

**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](http://www.irs.gov/Form990PF) for instructions and the latest information.

For calendar year **2022** or tax year beginning , and ending

Name of foundation <b>MORGAN FAMILY FOUNDATION</b>		<b>A Employer identification number</b> 30-0205024
Number and street (or P.O. box number if mail is not delivered to street address) <b>506 S HIGH ST STE B</b>	Room/suite	<b>B Telephone number</b> 937-767-9208
City or town, state or province, country, and ZIP or foreign postal code <b>YELLOW SPRINGS, OH 45387-0561</b>		<b>C</b> If exemption application is pending, check here ... <input type="checkbox"/>
<b>G</b> Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here ..... <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation ..... <input type="checkbox"/>
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here ... <input type="checkbox"/>
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ <b>46,232,673.</b>	<b>J</b> Accounting method: <input type="checkbox"/> Cash <input type="checkbox"/> Accrual <input checked="" type="checkbox"/> Other (specify) <b>MODIFIED CASH</b> (Part I, column (d), must be on cash basis.)	
<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ... <input type="checkbox"/>		

<b>Part I Analysis of Revenue and Expenses</b> <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)
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, etc., received .....	0.		N/A	
	<b>2</b> Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
	<b>3</b> Interest on savings and temporary cash investments .....	30.	30.		STATEMENT 1
	<b>4</b> Dividends and interest from securities .....	1,636,271.	1,793,082.		STATEMENT 2
	<b>5a</b> Gross rents .....				
	<b>b</b> Net rental income or (loss) .....				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10 .....	1,109,099.			
	<b>b</b> Gross sales price for all assets on line 6a .....	8,150,706.			
	<b>7</b> Capital gain net income (from Part IV, line 2) .....		1,109,096.		
	<b>8</b> Net short-term capital gain .....				
	<b>9</b> Income modifications .....				
	<b>10a</b> Gross sales less returns and allowances .....				
<b>b</b> Less: Cost of goods sold .....					
<b>c</b> Gross profit or (loss) .....					
<b>11</b> Other income .....	21,706.	22,006.		STATEMENT 3	
<b>12 Total.</b> Add lines 1 through 11 .....	2,767,106.	2,924,214.			
<b>Operating and Administrative Expenses</b>	<b>13</b> Compensation of officers, directors, trustees, etc. ....	299,450.	101,580.		150,699.
	<b>14</b> Other employee salaries and wages .....	91,165.	0.		81,473.
	<b>15</b> Pension plans, employee benefits .....	138,103.	34,026.		88,525.
	<b>16a</b> Legal fees ..... <b>STMT 4</b>	15,474.	0.		0.
	<b>b</b> Accounting fees ..... <b>STMT 5</b>	29,218.	4,333.		0.
	<b>c</b> Other professional fees ..... <b>STMT 6</b>	316,561.	146,762.		108,813.
	<b>17</b> Interest .....				
	<b>18</b> Taxes ..... <b>STMT 7</b>	70,700.	0.		200.
	<b>19</b> Depreciation and depletion .....	9,818.	0.		
	<b>20</b> Occupancy .....	14,994.	0.		0.
	<b>21</b> Travel, conferences, and meetings .....	55,063.	531.		9,857.
	<b>22</b> Printing and publications .....				
	<b>23</b> Other expenses ..... <b>STMT 8</b>	85,539.	156,451.		29,242.
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23 .....	1,126,085.	443,683.		468,809.
	<b>25</b> Contributions, gifts, grants paid .....	2,229,709.			2,229,709.
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25 .....	3,355,794.	443,683.		2,698,518.	
<b>27</b> Subtract line 26 from line 12:					
<b>a</b> Excess of revenue over expenses and disbursements ...	-588,688.				
<b>b Net investment income</b> (if negative, enter -0-) .....		2,480,531.			
<b>c Adjusted net income</b> (if negative, enter -0-) .....			N/A		

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only.		
		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 .....	819,957.	2,709,701.	2,709,701.
	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 .....	18,040.	19,470.	19,470.
	10a Investments - U.S. and state government obligations .....			
	b Investments - corporate stock .....	STMT 10 3,639,220.	1,627,864.	1,627,864.
	c Investments - corporate bonds .....			
	11 Investments - land, buildings, and equipment: basis .....			
Less: accumulated depreciation .....				
12 Investments - mortgage loans .....				
13 Investments - other .....	STMT 11 51,761,079.	41,478,211.	41,478,211.	
14 Land, buildings, and equipment: basis .....	258,083.			
Less: accumulated depreciation .....	STMT 12 72,817.	67,366.	185,266.	
15 Other assets (describe .....	STATEMENT 13) 332,068.	212,161.	212,161.	
16 <b>Total assets</b> (to be completed by all filers - see the instructions. Also, see page 1, item I) .....	56,637,730.	46,232,673.	46,232,673.	
Liabilities	17 Accounts payable and accrued expenses .....			
	18 Grants payable .....	170,000.	415,000.	
	19 Deferred revenue .....			
	20 Loans from officers, directors, trustees, and other disqualified persons .....			
	21 Mortgages and other notes payable .....			
	22 Other liabilities (describe .....	STATEMENT 14) -510.	20.	
23 <b>Total liabilities</b> (add lines 17 through 22) .....	169,490.	415,020.		
Net Assets or Fund Balances	<b>Foundations that follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 24, 25, 29, and 30.</b>			
	24 Net assets without donor restrictions .....			
	25 Net assets with donor restrictions .....			
	<b>Foundations that do not follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 26 through 30.</b>			
	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 .....	56,468,240.	45,817,653.	
	29 <b>Total net assets or fund balances</b> .....	56,468,240.	45,817,653.	
30 <b>Total liabilities and net assets/fund balances</b> .....	56,637,730.	46,232,673.		

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	56,468,240.
2 Enter amount from Part I, line 27a .....	2	-588,688.
3 Other increases not included in line 2 (itemize) .....	3	0.
4 Add lines 1, 2, and 3 .....	4	55,879,552.
5 Decreases not included in line 2 (itemize) .....	5	SEE STATEMENT 9 10,061,899.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 .....	6	45,817,653.

**Part IV Capital Gains and Losses for Tax on Investment Income**

	(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	<b>PUBLICLY TRADED SECURITIES (4660)</b>			
b	<b>PUBLICLY TRADED SECURITIES (4697)</b>			
c	<b>PARTNERSHIPS/ALTERNATIVE INVESTMENTS</b>			
d	<b>CAPITAL GAINS DIVIDENDS</b>			
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	5,111,800.		4,897,013.	214,787.
b	2,447,810.		2,144,594.	303,216.
c	47,772.		3.	47,769.
d	543,324.			543,324.
e				

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			214,787.
b			303,216.
c			47,769.
d			543,324.
e			

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	1,109,096.
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). See instructions. If (loss), enter -0- in Part I, line 8 .....	3	N/A

**Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 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)	1	34,479.
b	All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) 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	34,479.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) .....	4	0.
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- .....	5	34,479.
6	Credits/Payments:		
a	2022 estimated tax payments and 2021 overpayment credited to 2022 .....	6a	38,570.
b	Exempt foreign organizations - tax withheld at source .....	6b	0.
c	Tax paid with application for extension of time to file (Form 8868) .....	6c	40,000.
d	Backup withholding erroneously withheld .....	6d	0.
7	Total credits and payments. Add lines 6a through 6d .....	7	78,570.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached .....	8	0.
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than 7, enter <b>amount owed</b> .....	9	
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> .....	10	44,091.
11	Enter the amount of line 10 to be: <b>Credited to 2023 estimated tax</b> 44,091. <b>Refunded</b> .....	11	0.

**Part VI-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
1b 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
1c 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. \$ <u>0.</u> (2) On foundation managers. \$ <u>0.</u>		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ <u>0.</u>		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? .....		X
If "Yes," attach a detailed description of the activities.		
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or 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
4b 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? .....		X
If "Yes," attach the statement required by General Instruction T.		
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • 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 XIV .....	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. _____ <u>OH</u>		
8b 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 General Instruction G? 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 2022 or the tax year beginning in 2022? See the instructions for Part XIII. If "Yes," complete Part XIII .....		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses .....		X
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions .....		X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions .....		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? .....	X	
Website address <u>WWW.MORGANFAMILYFDN.ORG</u>		
14 The books are in care of <u>THE FOUNDATION</u> Telephone no. <u>937-767-9208</u> Located at <u>506 S HIGH ST., SUITE B, YELLOW SPRINGS, OH</u> ZIP+4 <u>45387</u>		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here ..... <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year .....   15   N/A		
16 At any time during calendar year 2022, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? .....		X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country		

**Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
<b>1a</b> During the year, did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? .....	1a(1)	X
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? .....	1a(2)	X
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? .....	1a(3)	X
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? .....	1a(4)	X
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? .....	1a(5)	X
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) .....	1a(6)	X
<b>b</b> If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions .....	1b	X
<b>c</b> Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/>		
<b>d</b> Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2022? .....	1d	X
<b>2</b> Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
<b>a</b> At the end of tax year 2022, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2022? .....	2a	X
If "Yes," list the years _____, _____, _____, _____		
<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement - see instructions.) .....	2b	N/A
<b>c</b> If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here. _____, _____, _____, _____		
<b>3a</b> Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? .....	3a	X
<b>b</b> If "Yes," did it have excess business holdings in 2022 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2022.) .....	3b	N/A
<b>4a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? .....	4a	X
<b>b</b> Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2022? .....	4b	X

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

	Yes	No
<b>5a</b> 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))?		X
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?		X
(3) Provide a grant to an individual for travel, study, or other similar purposes?		X
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions		X
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?		X
<b>b</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	
<b>c</b> Organizations relying on a current notice regarding disaster assistance, check here	<input type="checkbox"/>	
<b>d</b> 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? If "Yes," attach the statement required by Regulations section 53.4945-5(d).	N/A	
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.		X
<b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?		X
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	N/A	
<b>8</b> 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?		X

**Part VII** 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 15		299,450.	83,537.	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 VII 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
ANNA R. HENDERSON, PHD 2166 FAIRMOUNT AVENUE, ST. PAUL, MN 55105	PROGRAM OFFICER	62,310.
NEPC, LLC 255 STATE STREET, BOSTON, MA 02109	INVESTMENT CONSULTING SERVICES	61,901.
CLEARSTEAD, LLC - 1100 SUPERIOR AVE EAST, STE 700, CLEVELAND, OH 44114	INVESTMENT CONSULTING SERVICES	54,361.
<b>Total</b> number of others receiving over \$50,000 for professional services .....		0

**Part VIII-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 VIII-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  SEE STATEMENT 16	7,500.
2  SEE STATEMENT 17	0.
3 All other program-related investments. See instructions.	
<b>Total.</b> Add lines 1 through 3 .....	7,500.

<b>Part IX</b>		<b>Minimum Investment Return</b> (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	47,163,535.
b	Average of monthly cash balances .....	1b	2,082,213.
c	Fair market value of all other assets (see instructions) .....	1c	185,266.
d	<b>Total</b> (add lines 1a, b, and c) .....	1d	49,431,014.
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	49,431,014.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions) .....	4	741,465.
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 .....	5	48,689,549.
6	<b>Minimum investment return.</b> Enter 5% (0.05) of line 5 .....	6	2,434,477.

