Signature of general partner or limited liability company member ▶ _____ Date

Paid Preparer Use Only	Print/Type preparer's name KAREN O CRIM	Preparer's signature KAREN O CRIM	Date 11/11/20	Check <input type="checkbox"/> if self-employed	PTIN P00368385
	Firm's name ▶ RSM US LLP				Firm's EIN ▶ 42-0714325
	Firm's address ▶ 6 S PATTERSON BLVD				Phone no. 937-298-0201
	DAYTON, OH 45402				

Schedule A Constructive Ownership of Partnership Interest. Check the boxes that apply to the filer. If you check box **b**, enter the name, address, and U.S. taxpayer identification number (if any) of the person(s) whose interest you constructively own. See instructions.

a Owns a direct interest **b** Owns a constructive interest

Name	Address	Identification number (if any)	Check if foreign person	Check if direct partner

Schedule A-1 Certain Partners of Foreign Partnership (see instructions)

Name	Address	Identification number (if any)	Check if foreign person

Schedule A-2 Foreign Partners of Section 721(c) Partnership (see instructions)

Name of foreign partner	Address	Country of organization (if any)	U.S. taxpayer identification number (if any)	Check if related to U.S. transferor	Percentage interest	
					Capital	Profits
				<input type="checkbox"/>	%	%
				<input type="checkbox"/>	%	%

Does the partnership have any other foreign person as a direct partner? Yes No

Schedule A-3 Affiliation Schedule. List all partnerships (foreign or domestic) in which the foreign partnership owns a direct interest or indirectly owns a 10% interest.

Name	Address	EIN (if any)	Total ordinary income or loss	Check if foreign partnership
GENERATION IM SUSTAINABLE	PO BOX 255 TRAFALGAR COURT	98-1449975		X
	LES BANQUES, GUERNSEY GY1			

**SCHEDULE O
(Form 8865)**

(Rev. December 2018)
Department of the Treasury
Internal Revenue Service

**Transfer of Property to a Foreign Partnership
(Under Section 6038B)**

▶ **Attach to Form 8865. See the Instructions for Form 8865.**
▶ **Go to www.irs.gov/Form8865 for instructions and the latest information.**

OMB No. 1545-1668

Name of transferor MORGAN FAMILY FOUNDATION		Filer's identifying number 30-0205024
Name of foreign partnership GENERATION IM SUSTAINABLE SOLUTIONS FUND III (A) LP	EIN (if any) 98-1450398	Reference ID number (see instr)
1 a Is the partnership a section 721(c) partnership (as defined in Temporary Regulations section 1.721(c)-1T(b)(14))? See instructions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No b If "Yes," was the gain deferral method applied to avoid the recognition of gain upon the contribution of property? <input type="checkbox"/> Yes <input type="checkbox"/> No		
2 Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Part I Transfers Reportable Under Section 6038B							
Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Recovery period	(f) Section 704(c) allocation method	(g) Gain recognized on transfer
Cash	08/26/19		205,000.				
Stock, notes receivable and payable, and other securities							
Inventory							
Tangible property used in trade or business							
Intangible property described in section 197(f)(9)							
Intangible property, other than intangible property described in section 197(f)(9)							
Other property							
Totals			205,000.				

3 Enter the transferor's percentage interest in the partnership: (a) Before the transfer **.0000** % (b) After the transfer **.3121** %

Supplemental Information Required To Be Reported (see instructions):

Part II Dispositions Reportable Under Section 6038B							
(a) Type of property	(b) Date of original transfer	(c) Date of disposition	(d) Manner of disposition	(e) Gain recognized by partnership	(f) Depreciation recapture recognized by partnership	(g) Gain allocated to partner	(h) Depreciation recapture allocated to partner

Part III Is any transfer reported on this schedule subject to gain recognition under section 904(f)(3) or section 904(f)(5)(F)? Yes No

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 8865. Schedule O (Form 8865) 12-2018