<b>Part X</b>		<b>Distributable Amount</b> (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here <input type="checkbox"/> and do not complete this part.)	
1	Minimum investment return from Part IX, line 6 .....	1	2,434,477.
2a	Tax on investment income for 2022 from Part V, line 5 .....	2a	34,479.
b	Income tax for 2022. (This does not include the tax from Part V.) .....	2b	
c	Add lines 2a and 2b .....	2c	34,479.
3	Distributable amount before adjustments. Subtract line 2c from line 1 .....	3	2,399,998.
4	Recoveries of amounts treated as qualifying distributions .....	4	0.
5	Add lines 3 and 4 .....	5	2,399,998.
6	Deduction from distributable amount (see instructions) .....	6	0.
7	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1 .....	7	2,399,998.

<b>Part XI</b>		<b>Qualifying Distributions</b> (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	2,698,518.
b	Program-related investments - total from Part VIII-B .....	1b	7,500.
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	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part XII, line 4 .....	4	2,706,018.

Form 990-PF (2022)



**Part XII** Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2021	(c) 2021	(d) 2022
1 Distributable amount for 2022 from Part X, line 7				2,399,998.
2 Undistributed income, if any, as of the end of 2022:				
a Enter amount for 2021 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2022:				
a From 2017				
b From 2018		77,997.		
c From 2019		129,401.		
d From 2020		124,703.		
e From 2021		88,372.		
f Total of lines 3a through e	420,473.			
4 Qualifying distributions for 2022 from Part XI, line 4: \$ 2,706,018.				
a Applied to 2021, 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 2022 distributable amount				2,399,998.
e Remaining amount distributed out of corpus	306,020.			
5 Excess distributions carryover applied to 2022 (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:	726,493.			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
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 2021. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2022. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2023				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 2017 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2023. Subtract lines 7 and 8 from line 6a	726,493.			
10 Analysis of line 9:				
a Excess from 2018	77,997.			
b Excess from 2019	129,401.			
c Excess from 2020	124,703.			
d Excess from 2021	88,372.			
e Excess from 2022	306,020.			

Part XIII Private Operating Foundations (see instructions and Part VI-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 2022, 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) 2022, (b) 2021, (c) 2020, (d) 2019, (e) Total. Rows include 2a-e (Qualifying distributions) and 3a-d (Alternative tests).

Part XIV 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 19

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 18

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 XIV** Supplementary Information *(continued)*

<b>3 Grants and Contributions Paid During the Year or Approved for Future Payment</b>				
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)				
<b>a</b> Paid during the year				
<b>Total</b> ..... <b>SEE CONTINUATION SHEET(S)</b> .....				<b>3a</b> 2,229,709.
<b>b</b> Approved for future payment				
<b>Total</b> ..... <b>SEE CONTINUATION SHEET(S)</b> .....				<b>3b</b> 415,000.

Part XV-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

Table with 5 main columns: (a) Business code, (b) Amount, (c) Exclusion code, (d) Amount, (e) Related or exempt function income. Rows include: 1 Program service revenue (a-f), 2 Membership dues and assessments, 3 Interest on savings and temporary cash investments (14, 30), 4 Dividends and interest from securities (14, 1,636,271), 5 Net rental income or (loss) from real estate (a-b), 6 Net rental income or (loss) from personal property, 7 Other investment income (21, 14, 21,685), 8 Gain or (loss) from sales of assets other than inventory (3, 18, 1,109,096), 9 Net income or (loss) from special events, 10 Gross profit or (loss) from sales of inventory, 11 Other revenue (a-e), 12 Subtotal (24, 2,767,082, 0), 13 Total (2,767,106).

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

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

Table with 2 columns: Line No., Explain below how each activity for which income is reported in column (e) of Part XV-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).

**Part XVI**

**Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations**

<b>1</b>	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?	<b>Yes</b>	<b>No</b>
<b>a</b>	Transfers from the reporting foundation to a noncharitable exempt organization of:		
<b>(1)</b>	Cash	<b>X</b>	
<b>(2)</b>	Other assets		<b>X</b>
<b>b</b>	Other transactions:		
<b>(1)</b>	Sales of assets to a noncharitable exempt organization		<b>X</b>
<b>(2)</b>	Purchases of assets from a noncharitable exempt organization		<b>X</b>
<b>(3)</b>	Rental of facilities, equipment, or other assets		<b>X</b>
<b>(4)</b>	Reimbursement arrangements		<b>X</b>
<b>(5)</b>	Loans or loan guarantees		<b>X</b>
<b>(6)</b>	Performance of services or membership or fundraising solicitations		<b>X</b>
<b>c</b>	Sharing of facilities, equipment, mailing lists, other assets, or paid employees		<b>X</b>
<b>d</b>	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
<b>A1</b>	75.	<b>YELLOW SPRINGS CHAMBER OF COMMERCE</b>	<b>SEE STATEMENT 20</b>

**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
<b>N/A</b>		

<b>Sign Here</b>	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.			<b>EXECUTIVE</b> <b>DIRECTOR &amp; SECRET</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Signature of officer or trustee	Date	Title	

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	<b>KAREN O. CRIM</b>	<b>KAREN O. CRIM</b>	<b>11/10/23</b>		<b>P00368385</b>
	Firm's name	Firm's EIN			
	<b>RSM US LLP</b>	<b>42-0714325</b>			
	Firm's address	Phone no.			
	<b>6 S PATTERSON BLVD DAYTON, OH 45402</b>	<b>937-298-0201</b>			

**Part XIV** 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
ANNA MARIE'S ALLIANCE 505 10TH AVE N ST. CLOUD, MN 56303-3553		PC	(COMPETITIVE) DEVELOPING A DIVERSITY, EQUITY AND INCLUSION PLAN TO ELIMINATE OPPRESSION AMONG THE AGENCY AND COMMUNITY PARTNERS OF ANNA MARIE'S ALLIANCE	15,000.
ASSOCIATION OF SMALL FOUNDATIONS DBA EXPONENT PHILANTHROPY 1720 N STREET NW WASHINGTON, DC 20036		PC	(COMPETITIVE) GENERAL OPERATING SUPPORT	1,500.
BOYS & GIRLS CLUBS OF CENTRAL MINNESOTA 345 30TH AVE N ST. CLOUD, MN 56303-3755		PC	(COMPETITIVE) EASTSIDE, ROOSEVELT & SOUTHSIDE BOYS & GIRLS CLUBS PROGRAMMING FOR YOUTH	100,000.
CENTRACARE HEALTH SYSTEM 1406 6TH AVE. N. ST. CLOUD, MN 56303		PC	(COMPETITIVE) ADVANCE CARE PLANNING - FACILITATING TO EDUCATE, MOTIVATE AND SUPPORT	55,000.
CENTRAL LAKES COLLEGE 1830 AIRPORT ROAD STAPLES, MN 56479		GOV	(COMPETITIVE) AGCENTRIC: COVER CROP FINANCIAL EDUCATION TO SUPPORT FARMERS IN MITIGATING AND ADAPTING TO GLOBAL WARMING	100,000.
CENTRAL MINNESOTA COMMUNITY EMPOWERMENT ORGANIZATION 2719 W. DIVISION ST. SUITE 124 ST. CLOUD, MN 56301-3822		PC	(COMPETITIVE) EQUITABLE ACCESS TO FINANCE	40,200.
CITIZENS UTILITY BOARD OF MINNESOTA 332 MINNESOTA STREET, SUITE W1360 ST. PAUL, MN 55101		PC	(COMPETITIVE) CONSUMER ADVOCACY TO DECARBONIZE MINNESOTA'S UTILITY SECTOR, YEAR 1 OF TWO YEARS	100,000.
<b>Total from continuation sheets</b>				2,229,709.

**Part XIV** 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
CITY OF SARTELL 125 PINECONE RD N SARTELL, MN 56377-1982		GOV	(COMPETITIVE) SARTELL MN REGIONAL INCLUSIVE PLAYGROUND	10,000.
CLEAN UP THE RIVER ENVIRONMENT 117 SOUTH 1ST STREET MONTEVIDEO, MN 56265-5502		PC	(COMPETITIVE) BUILDING THE CAPACITY AND IMPACT OF CURE'S ENERGY DEMOCRACY PROGRAM, YEAR 3	91,500.
CONNECTABILITY OF MN INC. 2700 1ST STREET NORTH SUITE 200 ST. CLOUD, MN 56303		PC	(COMPETITIVE) 2022-2023 CONNECT: ACCESS TO MOBILITY EQUIPMENT AND FILLING TRANSPORTATION GAPS	58,500.
CONSERVATION MINNESOTA 1101 WEST RIVER PARKWAY SUITE 250 MINNEAPOLIS, MN 55415		PC	(COMPETITIVE) ACTIVATING HEALTH PROFESSIONAL VOICES FOR CLIMATE ACTION	75,000.
ELLISON CENTER 600 25TH AVE. SUITE 102 ST. CLOUD, MN 56301-4820		PC	(COMPETITIVE) PROVIDING CULTURALLY APPROPRIATE CARE FROM THE INSIDE OUT	55,000.
FARMERS UNION FOUNDATION 305 ROSELAWN AVE E SUITE 200 ST. PAUL, MN 55117		PC	(COMPETITIVE) EMPOWERING FARMER LEADERSHIP ON CLIMATE AND WORKING LANDS, YEAR 1 OF TWO YEARS	150,000.
FRESH ENERGY 408 SAINT PETER STREET SUITE 350 ST. PAUL, MN 55102-1156		PC	(COMPETITIVE) SPURRING THE GROWTH OF CLEAN ENERGY FOR ALL IN MINNESOTA	66,000.
<b>Total from continuation sheets</b>				

**Part XIV** 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
GENDER JUSTICE 663 UNIVERSITY AVENUE W SUITE 200 ST. PAUL, MN 55104		PC	(COMPETITIVE) COMMUNITY EDUCATION AND PUBLIC AWARENESS CAMPAIGN ON ABORTION CARE AND RIGHTS FOR ST. CLOUD AREA COMMUNITY	10,000.
GREAT RIVER EDUCATIONAL ARTS THEATRE 710 SUNDIAL DR WAITE PARK, MN 56387-1528		PC	(COMPETITIVE) GREAT IMPLEMENTATION OF EDI ACTION PLAN	31,000.
JUGAAD LEADERSHIP PROGRAM PO BOX 2041 ST. CLOUD, MN 56302		PC	(COMPETITIVE) JUGAAD LEADERSHIP PROGRAM- OPERATING SUPPORT	35,000.
JUNIOR ACHIEVEMENT OF THE UPPER MIDWEST 1745 UNIVERSITY AVE W ST. PAUL, MN 55104-3613		PC	(COMPETITIVE) JUNIOR ACHIEVEMENT HIGH SCHOOL PROGRAM SUPPORT FOR SCHOOLS WITH STUDENT POPULATIONS OF 51% OR MORE LMI AND BIPOC	38,000.
LIGHT THE LEGACY 619 W. ST. GERMAIN SUITE 216 ST. CLOUD, MN 56301-3609		PC	(COMPETITIVE) EXPANSION BEYOND THE "TIPPING POINT:" BUILDING CAPACITY FOR LIGHT THE LEGACY - YEAR 2	85,000.
LOAVES & FISHES TOO 721 KASOTA AVENUE SE MINNEAPOLIS, MN 55414		PC	(COMPETITIVE) ST. CLOUD MEAL PROGRAMMING	20,000.
LUTHERAN SOCIAL SERVICE OF MINNESOTA 2485 COMO AVE ST. PAUL, MN 55108-1445		PC	(COMPETITIVE) EMPOWERING REFUGEE FAMILIES	25,000.
<b>Total from continuation sheets</b>				



**Part XIV** 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
MID-MINNESOTA LEGAL ASSISTANCE INCORPORATED 111 N 5TH ST STE 100 MINNEAPOLIS, MN 55403-1633		PC	(COMPETITIVE) LEGAL AID/PROMISE NEIGHBORHOOD PARTNERSHIP	53,109.
MINNESOTA CENTER FOR ENVIRONMENTAL ADVOCACY 1919 UNIVERSITY AVE W SUITE 515 ST. PAUL, MN 55104		PC	(COMPETITIVE) CLIMATE ACTION, CLIMATE JUSTICE: ADVANCING EQUITY FOR VULNERABLE COMMUNITIES WHILE ADDRESSING CLIMATE CHANGE	82,500.
MINNESOTA COUNCIL ON FOUNDATIONS 800 WASHINGTON AVENUE N. SUITE 703 MINNEAPOLIS, MN 55401-1167		PC	(COMPETITIVE) POOLED FUND FOR REGRANTING TO INTERMEDIARY ORGANIZATIONS TO PROMOTE THE EQUITABLE DISTRIBUTION OF FEDERAL AMERICAN RESCUE PLAN AND STATE BUDGET SURPLUS FUNDS	10,000.
MINNESOTA COUNCIL ON FOUNDATIONS 800 WASHINGTON AVENUE N. SUITE 703 MINNEAPOLIS, MN 55401-1167		PC	(COMPETITIVE) GENERAL OPERATING SUPPORT	3,500.
MINNESOTA NETWORK OF HOSPICE & PALLIATIVE CARE 1265 GREY FOX ROAD STE 2 ARDEN HILLS, MN 55112		PC	(COMPETITIVE) COMMUNITY OUTREACH, EDUCATION, AND CONSULTATION PROGRAM	70,000.
PEAK GRANTMAKING 1701 PENNSYLVANIA AVE. NW SUITE 200 WASHINGTON, DC 20006		PC	(COMPETITIVE) GENERAL OPERATING SUPPORT	300.
PHILANTHROPY OHIO 500 S. FRONT STREET SUITE 900 COLUMBUS, OH 43215-7628		PC	(COMPETITIVE) GENERAL OPERATING SUPPORT	3,500.
<b>Total from continuation sheets</b>				

**Part XIV** 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 MINNESOTA NORTH DAKOTA SOUTH DAKOTA 671 VANDALIA ST ST. PAUL, MN 55114-1312		PC	(COMPETITIVE) BUILDING THE HEALTHIEST GENERATION IN ST. CLOUD	50,000.
QUEERSPACE COLLECTIVE 4030 WASHBURN AVE. N. MINNEAPOLIS, MN 55412-1510		PC	(COMPETITIVE) QUEERSPACE HANGOUTS LGBTQ+ MENTORSHIP PROGRAM: ST. CLOUD EXPANSION	70,000.
QUIET OAKS 5537 GALAXY RD. ST. CLOUD, MN 56301		PC	(COMPETITIVE) END OF LIFE WELLNESS AND EDUCATION	25,000.
RISE INCORPORATED 8406 SUNSET RD NE SPRING LAKE PARK, MN 55432-1317		PC	(COMPETITIVE) PARTNERSHIP FOR A SUCCESSFUL RE-ENTRY: PRE-RELEASE EMPLOYMENT SUPPORTS FOR INCARCERATED INDIVIDUALS WITH MENTAL ILLNESS IN CENTRAL MINNESOTA	15,000.
SAHAN JOURNAL 428 MINNESOTA STREET, SUITE 500 ST. PAUL, MN 55101-2666		PC	(COMPETITIVE) CLIMATE CHANGE REPORTING AND EDITORIAL SUPPORT, YEAR 2 OF TWO YEARS	120,000.
SENIOR CARE COMMUNITIES, INC 161 ST ANTHONY AVENUE SUITE 825 ST. PAUL, MN 55103		PC	(COMPETITIVE) DOULA DRIVEN DEATH EDUCATION PROJECT	15,000.
SERVEMINNESOTA 120 S 6TH ST STE 2260 MINNEAPOLIS, MN 55402-1824		PC	(COMPETITIVE) TOTAL LEARNING CLASSROOM AT MADISON ELEMENTARY	55,000.
<b>Total from continuation sheets</b>				

**Part XIV** 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
SHARING OUR ROOTS 4905 315TH ST. W. NORTHFIELD, MN 55057		PC	(COMPETITIVE) CLIMATE LAND LEADERS IN MINNESOTA: OPTIMISM, COMMITMENT AND ACTION	100,000.
ST. CLOUD STATE UNIVERSITY FOUNDATION 720 FOURTH AVENUE SOUTH ST. CLOUD, MN 56301-4442		PC	(COMPETITIVE) DR. MARTIN LUTHER KING, JR. COMMUNITY CELEBRATION 2023 SPONSORSHIP	5,000.
ST. CLOUD TECHNICAL & COMMUNITY COLLEGE FOUNDATION 1540 NORTHWAY DRIVE ST. CLOUD, MN 56303		PC	(COMPETITIVE) CULTIVATING COMMUNITY FOR OUR STUDENTS: EQUITY BY DESIGN FACULTY ACADEMY AND INTERCULTURAL LEADERSHIP DEVELOPMENT AS TRANSFORMATIVE TOOLS	67,000.
TEREBINTH REFUGE 110 2ND ST S STE 231 WAITE PARK, MN 56387-1313		PC	(COMPETITIVE) INCREASING MENTAL HEALTH WELLNESS IN OUR SHELTER PROGRAM	35,000.
THE CENTER FOR VICTIMS OF TORTURE 2356 UNIVERSITY AVE W STE 430 ST. PAUL, MN 55114		PC	(COMPETITIVE) CVT ST. CLOUD	50,000.
TOO MUCH TALENT 1410 WEST SAINT GERMAIN SUITE 104 ST. CLOUD, MN 56301-6289		PC	(COMPETITIVE) TOO MUCH TALENT SOCIAL EQUITY PROGRAM EXPANSION	70,000.
UNIVERSITY OF MINNESOTA FOUNDATION MCNAMARA ALUMNI CENTER OAK ST SE, STE. 500 MINNEAPOLIS, MN 55455-2010		PC	(COMPETITIVE) MEANINGFUL CONNECTIONS - CONVERSATIONS THAT MATTER	40,000.
<b>Total from continuation sheets</b>				

**Part XIV** 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 FOUNDATION P.O. BOX 55 YELLOW SPRINGS, OH 45387-0055		PC	(COMPETITIVE) YELLOW SPRINGS COMMUNITY SUPPORT, YEAR 3 OF THREE YEARS	50,000.
ANTIOCH COLLEGE CORPORATION 1 MORGAN PLACE YELLOW SPRINGS, OH 45387		PC	(MATCHING) UNRESTRICTED USE	2,000.
BOYS & GIRLS CLUBS OF CENTRAL MINNESOTA 345 30TH AVE N ST. CLOUD, MN 56303-3755		PC	(MATCHING) UNRESTRICTED USE	2,000.
CENTRAL MINNESOTA HABITAT FOR HUMANITY 3335 W SAINT GERMAIN ST STE 108 ST. CLOUD, MN 56301-7321		PC	(MATCHING) UNRESTRICTED USE	500.
FRIENDS OF THE HOUSE OF THE PEOPLE INC 696 RENOLDA WOOD CT. DAYTON, OH 45429-3415		PC	(MATCHING) HOUSE OF THE PEOPLE	500.
GLEN HELEN ASSOCIATION 405 CORRY STREET YELLOW SPRINGS, OH 45387		PC	(MATCHING) CAMPAIGN TO SECURE THE FUTURE OF GLEN HELEN	2,500.
GREAT RIVER EDUCATIONAL ARTS THEATRE 710 SUNDIAL DR WAITE PARK, MN 56387-1528		PC	(MATCHING) UNRESTRICTED USE	7,500.
<b>Total from continuation sheets</b> .....				

**Part XIV** 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 45387-1816		PC	(MATCHING) UNRESTRICTED USE	1,000.
KNOX COUNTY FOUNDATION 101 E. GAMBIER STREET, P.O. BOX 309 MT. VERNON, OH 43050		PC	(MATCHING) MARY HENDRICKSON NEW DIRECTIONS FUND	2,500.
LEAGUE OF WOMEN VOTERS OF THE GREATER DAYTON AREA 127 N LUDLOW ST. TALBOTT TOWER, SUITE 1208 DAYTON, OH 45402		PC	(MATCHING) UNRESTRICTED USE	2,000.
LIGHT THE LEGACY 619 W. ST. GERMAIN SUITE 216 ST. CLOUD, MN 56301-3609		PC	(MATCHING) EVENT SPONSORSHIP SEPT 22, 2022	800.
MANNA FOODBANK INC. 627 SWANNANOA RIVER RD. ASHEVILLE, NC 28805-2445		PC	(MATCHING) UNRESTRICTED USE	1,500.
MID-MINNESOTA LEGAL ASSISTANCE INCORPORATED 111 N 5TH ST STE 100 MINNEAPOLIS, MN 55403-1633		PC	(MATCHING) UNRESTRICTED USE	2,000.
NORTHWESTERN UNIVERSITY KELLOGG SCHOOL OF MGMT OFFICE OF ADVANCEMENT EVANSTON, IL 60201		PC	(MATCHING) KELLOGG ANNUAL FUND	1,500.
<b>Total from continuation sheets</b>				

**Part XIV** 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
OAKWOOD HISTORICAL SOCIETY, INC. 1947 FAR HILLS AVENUE OAKWOOD, OH 45419		PC	(MATCHING) UNRESTRICTED USE	1,000.
PLANNED PARENTHOOD OF SOUTHWEST OHIO REGION 2314 AUBURN AVE CINCINNATI, OH 45219-2802		PC	(MATCHING) UNRESTRICTED USE	2,500.
PLANNED PARENTHOOD SOUTH ATLANTIC 100 S. BOYLAN AVE. RALEIGH, NC 27603		PC	(MATCHING) UNRESTRICTED USE	1,000.
QUIET OAKS 5537 GALAXY RD. ST. CLOUD, MN 56301		PC	(MATCHING) UNRESTRICTED USE	1,500.
REGENTS OF THE UNIVERSITY OF MICHIGAN 3003 SOUTH STATE STREET, SUITE 8000 ANN ARBOR, MI 48109-1288		PC	(MATCHING) MEN'S SWIM TEAM	1,500.
RIDING CENTRE ASSOCIATION 1117 E. HYDE ROAD YELLOW SPRINGS, OH 45387		PC	(MATCHING) UNRESTRICTED USE	200.
SCHOOL YEAR ABROAD INC. 120 WATER ST. SUITE 310 NORTH ANDOVER, MA 01845		PC	(MATCHING) FINANCIAL AID	1,000.
<b>Total from continuation sheets</b>				

**Part XIV** 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 AREA FAMILY YMCA 2001 STOCKINGER DRIVE ST. CLOUD, MN 56303-1243		PC	(MATCHING) UNRESTRICTED USE	2,500.
ST. CLOUD STATE UNIVERSITY 720 4TH AVE SOUTH AS210 ST. CLOUD, MN 56301-4498		GOV	(MATCHING) SCHOOL OF PUBLIC AFFAIRS	2,500.
THE ARTHUR MORGAN INSTITUTE FOR COMMUNITY SOLUTIONS PO BOX 243 YELLOW SPRINGS, OH 45387		PC	(MATCHING) SUPPORT OF EDUCATIONAL PROGRAM	8,000.
THE ARTHUR MORGAN INSTITUTE FOR COMMUNITY SOLUTIONS PO BOX 243 YELLOW SPRINGS, OH 45387		PC	(MATCHING) RESEARCH SUPPORT	9,200.
THE ARTHUR MORGAN INSTITUTE FOR COMMUNITY SOLUTIONS PO BOX 243 YELLOW SPRINGS, OH 45387		PC	(MATCHING) RESEARCH SUPPORT	2,000.
UNITED WAY OF THE GREATER DAYTON AREA 33 WEST FIRST STREET SUITE 500 DAYTON, OH 45402		PC	(MATCHING) \$5,000 TO STRONG FAMILIES FUND, MONTGOMERY COUNTY; \$2,000 JOHN MOORE SOCIETY/FREEDOM SCHOOLS	7,000.
TRUSTEES OF GRINNELL COLLEGE 733 BROAD STREET GRINNELL, IA 50112		PC	(MATCHING) GENERAL OPERATING FUND	3,000.
<b>Total from continuation sheets</b>				

**Part XIV** 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
UNITARIAN FELLOWSHIP FOR WORLD PEACE 234 S. DUTOIT ST. DAYTON, OH 45402		PC	(MATCHING) MISSING PEACE ART SPACE	500.
WACOSA 310 SUNDIAL DRIVE PO BOX 757 WAITE PARK, MN 56379-0757		PC	(MATCHING) UNRESTRICTED USE	1,500.
WESTERN NORTH CAROLINA PUBLIC RADIO INC. 73 BROADWAY ST ASHEVILLE, NC 28801		PC	(MATCHING) UNRESTRICTED USE	500.
YELLOW SPRINGS COMMUNITY CHILDRENS CENTER 320 CORRY STREET YELLOW SPRINGS, OH 45387		PC	(MATCHING) UNRESTRICTED USE	100.
YWCA DAYTON 141 W. THIRD ST. DAYTON, OH 45402		PC	(MATCHING) UNRESTRICTED USE	200.
CLIMATE CHANGE LAW FOUNDATION 548 MARKET STREET, #11200 SAN FRANCISCO, CA 94104		PC	(OTHER) UNRESTRICTED USE	100.
DAYTON CHRISTIAN CENTER INC. 1352 W. RIVERVIEW AVENUE DAYTON, OH 45402		PC	(OTHER) UNRESTRICTED USE	250.
<b>Total from continuation sheets</b>				



**Part XIV** 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
DELAWARE SPECIAL OLYMPICS INC. 619 S COLLEGE AVE NEWARK, DE 19716-1900		PC	(OTHER) UNRESTRICTED USE	1,000.
DISTRICT 99 EDUCATION FOUNDATION 6301 SPRINGSIDE AVE DOWNERS GROVE, IL 60516-2488		PC	(OTHER) DOWNERS GROVE SOUTH, GIRLS SOCCER PROGRAM	500.
DISTRICT 99 EDUCATION FOUNDATION 6301 SPRINGSIDE AVE DOWNERS GROVE, IL 60516-2488		PC	(OTHER) DOWNERS GROVE SOUTH, GIRLS SOCCER PROGRAM	1,000.
EVOLUTION SOCCER CLUB PO BOX 4444 NAPERVILLE, IL 60567		PC	(OTHER) FUND THAT PROVIDES FINANCIAL AID TO FAMILIES THAT CANNOT AFFORD EVOLUTION FEES	500.
FRIENDS HEALTH CARE ASSOCIATION 150 EAST HERMAN ST YELLOW SPRINGS, OH 45387		PC	(OTHER) UNRESTRICTED USE	250.
ST. CLOUD STATE UNIVERSITY 720 4TH AVE SOUTH AS210 ST. CLOUD, MN 56301-4498		GOV	(OTHER) UNRESTRICTED USE	250.
ST. JUDE CHILDRENS RESEARCH HOSPITAL INC. 501 DANNY THOMAS PLACE MEMPHIS, TN 38105		PC	(OTHER) UNRESTRICTED USE	1,000.

Total from continuation sheets .....

**Part XIV** 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 ARTHUR MORGAN INSTITUTE FOR COMMUNITY SOLUTIONS PO BOX 243 YELLOW SPRINGS, OH 45387		PC	(OTHER) YOUTH PROGRAMMING	250.
TIBET FUND 214 EAST 32ND STREET NEW YORK, NY 10016		PC	(OTHER) FOR ODISHA PHUNSTOKLING- CAMP #2 PROJECT	1,000.

**Total from continuation sheets** .....

**Part XIV** 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
CITIZENS UTILITY BOARD OF MINNESOTA 332 MINNESOTA STREET, SUITE W1360 ST. PAUL, MN 55101		PC	(COMPETITIVE) CONSUMER ADVOCACY TO DECARBONIZE MINNESOTA'S UTILITY SECTOR (YEAR 2 OF TWO YEARS)	100,000.
FARMERS UNION FOUNDATION 305 ROSELAWN AVE E SUITE 200 ST. PAUL, MN 55117		PC	(COMPETITIVE) EMPOWERING FARMER LEADERSHIP ON CLIMATE AND WORKING LANDS (YEAR 2 OF TWO YEARS)	150,000.
YELLOW SPRINGS COMMUNITY FOUNDATION P.O. BOX 55 YELLOW SPRINGS, OH 45387-0055		PC	(COMPETITIVE) YELLOW SPRINGS COMMUNITY SUPPORT OVER THREE YEARS	165,000.
<b>Total from continuation sheets</b>				415,000.

## 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	9.	9.	
SAVINGS ACCOUNT	21.	21.	
TOTAL TO PART I, LINE 3	30.	30.	

## 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 PARTNERSHIP INTEREST/DIVIDENDS	2,179,595.	543,324.	1,636,271.	1,636,271.	
	0.	0.	0.	156,811.	
TO PART I, LINE 4	2,179,595.	543,324.	1,636,271.	1,793,082.	

## 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	3,521.	3,521.	
BLACK DIAMOND INCOME	-2,286.	-2,286.	
PARTNERSHIP INCOME	20,471.	20,771.	
TOTAL TO FORM 990-PF, PART I, LINE 11	21,706.	22,006.	

## 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	15,474.	0.		0.
TO FM 990-PF, PG 1, LN 16A	15,474.	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	29,218.	4,333.		0.
TO FORM 990-PF, PG 1, LN 16B	29,218.	4,333.		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	3,318.	0.		0.
CONTRACT LABOR	84,737.	0.		84,737.
INVESTMENT CONSULTANT FEES	111,927.	111,927.		0.
NONBOARD COMMITTEE COMP	7,800.	1,200.		0.
OTHER PROFESSIONAL FEES	40.	0.		0.
CUSTODIAN FEES	14,786.	14,786.		0.
INVESTMENT MANAGER FEES	18,849.	18,849.		0.
CONSULTING FEES	75,104.	0.		24,076.
TO FORM 990-PF, PG 1, LN 16C	316,561.	146,762.		108,813.

## FORM 990-PF

## TAXES

## STATEMENT 7

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FEDERAL EXCISE TAXES	70,500.	0.		0.
OHIO FILING FEES	200.	0.		200.
TO FORM 990-PF, PG 1, LN 18	70,700.	0.		200.

## 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	11,778.	0.		0.
DUES AND SUBSCRIPTIONS	17,249.	0.		8,122.
OFFICE EQUIPMENT, SOFTWARE & SUPPLIES	34,567.	0.		21,120.
INTERNET & TECHNOLOGY SERVICES	14,092.	0.		0.
POSTAGE & DELIVERY	1,100.	0.		0.
POST OFFICE BOX	217.	0.		0.
BANK SERVICE FEES	15.	0.		0.
PRINTING	2,593.	0.		0.
ASSET WRITEDOWN	3,928.	0.		0.
PARTNERSHIP EXPENSES FROM K-1'S	0.	156,451.		0.
TO FORM 990-PF, PG 1, LN 23	85,539.	156,451.		29,242.

## FORM 990-PF

## OTHER DECREASES IN NET ASSETS OR FUND BALANCES

## STATEMENT 9

DESCRIPTION	AMOUNT
UNREALIZED GAINS/LOSSES ON INVESTMENTS	9,816,899.
CHANGE IN RESERVES FOR GRANTS PAYABLE	245,000.
TOTAL TO FORM 990-PF, PART III, LINE 5	10,061,899.

FORM 990-PF

CORPORATE STOCK

STATEMENT 10

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
ABBOTT LABORATORIES (ABT)	19,872.	19,872.
ABBVIE INC (ABBV)	21,333.	21,333.
ADOBE SYSTEMS INCORPORATED (ADBE)	12,788.	12,788.
ADVANCED MICRO DEVICES INC (AMD)	2,267.	2,267.
AFLAC INC (AFL)	1,367.	1,367.
AIR PRODUCTS AND CHEMICALS INC (APD)	10,789.	10,789.
ALBEMARLE CORP COM USD0.01 (ALB)	1,735.	1,735.
ALLSTATE CORP (ALL)	1,085.	1,085.
AMERICAN EXPRESS CO (AXP)	5,762.	5,762.
AMERICAN INTERNATIONAL GROUP INC (AIG)	1,707.	1,707.
AMERICAN TOWER CORP (AMT)	9,534.	9,534.
AMERICAN WATER WORKS COMPANY INC (AWK)	1,829.	1,829.
AMGEN INC (AMGN)	8,142.	8,142.
AMPHENOL CORP (APH)	20,101.	20,101.
ANSYS INC COM (ANSS)	483.	483.
AON PLC (AON)	8,404.	8,404.
APPLIED MATERIALS INC (AMAT)	9,056.	9,056.
ARISTA NETWORKS INC COM USD0.0001 (ANET)	4,369.	4,369.
AT&T INC COM (T)	13,992.	13,992.
AUTOMATIC DATA PROCESSING INC COM (ADP)	10,988.	10,988.
AUTOZONE INC COM USD0.01 (AZO)	7,399.	7,399.
BAKER HUGHES COMPANY (BKR)	7,176.	7,176.
BANK OF NEW YORK MELLON CORP (BK)	2,139.	2,139.
BECTON DICKINSON & CO (BDX)	5,849.	5,849.
BK OF AMERICA CORP (BAC)	26,231.	26,231.
BOOKING HOLDINGS INC (BKNG)	14,107.	14,107.
BRISTOL-MYERS SQUIBB CO (BMY)	10,433.	10,433.
BROADCOM INC (AVGO)	26,838.	26,838.
BROWN-FORMAN CORP (BFB)	657.	657.
CADENCE DESIGN SYSTEMS INC COM (CDNS)	7,068.	7,068.
CAPITAL ONE FINANCIAL CORP (COF)	6,507.	6,507.
CARRIER GLOBAL CORPORATION (CARR)	4,043.	4,043.
CDW CORP (CDW)	18,037.	18,037.
CF INDUSTRIES HOLDINGS INC COM (CF)	1,448.	1,448.
CHUBB LIMITED (CB)	13,236.	13,236.
CIGNA CORP (CI)	8,284.	8,284.
CINTAS CORP (CTAS)	7,226.	7,226.
CISCO SYSTEMS INC (CSCO)	24,963.	24,963.
CITIGROUP INC (C)	14,202.	14,202.
CME GROUP INC (CME)	2,691.	2,691.

CMS ENERGY CORP (CMS)	760.	760.
COCA-COLA CO (KO)	33,777.	33,777.
COGNIZANT TECHNOLOGY SOLUTIONS CORP COM	2,631.	2,631.
COMCAST CORP (CMCSA)	16,156.	16,156.
CONSOLIDATED EDISON INC (ED)	2,383.	2,383.
CONSTELLATION BRANDS INC (STZ)	2,318.	2,318.
CONSTELLATION ENERGY CORP COM (CEG)	8,276.	8,276.
COPART INC (CPRT)	14,126.	14,126.
CORNING INC (GLW)	1,725.	1,725.
COSTCO WHOLESALE CORP (COST)	24,651.	24,651.
CROWN CASTLE INTL CORP (CCI)	3,662.	3,662.
CUMMINS INC (CMI)	2,423.	2,423.
DANAHER CORPORATION (DHR)	12,740.	12,740.
DEERE & CO (DE)	19,723.	19,723.
DELTA AIR LINES INC (DAL)	1,610.	1,610.
DEXCOM INC (DXCM)	2,265.	2,265.
DOLLAR GEN CORP (DG)	7,880.	7,880.
DOLLAR TREE INC (DLTR)	2,122.	2,122.
DR HORTON INC (DHI)	891.	891.
DTE ENERGY CO (DTE)	705.	705.
EATON CORP PLC (ETN)	1,099.	1,099.
EBAY INC. (EBAY)	12,192.	12,192.
ECOLAB INC (ECL)	4,803.	4,803.
EDWARDS LIFESCIENCES CORP(EW)	671.	671.
ELEVANCE HEALTH INC COM (ENV)	1,539.	1,539.
ELI LILLY AND CO (LLY)	15,731.	15,731.
EMERSON ELECTRIC CO (EMR)	961.	961.
ENPHASE ENERGY INC COM US (ENPH)	5,034.	5,034.
EPAM SYS INC COM US (EPAM)	2,622.	2,622.
EQUINIX INC (EQIX)	3,930.	3,930.
ESTEE LAUDER COMPANIES INC (EL)	14,390.	14,390.
ETSY INC (ETSY)	6,947.	6,947.
EXELON CORP (EXC)	3,675.	3,675.
EXPEDITORS INTERNATIONAL OF WASHINGTON DC (EXPD)	5,404.	5,404.
FIDELITY NATL INFORMATION SERVICES (FIS)	2,782.	2,782.
FISERV INC (FISV)	9,905.	9,905.
FORD MTR CO (F)	6,222.	6,222.
FORTINET INC COM (FTNT)	2,200.	2,200.
FORTIVE CORP (FTV)	643.	643.
GARTNER INC COM (IT)	8,740.	8,740.
GENERAL MILLS INC (GIS)	11,739.	11,739.
GLOBAL PAYMENTS INC (GPN)	2,384.	2,384.
GRAINGER W W INC COM USD (GWW)	6,119.	6,119.
HALLIBURTON CO (HAL)	22,980.	22,980.
HCA HEALTHCARE INC (HCA)	1,680.	1,680.
HEWLETT PACKARD ENTERPRISE CO (HPE)	5,426.	5,426.
HILTON WORLDWIDE HLDGS INC (HLT)	6,065.	6,065.
HOME DEPOT INC (HD)	32,849.	32,849.
HOWMET AEROSPACE INC (HWM)	7,291.	7,291.
HP INC COM	1,209.	1,209.
HUNT J.B. TRANSPORT SERVICES INC (JBHT)	872.	872.
ILLINOIS TOOL WORKS INC (ITW)	12,557.	12,557.
INTERCONTINENTAL EXCHANGE INC (ICE)	9,541.	9,541.
INTUIT INC (INTU)	10,898.	10,898.
INTUITIVE SURGICAL INC (ISRG)	4,776.	4,776.
JOHNSON & JOHNSON (JNJ)	38,510.	38,510.
JPMORGAN CHASE & CO (JPM)	17,969.	17,969.
KEYSIGHT TECHNOLOGIES INC (KEYS)	5,816.	5,816.



KIMBERLY-CLARK CORP (KMB)	5,837.	5,837.
LAM RESEARCH CORP (LRCX)	4,203.	4,203.
LAS VEGAS SANDS CORP COM (LVS)	4,663.	4,663.
LENNAR CORP (LEN)	3,530.	3,530.
LINDE PLC (LIN)	25,768.	25,768.
LOWES COMPANIES INC COM (LOW)	1,195.	1,195.
LYONDELLBASELL INDUSTRIES N V (LYB)	830.	830.
MARSH & MCLENNAN COMPANIES INC (MMC)	2,813.	2,813.
MASTERCARD INCORPORATED (MA)	32,687.	32,687.
MEDTRONIC PLC (MDT)	12,979.	12,979.
MERCK & CO. INC (MRK)	19,305.	19,305.
META PLATFORMS INC CLASS A COMMON STOCK (FB)	20,578.	20,578.
METLIFE INC (MET)	10,132.	10,132.
MGM RESORTS INTERNATIONAL (MGM)	1,106.	1,106.
MICRON TECHNOLOGY INC (MU)	2,799.	2,799.
MICROSOFT CORP (MSFT)	90,652.	90,652.
MODERNA INC COM (MRNA)	2,335.	2,335.
MONSTER BEVERAGE CORP (MNST)	13,402.	13,402.
MOODYS CORP (MCO)	2,508.	2,508.
MSCI INC (MSCI)	1,396.	1,396.
NETAPP INC (NTAP)	4,985.	4,985.
NETFLIX INC (NFLX)	9,436.	9,436.
NEXTERA ENERGY INC (NEE)	23,659.	23,659.
NVIDIA CORPORATION (NVDA)	23,236.	23,236.
OLD DOMINION FREIGHT LINE INC (ODFL)	12,203.	12,203.
ON SEMICONDUCTOR CORP COM (ON)	5,676.	5,676.
ONEOK INC (OKE)	17,082.	17,082.
OTIS WORLDWIDE CORP (OTIS)	4,620.	4,620.
PACCAR INC (PCAR)	792.	792.
PARKER-HANNIFIN CORP (PH)	873.	873.
PAYCHEX INC COM USD0.01(PAYX)	3,351.	3,351.
PAYPAL HLDGS INC (PYPL)	5,199.	5,199.
PFIZER INC (PFE)	12,759.	12,759.
PNC FINANCIAL SERVICES GROUP (PNC)	8,845.	8,845.
PPG INDUSTRIES INC (PPG)	4,275.	4,275.
PRICE T ROWE GROUPS COM (TROW)	2,072.	2,072.
PROGRESSIVE CORP (PGR)	7,912.	7,912.
PROLOGIS INC. (PLD)	8,004.	8,004.
PRUDENTIAL FINANCIAL INC (PRU)	995.	995.
PUBLIC STORAGE (PSA)	4,763.	4,763.
PUBLIC SVC ENTERPRISE GRP INC (PEG)	858.	858.
QUALCOMM INC (QCOM)	10,774.	10,774.
QUANTA SERVICES COM (PWR)	6,840.	6,840.
ROCKWELL AUTOMATION INC (ROK)	1,545.	1,545.
ROSS STORES INC (ROST)	929.	929.
S&P GLOBAL INC (SPGI)	17,417.	17,417.
SALESFORCE.COM INC (CRM)	10,607.	10,607.
SBA COMMUNICATIONS CORP (SBAC)	1,682.	1,682.
SCHWAB CHARLES CORP (SCHW)	12,406.	12,406.
SEAGATE TECHNOLOGY PLC (STX)	2,946.	2,946.
SEMPRA COM (SRE)	1,391.	1,391.
SERVICENOW INC (NOW)	8,154.	8,154.
STATE STREET CORP (STT)	776.	776.
STRYKER CORPORATION (SYK)	1,711.	1,711.
TE CONNECTIVITY LTD (TEL)	16,072.	16,072.
TELEDYNE TECHNOLOGIES INC (TDY)	12,397.	12,397.
TESLA INC (TSLA)	20,202.	20,202.
TEXAS INSTRUMENTS INC (TXN)	19,661.	19,661.

MORGAN FAMILY FOUNDATION

30-0205024

THERMO FISHER SCIENTIFIC INC (TMO)	12,115.	12,115.
TJX COMPANIES INC (TJX)	8,438.	8,438.
T-MOBILE US INC COM (TJX)	11,060.	11,060.
TRACTOR SUPPLY CO (TSCO)	1,125.	1,125.
TRANE TECHNOLOGIES PLC (TT)	1,009.	1,009.
TRANSDIGM GROUP INC (TDG)	10,704.	10,704.
TRIMBLE INC COM (TRMB)	5,309.	5,309.
TRUIST FINL CORP (TFC)	6,067.	6,067.
U.S. BANCORP (USB)	10,118.	10,118.
ULTA BEAUTY INC (ULTA)	2,814.	2,814.
UNITEDHEALTH GROUP INC (UNH)	42,945.	42,945.
VALERO ENERGY CORP (VLO)	13,320.	13,320.
VENTAS INC (VTR)	1,577.	1,577.
VERISIGN INC (VRSN)	6,163.	6,163.
VERIZON COMMUNICATIONS INC (VZ)	11,702.	11,702.
VERTEX PHARMACEUTICALS INC (VRTX)	4,620.	4,620.
VISA INC (V)	33,865.	33,865.
VULCAN MATERIALS CO (VMC)	1,051.	1,051.
WABTEC COM (WAB)	4,791.	4,791.
WARNER BROS DISCOVERY INC COM (WBD)	597.	597.
WASTE MANAGEMENT INC (WM)	3,138.	3,138.
WELLTOWER INC (WELL)	3,933.	3,933.
WESTERN DIGITAL CORP. COM (WDC)	631.	631.
WILLIAMS COS INC (WMB)	11,153.	11,153.
WILLIS TOWERS WATSON PLC (WLTW)	978.	978.
YUM BRANDS INC (YUM)	2,946.	2,946.
ZEBRA TECHNOLOGIES CORPORATION (ZBRA)	6,154.	6,154.
ZOETIS INC (ZTS)	586.	586.
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TOTAL TO FORM 990-PF, PART II, LINE 10B	1,627,864.	1,627,864.
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## FORM 990-PF

## OTHER INVESTMENTS

## STATEMENT 11

DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
DFA INTERNATIONAL CORE EQUITY PORTFOLIO - INVESTOR	FMV	2,065,014.	2,065,014.
FEDERATED TOTAL RETURN BOND FUND - INSTITUTIONAL SHARES	FMV	2,765,970.	2,765,970.
INVESCO OPPENHEIMER DEVELOPING MARKETS FUND- I	FMV	1,379,374.	1,379,374.
JP MORGAN CORE BOND FUND-CLASS I	FMV	531,575.	531,575.
LIMITED PARTNERSHIP CARLSON CAPITAL LP BLACK DIAMOND ARBITRAGE, LTD SERIES B	FMV	1,197,932.	1,197,932.
LIMITED PARTNERSHIP GENERATION IM SUSTAINABLE SOLUTIONS FUND III (A), L.P.	FMV	982,699.	982,699.
LIMITED PARTNERSHIP HARRISON STREET CORE PROPERTY FUND, L.P.	FMV	2,292,223.	2,292,223.
LIMITED PARTNERSHIP HCAP PARTNERS IV, LP	FMV	740,870.	740,870.
LIMITED PARTNERSHIP HCAP PARTNERS V, LP	FMV	224,149.	224,149.
LIMITED PARTNERSHIP RRG SUSTAINABLE WATER IMPACT FUND-B, L.P.	FMV	816,215.	816,215.
LIMITED PARTNERSHIP THE RISE FUND II	FMV	901,642.	901,642.
LIMITED PARTNERSHIP WHITE OAK FIXED INCOME FUND C L.P.	FMV	1,749,634.	1,749,634.
MERIDIAN SMALL CAP GROWTH FUND-RTR	FMV	1,246,130.	1,246,130.
NATIONWIDE INTL SMALL CAP R6	FMV	1,201,777.	1,201,777.
PAX WORLD GLB ENVIR MARKETS INSTL	FMV	1,279,046.	1,279,046.
PRUDENTIAL FLOATING RATE INCOME FUND CLASS Z	FMV	1,020,006.	1,020,006.
TRANSAMERICA INTERNATIONAL EQUITY - I	FMV	1,949,056.	1,949,056.
VANGUARD INSTL INDEX INSTL CLASS (VINIX)	FMV	14,534,624.	14,534,624.
VANGUARD MID CAP INDEX FUND - ADMIRAL SHARES	FMV	1,839,465.	1,839,465.
VANGUARD SHORT-TERM BOND INDEX FUND - ADMIRAL SHARES	FMV	1,247,346.	1,247,346.
VICTORY INTEGRITY SMALL-CAP VALUE FUND -R6	FMV	1,513,464.	1,513,464.
TOTAL TO FORM 990-PF, PART II, LINE 13		41,478,211.	41,478,211.

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


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DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
LEASEHOLD IMPROVEMENT	98,181.	72,817.	25,364.
CAPITALIZED SOFTWARE	34,866.	0.	34,866.
LAND	125,036.	0.	125,036.
<b>TOTAL TO FM 990-PF, PART II, LN 14</b>	<b>258,083.</b>	<b>72,817.</b>	<b>185,266.</b>

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**FORM 990-PF      OTHER ASSETS      STATEMENT 13**


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DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
PRI LOAN RECEIVABLE - YELLOW SPRINGS HOME INC.	305,090.	187,554.	187,554.
PRI LOAN INTEREST RECEIVABLE - YELLOW SPRINGS HOME INC.	21,086.	24,607.	24,607.
PRI LOAN RECEIVABLE - YELLOW SPRINGS COMMUNITY FOUNDATION	5,892.	0.	0.
<b>TO FORM 990-PF, PART II, LINE 15</b>	<b>332,068.</b>	<b>212,161.</b>	<b>212,161.</b>

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**FORM 990-PF      OTHER LIABILITIES      STATEMENT 14**


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DESCRIPTION	BOY AMOUNT	EOY AMOUNT
DENTAL & VISION EMPLOYEE WITHHOLDING	-510.	20.
<b>TOTAL TO FORM 990-PF, PART II, LINE 22</b>	<b>-510.</b>	<b>20.</b>

FORM 990-PF

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

STATEMENT 15

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	4,750.	0.	0.
VICTORIA A. MORGAN 506 S HIGH ST., SUITE B YELLOW SPRINGS, OH 45387	VICE PRESIDENT 1.00	4,750.	0.	0.
BARCLAY CARRIAR 506 S HIGH ST., SUITE B YELLOW SPRINGS, OH 45387	TREASURER 1.00	4,750.	0.	0.
ASHA MORGAN MORAN 506 S HIGH ST., SUITE B YELLOW SPRINGS, OH 45387	DIRECTOR 1.00	3,650.	0.	0.
ERIC HART 506 S HIGH ST., SUITE B YELLOW SPRINGS, OH 45387	DIRECTOR 1.00	4,000.	0.	0.
ERICA SMITH 506 S HIGH ST., SUITE B YELLOW SPRINGS, OH 45387	DIRECTOR 1.00	4,150.	0.	0.
JUDITH THOMPSON 506 S HIGH ST., SUITE B YELLOW SPRINGS, OH 45387	DIRECTOR 1.00	3,900.	0.	0.
KARLA MORGAN 506 S HIGH ST., SUITE B YELLOW SPRINGS, OH 45387	DIRECTOR 1.00	3,400.	0.	0.
RONALD BRANDENBURG 506 S HIGH ST., SUITE B YELLOW SPRINGS, OH 45387	DIRECTOR 1.00	4,250.	0.	0.
LORI M. KUHN 506 S HIGH ST., SUITE B YELLOW SPRINGS, OH 45387	EXEC. DIRECTOR/SECRETARY 32.00	166,000.	62,033.	0.

STEPHEN T. WILLIAMS  
506 S HIGH ST., SUITE B  
YELLOW SPRINGS, OH 45387

CFO/ASSISTANT TREASURER  
30.00 95,850. 21,504. 0.

TOTALS INCLUDED ON 990-PF, PAGE 6, PART VII 299,450. 83,537. 0.

FORM 990-PF SUMMARY OF PROGRAM-RELATED INVESTMENTS STATEMENT 16

DESCRIPTION

DURING THE YEAR, THE FOUNDATION PROVIDED YELLOW SPRINGS HOME, INC. WITH AN ADDITIONAL \$7,500 TO THE BELOW MARKET LOAN. IN 2018 THE FOUNDATION PROVIDED A BELOW-MARKET LOAN (2% SIMPLE INTEREST PER ANNUM, DEFERRED PAYMENT OF INTEREST AND PRINCIPAL) TO ENABLE YELLOW SPRINGS HOME, INC. TO PURCHASE REAL ESTATE (10 VACANT PARCELS ALONG MARSHALL AND EAST HERMAN STREETS IN YELLOW SPRINGS, OH) ON WHICH TO BUILD APARTMENTS FOR LOW-INCOME SENIOR CITIZENS. FINANCING ALSO ASSISTS WITH SOME PRE-DEVELOPMENT, LEGAL AND PROPERTY CARRYING COSTS. TERMS INCLUDE THE OPTION FOR FUTURE DRAWS TO ADDRESS SUCH EXPENSES OVER THE LIFE OF THE LOAN. CONSISTENT WITH THE TERMS OF THE PROMISSORY NOTE, THE BORROWER WILL PAY ALL REASONABLE FEES AND EXPENSES ASSOCIATED WITH THE LOAN. THE FOUNDATION'S LOAN MATURITY DATE IS JUNE 30, 2023. (CONTINUED BELOW)

AMOUNT

TO FORM 990-PF, PART VIII-B, LINE 1

7,500.

DESCRIPTION

(CONTINUED FROM ABOVE)

ALSO DURING THE 2022 YEAR YELLOW SPRINGS HOME, INC. CHANGED TO AN ALTERNATE PLAN FOR CLUSTERED HOUSING TO BE DEVELOPED IN PHASES WITH OTHER SOURCES FOR FINANCING. THE FOUNDATION REMAINS INTERESTED IN THE DEVELOPMENT OF AFFORDABLE HOUSING IN YELLOW SPRINGS. AS SUCH THE FOUNDATION AGREED TO TAKE TITLE TO FOUR OF THE VACANT PARCELS AS SATISFACTION OF 40% OF THE LOAN PRINCIPAL AND EXECUTED AN AGREEMENT TO DONATE THOSE FOUR PARCELS BACK TO YELLOW SPRINGS HOME, INC. UPON PROOF OF THEIR SECURING APPROPRIATE FINANCING AND OTHER NEEDED APPROVALS TO PROCEED WITH PHASE ONE OF THE DEVELOPMENT. THE FOUNDATION ALSO AGREED TO STOP ACCRUAL OF THE 2% SIMPLE INTEREST ON THE REMAINING LOAN PRINCIPAL WITH THE UNDERSTANDING THAT ACCRUED INTEREST TO THAT POINT WOULD BE PAID. THIS AGREEMENT TO DONATE ENDS JUNE 30, 2023.

AMOUNT

TO FORM 990-PF, PART VIII-B, LINE 2

0.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION  
PART XIV, LINES 2A THROUGH 2D

STATEMENT 18

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**NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED**

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PLEASE VISIT [WWW.MORGANFAMILYFDN.ORG](http://WWW.MORGANFAMILYFDN.ORG) FOR MORE INFORMATION.  
506 S HIGH ST. SUITE B  
YELLOW SPRINGS, OH 45387

**TELEPHONE NUMBER**

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937-767-9208

**EMAIL ADDRESS**

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[INFO@MORGANFAMILYFDN.ORG](mailto:INFO@MORGANFAMILYFDN.ORG)**FORM AND CONTENT OF APPLICATIONS**

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ORGANIZATIONS SEEKING GRANTS SHOULD FIRST REVIEW THE FOUNDATION'S GRANT GUIDELINES AND PROCESS AVAILABLE AT [WWW.MORGANFAMILYFDN.ORG](http://WWW.MORGANFAMILYFDN.ORG). FOR SOCIAL EQUITY FUNDING, THERE IS A TWO-STEP PROCESS THAT BEGINS WITH A LETTER OF INQUIRY (LOI), WHICH CONSISTS OF BRIEF INFORMATION ABOUT THE ORGANIZATION, THE REQUESTED GRANT, AND FINANCIAL INFORMATION. THE FOUNDATION THEN INVITES SOME LOIS TO PROVIDE MORE DETAILS AS A FULL APPLICATION. THERE IS CURRENTLY NOT AN OPEN APPLICATION PROCESS FOR OUR GLOBAL WARMING AND END-OF-LIFE PROGRAMS. GRANTS IN THESE TWO AREAS ARE INITIATED BY THE FOUNDATION AFTER SOME RESEARCH AND DISCUSSION WITH ORGANIZATIONS WORKING ON THESE ISSUES. THE FOUNDATION INVITES SELECTED ORGANIZATIONS TO COMPLETE AN ONLINE GRANT REQUEST. IN ALL THREE PROGRAMS, NONPROFIT APPLICANTS MAY PROVIDE FURTHER INFORMATION VERBALLY THROUGH SCHEDULED VISIT(S) OR CONVERSATION(S) WITH A FOUNDATION PROGRAM OFFICER.

**ANY SUBMISSION DEADLINES**

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FIRST LOI DEADLINE: JANUARY 12, 2024; SECOND LOI DEADLINE: NOT YET SET, BUT TYPICALLY DUE IN JUNE.

**RESTRICTIONS AND LIMITATIONS ON AWARDS**

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MOST FOUNDATION GRANTS ARE AWARDED TO 501(C)(3) PUBLIC CHARITIES, AND FOCUS ON ADVANCING SOCIAL EQUITY IN ST. CLOUD, MITIGATING GLOBAL WARMING IN MINNESOTA, AND ADDRESSING END-OF-LIFE ISSUES IN CENTRAL MINNESOTA. 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 CHARITIES IN OTHER LOCALITIES AND/OR FOR OTHER PURPOSES.



FORM 990-PF

PART XIV - LINE 1A  
LIST OF FOUNDATION MANAGERS

STATEMENT 19

NAME OF MANAGER

LEE M. MORGAN  
VICTORIA A. MORGAN

990-PF

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

STATEMENT 20

NAME OF NONCHARITABLE EXEMPT ORGANIZATION

YELLOW SPRINGS CHAMBER OF COMMERCE

DESCRIPTION OF TRANSFERS, TRANSACTIONS, AND SHARING ARRANGEMENTS

PAYMENT OF ANNUAL MEMBERSHIP DUES



Type and Entity: PARTNERSHIP INVESTMENT POST-2017 NO  
 Section 382 Annual Limitation Section 382 Carryover

**DETAIL CARRYOVER SCHEDULE**

Year Originated	Original Carryover Amount	Total Amount Used	Amount Used for 12/31/22	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for
				_____	_____	_____	_____	_____	_____	_____	_____
A 2018	13,567.	19.	19.								
B 2019	6,870.										
C 2020	21,391.										
D 2021	35,512.										
E											
F											
G											
H											
I											
J											
K											
L											
M											
N											
O											
P											
Q											
R											
S											
T											
U											
V											
W											
Detail Type	E S B C	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for
A											
B											
C											
D											
E											
F											
G											
H											
I											
J											
K											
L											
M											
N											
O											
P											
Q											
R											
S											
T											
U											
V											
W											



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

## 2022

Department of the Treasury  
Internal Revenue Service

For calendar year 2022 or other tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

**Go to [www.irs.gov/Form990T](http://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).**

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

<p><b>A</b> <input type="checkbox"/> Check box if address changed.</p> <p><b>B</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) <input type="checkbox"/> 529A</p>	Print or Type	<p>Name of organization ( <input type="checkbox"/> Check box if name changed and see instructions.)  <b>MORGAN FAMILY FOUNDATION</b></p> <p>Number, street, and room or suite no. If a P.O. box, see instructions.  <b>506 S HIGH ST STE B</b></p> <p>City or town, state or province, country, and ZIP or foreign postal code  <b>YELLOW SPRINGS, OH 45387-0561</b></p> <p><b>C</b> Book value of all assets at end of year ..... <b>46,232,673.</b></p>	<p><b>D</b> Employer identification number <b>30-0205024</b></p> <p><b>E</b> Group exemption number (see instructions)</p> <p><b>F</b> <input type="checkbox"/> Check box if an amended return.</p>
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**G** Check organization type  501(c) corporation  501(c) trust  401(a) trust  Other trust  State college/university

**H** Check if filing only to  Claim credit from Form 8941  Claim a refund shown on Form 2439

**I** Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation

**J** Enter the number of attached Schedules A (Form 990-T) ..... **1**

**K** 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.

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

**Part I Total Unrelated Business Taxable Income**

1 Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions) .....	1	5.
2 Reserved .....	2	
3 Add lines 1 and 2 .....	3	5.
4 Charitable contributions (see instructions for limitation rules) <b>STMT 21 STMT 22</b> .....	4	0.
5 Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3 .....	5	5.
6 Deduction for net operating loss. See instructions .....	6	
7 Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5 .....	7	5.
8 Specific deduction (generally \$1,000, but see instructions for exceptions) .....	8	1,000.
9 <b>Trusts.</b> Section 199A deduction. See instructions .....	9	
10 <b>Total deductions.</b> Add lines 8 and 9 .....	10	1,000.
11 <b>Unrelated business taxable income.</b> Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero .....	11	0.

**Part II Tax Computation**

1 <b>Organizations taxable as corporations.</b> Multiply Part I, line 11 by 21% (0.21) .....	1	0.
2 <b>Trusts taxable at trust rates.</b> See instructions for tax computation. Income tax on the amount on Part I, line 11 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041) .....	2	
3 <b>Proxy tax.</b> See instructions .....	3	
4 Other tax amounts. See instructions .....	4	
5 Alternative minimum tax (trusts only) .....	5	
6 <b>Tax on noncompliant facility income.</b> See instructions .....	6	
7 <b>Total.</b> Add lines 3 through 6 to line 1 or 2, whichever applies .....	7	0.

LHA For Paperwork Reduction Act Notice, see instructions.

<b>Part III Tax and Payments</b>			
1a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) .....	<b>1a</b>		
b Other credits (see instructions) .....	<b>1b</b>		
c General business credit. Attach Form 3800 (see instructions) .....	<b>1c</b>		
d Credit for prior year minimum tax (attach Form 8801 or 8827) .....	<b>1d</b>		
e <b>Total credits.</b> Add lines 1a through 1d .....		<b>1e</b>	
2 Subtract line 1e from Part II, line 7 .....		<b>2</b>	0.
3 Other amounts due. 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 statement) .....		<b>3</b>	
4 <b>Total tax.</b> Add lines 2 and 3 (see instructions). <input type="checkbox"/> Check if includes tax previously deferred under section 1294. Enter tax amount here .....		<b>4</b>	0.
5 Current net 965 tax liability paid from Form 965-A, Part II, column (k) .....		<b>5</b>	0.
6a Payments: A 2021 overpayment credited to 2022 .....	<b>6a</b>		
b 2022 estimated tax payments. Check if section 643(g) election applies <input type="checkbox"/> .....	<b>6b</b>		
c Tax deposited with Form 8868 .....	<b>6c</b>		
d Foreign organizations: Tax paid or withheld at source (see instructions) .....	<b>6d</b>		
e Backup withholding (see instructions) .....	<b>6e</b>		
f Credit for small employer health insurance premiums (attach Form 8941) .....	<b>6f</b>		
g Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other _____ Total .....	<b>6g</b>		
7 <b>Total payments.</b> Add lines 6a through 6g .....		<b>7</b>	
8 Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/> .....		<b>8</b>	
9 <b>Tax due.</b> If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed .....		<b>9</b>	
10 <b>Overpayment.</b> If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid .....		<b>10</b>	
11 Enter the amount of line 10 you want: <b>Credited to 2023 estimated tax</b> <span style="float: right;"><b>Refunded</b></span> .....		<b>11</b>	

<b>Part IV Statements Regarding Certain Activities and Other Information</b> (see instructions)			
1 At any time during the 2022 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 .....		<b>Yes</b>	<b>No</b>
			X
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? .....			X
If "Yes," see instructions for other forms the organization may have to file.			
3 Enter the amount of tax-exempt interest received or accrued during the tax year ..... \$ .....			
4 Enter available pre-2018 NOL carryovers here \$ ..... Do not include any post-2017 NOL carryover shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 6.			
5 Post-2017 NOL carryovers. Enter the Business Activity Code and available post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.			
Business Activity Code	Available post-2017 NOL carryover		
901101	\$ 77,340.		
	\$		
6a Did the organization change its method of accounting? (see instructions) .....			X
b If 6a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128? If "No," explain in Part V .....			

**Part V Supplemental Information**

Provide the explanation required by Part IV, line 6b. Also, provide any other additional information. See instructions.

<b>Sign Here</b>	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.				
		<b>EXECUTIVE DIRECTOR &amp; SECRETARY</b>			
	Signature of officer	Date	Title	May the IRS discuss this return with the preparer shown below (see instructions)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	KAREN O. CRIM	KAREN O. CRIM	11/10/23		P00368385
	Firm's name RSM US LLP	Firm's EIN 42-0714325			
	Firm's address 6 S PATTERSON BLVD DAYTON, OH 45402			Phone no. 937-298-0201	

FORM 990-T

CONTRIBUTIONS

STATEMENT 21

<u>DESCRIPTION/KIND OF PROPERTY</u>	<u>METHOD USED TO DETERMINE FMV</u>	<u>AMOUNT</u>
CHARITABLE CONTRIBUTIONS - WHITE OAK FIXED INCOME FUND C, LP	N/A	306.
TOTAL TO FORM 990-T, PART I, LINE 4		306.

FORM 990-T

CONTRIBUTIONS SUMMARY

STATEMENT 22

QUALIFIED CONTRIBUTIONS SUBJECT TO 100% LIMIT  
 QUALIFIED CONTRIBUTIONS SUBJECT TO 25% LIMIT

CARRYOVER OF PRIOR YEARS UNUSED CONTRIBUTIONS  
 FOR TAX YEAR 2017  
 FOR TAX YEAR 2018  
 FOR TAX YEAR 2019  
 FOR TAX YEAR 2020  
 FOR TAX YEAR 2021

TOTAL CARRYOVER		
TOTAL CURRENT YEAR 10% CONTRIBUTIONS	306	
TOTAL CONTRIBUTIONS AVAILABLE	306	
TAXABLE INCOME LIMITATION AS ADJUSTED	0	
EXCESS CONTRIBUTIONS	306	
EXCESS 100% CONTRIBUTIONS	0	
TOTAL EXCESS CONTRIBUTIONS	306	
ALLOWABLE CONTRIBUTIONS DEDUCTION		0
TOTAL CONTRIBUTION DEDUCTION		0



**SCHEDULE A  
(Form 990-T)**

Department of the Treasury  
Internal Revenue Service

**Unrelated Business Taxable Income  
From an Unrelated Trade or Business**

Go to [www.irs.gov/Form990T](http://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).

1  
OMB No. 1545-0047

**2022**

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

<b>A</b> Name of the organization <b>MORGAN FAMILY FOUNDATION</b>	<b>B</b> Employer identification number <b>30-0205024</b>
<b>C</b> Unrelated business activity code (see instructions) <b>901101</b>	<b>D</b> Sequence: <b>1</b> of <b>1</b>

**E** Describe the unrelated trade or business **PARTNERSHIP INVESTMENTS**

<b>Part I</b> Unrelated Trade or Business Income	(A) Income	(B) Expenses	(C) Net
<b>1 a</b> Gross receipts or sales _____			
<b>b</b> Less returns and allowances _____ <b>c</b> Balance	<b>1c</b>		
<b>2</b> Cost of goods sold (Part III, line 8) .....	<b>2</b>		
<b>3</b> Gross profit. Subtract line 2 from line 1c .....	<b>3</b>		
<b>4 a</b> Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions .....	<b>4a</b> 3.		3.
<b>b</b> Net gain (loss) (Form 4797) (attach Form 4797). See instructions)	<b>4b</b>		
<b>c</b> Capital loss deduction for trusts .....	<b>4c</b>		
<b>5</b> Income (loss) from a partnership or an S corporation (attach statement) <b>STATEMENT 23</b> .....	<b>5</b> 21.		21.
<b>6</b> Rent income (Part IV) .....	<b>6</b>		
<b>7</b> Unrelated debt-financed income (Part V) .....	<b>7</b>		
<b>8</b> Interest, annuities, royalties, and rents from a controlled organization (Part VI) .....	<b>8</b>		
<b>9</b> Investment income of section 501(c)(7), (9), or (17) organizations (Part VII) .....	<b>9</b>		
<b>10</b> Exploited exempt activity income (Part VIII) .....	<b>10</b>		
<b>11</b> Advertising income (Part IX) .....	<b>11</b>		
<b>12</b> Other income (see instructions; attach statement) .....	<b>12</b>		
<b>13 Total.</b> Combine lines 3 through 12 .....	<b>13</b> 24.		24.

**Part II Deductions Not Taken Elsewhere** See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income

<b>1</b> Compensation of officers, directors, and trustees (Part X) .....	<b>1</b>		
<b>2</b> Salaries and wages .....	<b>2</b>		
<b>3</b> Repairs and maintenance .....	<b>3</b>		
<b>4</b> Bad debts .....	<b>4</b>		
<b>5</b> Interest (attach statement). See instructions .....	<b>5</b>		
<b>6</b> Taxes and licenses .....	<b>6</b>		
<b>7</b> Depreciation (attach Form 4562). See instructions .....	<b>7</b>		
<b>8</b> Less depreciation claimed in Part III and elsewhere on return .....	<b>8a</b>		<b>8b</b>
<b>9</b> Depletion .....	<b>9</b>		
<b>10</b> Contributions to deferred compensation plans .....	<b>10</b>		
<b>11</b> Employee benefit programs .....	<b>11</b>		
<b>12</b> Excess exempt expenses (Part VIII) .....	<b>12</b>		
<b>13</b> Excess readership costs (Part IX) .....	<b>13</b>		
<b>14</b> Other deductions (attach statement) .....	<b>14</b>		
<b>15 Total deductions.</b> Add lines 1 through 14 .....	<b>15</b>		0.
<b>16</b> Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C) .....	<b>16</b>		24.
<b>17</b> Deduction for net operating loss. See instructions .....	<b>17</b>	STMT 24 STMT 26	19.
<b>18 Unrelated business taxable income.</b> Subtract line 17 from line 16 .....	<b>18</b>		5.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2022

**Part III Cost of Goods Sold** Enter method of inventory valuation

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

**Part IV Rent Income (From Real Property and Personal Property Leased with Real Property)**

1 Description of property (property street address, city, state, ZIP code). Check if a dual-use. See instructions.

A  \_\_\_\_\_

B  \_\_\_\_\_

C  \_\_\_\_\_

D  \_\_\_\_\_

	A	B	C	D
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) .....				
c Total rents received or accrued by property. Add lines 2a and 2b, columns A through D .....				
3 Total rents received or accrued. Add line 2c columns A through D. Enter here and on Part I, line 6, column (A) .....				0.
4 Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) .....				
5 <b>Total deductions.</b> Add line 4 columns A through D. Enter here and on Part I, line 6, column (B) .....				0.

**Part V Unrelated Debt-Financed Income** (see instructions)

1 Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use. See instructions.

A  \_\_\_\_\_

B  \_\_\_\_\_

C  \_\_\_\_\_

D  \_\_\_\_\_

	A	B	C	D
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 statement) .....				
b Other deductions (attach statement) .....				
c Total deductions (add lines 3a and 3b, columns A through D) .....				
4 Amount of average acquisition debt on or allocable to debt-financed property (attach statement) .....				
5 Average adjusted basis of or allocable to debt-financed property (attach statement) .....				
6 Divide line 4 by line 5 .....	%	%	%	%
7 Gross income reportable. Multiply line 2 by line 6 .....				
8 <b>Total gross income</b> (add line 7, columns A through D). Enter here and on Part I, line 7, column (A) .....				0.
9 Allocable deductions. Multiply line 3c by line 6 .....				
10 <b>Total allocable deductions.</b> Add line 9, columns A through D. Enter here and on Part I, line 7, column (B) .....				0.
11 <b>Total dividends-received deductions</b> included in line 10 .....				0.

**Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations** (see instructions)

1. Name of controlled organization		2. Employer identification number	Exempt Controlled Organizations			6. Deductions directly connected with income in column 5
			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	
(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 Part I, line 8, column (A)	Add columns 6 and 11. Enter here and on Part I, line 8, column (B)		
<b>Totals</b>			0.	0.		

**Part VII 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 statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add cols 3 and 4)
(1)				
(2)				
(3)				
(4)				
		Add amounts in column 2. Enter here and on Part I, line 9, column (A)		Add amounts in column 5. Enter here and on Part I, line 9, column (B)
<b>Totals</b>		0.		0.

**Part VIII Exploited Exempt Activity Income, Other Than Advertising Income** (see instructions)

1	Description of exploited activity: _____		
2	Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A) .....	2	
3	Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B) .....	3	
4	Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7 .....	4	
5	Gross income from activity that is not unrelated business income .....	5	
6	Expenses attributable to income entered on line 5 .....	6	
7	Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12 .....	7	



FORM 990-T (A)	INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 23
DESCRIPTION		NET INCOME OR (LOSS)
WHITE OAK FIXED INCOME FUND C, LP - ORDINARY BUSINESS INCOME (LOSS)		14,270.
WHITE OAK FIXED INCOME FUND C, LP - OTHER NET RENTAL INCOME (LOSS)		-8,949.
GENERATION IM SUSTAINABLE SOLUTIONS FUND III (A) LP - OTHER INCOME (LOSS)		-1,123.
MPOWERED CAPITAL ACCESS FUND I, L.P. - ORDINARY BUSINESS INCOME (LOSS)		-1,861.
MPOWERED CAPITAL ACCESS FUND I, L.P. - NET RENTAL REAL ESTATE INCOME		-330.
GENERATION IM SUSTAINABLE SOLUTIONS FUND IV (A), ILP - OTHER INCOME (LOSS)		-1,986.
TOTAL INCLUDED ON SCHEDULE A, PART I, LINE 5		21.

FORM 990-T (A)	POST 2017 NOL SCHEDULE	STATEMENT 24
PRIOR YEAR POST 2017 NOL	NOL DEDUCTION	CARRYFORWARD OF POST 2017 NOL
77,340.	19.	77,321.

990-T SCH A	POST-2017 NET OPERATING LOSS DEDUCTION			STATEMENT 25
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/18	13,567.	0.	13,567.	13,567.
12/31/19	6,870.	0.	6,870.	6,870.
12/31/20	21,391.	0.	21,391.	21,391.
12/31/21	35,512.	0.	35,512.	35,512.
NOL CARRYOVER AVAILABLE THIS YEAR			77,340.	77,340.

SCH A (990-T)

SCHEDULE A NOL DETAIL

STATEMENT 26

TAXABLE INCOME FROM ALL ENTITIES	24.
THIS ENTITIES PORTION OF TAXABLE INCOME	24.
THIS ENTITIES PERCENTAGE OF PRE-2018 NET OPERATING LOSS	100.00%
THIS ENTITIES ALLOWED PRE-2018 NET OPERATING LOSS	0.
TAXABLE INCOME AFTER PRE-2018 NET OPERATING LOSS	24.
80% INCOME LIMITATION	19.
POST-2017 AVAILABLE	77,340.
LESSER OF POST-2017 NET OPERATING LOSS OR 80% LIMITATION	19.

**SCHEDULE D  
(Form 1120)**

Department of the Treasury  
Internal Revenue Service

**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](http://www.irs.gov/Form1120) for instructions and the latest information.

OMB No. 1545-0123

**2022**

Name <b>MORGAN FAMILY FOUNDATION</b>	Employer identification number <b>30-0205024</b>
---	---

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 - Assets Held One Year or Less**

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)
<b>1a</b> 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 .....				
<b>1b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked .....				
<b>2</b> Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked .....				
<b>3</b> Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked .....				
<b>4</b> Short-term capital gain from installment sales from Form 6252, line 26 or 37 .....				<b>4</b>
<b>5</b> Short-term capital gain or (loss) from like-kind exchanges from Form 8824 .....				<b>5</b>
<b>6</b> Unused capital loss carryover (attach computation) .....				<b>6</b> ( )
<b>7</b> Net short-term capital gain or (loss). Combine lines 1a through 6 in column h .....				<b>7</b>

**Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year**

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)
<b>8a</b> 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 .....				
<b>8b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked .....				
<b>9</b> Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked .....				
<b>10</b> Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked .....				
<b>11</b> Enter gain from Form 4797, line 7 or 9 .....				<b>11</b> 3.
<b>12</b> Long-term capital gain from installment sales from Form 6252, line 26 or 37 .....				<b>12</b>
<b>13</b> Long-term capital gain or (loss) from like-kind exchanges from Form 8824 .....				<b>13</b>
<b>14</b> Capital gain distributions .....				<b>14</b>
<b>15</b> Net long-term capital gain or (loss). Combine lines 8a through 14 in column h .....				<b>15</b> 3.

**Part III Summary of Parts I and II**

<b>16</b> Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15) .....	<b>16</b>	
<b>17</b> Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7) .....	<b>17</b>	3.
<b>18</b> Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the applicable line on other returns .....	<b>18</b>	3.

**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))

Department of the Treasury  
Internal Revenue Service

Attach to your tax return.  
Go to [www.irs.gov/Form4797](http://www.irs.gov/Form4797) for instructions and the latest information.

Name(s) shown on return

Identifying number

**MORGAN FAMILY FOUNDATION**

**30-0205024**

- 1a** Enter the gross proceeds from sales or exchanges reported to you for 2022 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 .....
- b** Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of MACRS assets .....
- c** Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS assets .....

<b>1a</b>	
<b>1b</b>	
<b>1c</b>	

**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)
	<b>MPOWERED CAPITAL ACCESS FUND I, L.P.</b>						<b>3.</b>

- 3** Gain, if any, from Form 4684, line 39 .....
- 4** Section 1231 gain from installment sales from Form 6252, line 26 or 37 .....
- 5** Section 1231 gain or (loss) from like-kind exchanges from Form 8824 .....
- 6** Gain, if any, from line 32, from other than casualty or theft .....
- 7** Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows .....

<b>3</b>	
<b>4</b>	
<b>5</b>	
<b>6</b>	
<b>7</b>	<b>3.</b>

**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.

- 8** Nonrecaptured net section 1231 losses from prior years. See instructions .....
- 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 .....

<b>8</b>	
<b>9</b>	<b>3.</b>

**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 .....
- 12** Gain, if any, from line 7 or amount from line 8, if applicable .....
- 13** Gain, if any, from line 31 .....
- 14** Net gain or (loss) from Form 4684, lines 31 and 38a .....
- 15** Ordinary gain from installment sales from Form 6252, line 25 or 36 .....
- 16** Ordinary gain or (loss) from like-kind exchanges from Form 8824 .....
- 17** Combine lines 10 through 16 .....

<b>11</b>	( )
<b>12</b>	
<b>13</b>	
<b>14</b>	
<b>15</b>	
<b>16</b>	
<b>17</b>	

**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), line 16. (Do not include any loss on property used as an employee.) Identify as from "Form 4797, line 18a." See instructions .....
- 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), Part I, line 4 .....

<b>18a</b>	
<b>18b</b>	

LHA For Paperwork Reduction Act Notice, see separate instructions.



**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			
<b>These columns relate to the properties on lines 19A through 19D.</b>		<b>Property A</b>	<b>Property B</b>
		<b>Property C</b>	<b>Property D</b>
20	Gross sales price ( <b>Note:</b> See line 1a 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	
<b>25 If section 1245 property:</b>			
a	Depreciation allowed or allowable from line 22	25a	
b	Enter the <b>smaller</b> of line 24 or 25a	25b	
<b>26 If section 1250 property:</b> 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 <b>smaller</b> 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 <b>smaller</b> of line 26c or 26d	26e	
f	Section 291 amount (corporations only)	26f	
g	Add lines 26b, 26e, and 26f	26g	
<b>27 If section 1252 property:</b> 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 <b>smaller</b> of line 24 or 27b	27c	
<b>28 If section 1254 property:</b>			
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 <b>smaller</b> of line 24 or 28a	28b	
<b>29 If section 1255 property:</b>			
a	Applicable percentage of payments excluded from income under section 126. See instructions	29a	
b	Enter the <b>smaller</b> 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	

**SCHEDULE D  
(Form 1120)**

Department of the Treasury  
Internal Revenue Service

**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](http://www.irs.gov/Form1120) for instructions and the latest information.

OMB No. 1545-0123

**2022**

Name <b>MORGAN FAMILY FOUNDATION</b>	Employer identification number <b>30-0205024</b>
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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 - Assets Held One Year or Less**

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)
<b>1a</b> 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 .....				
<b>1b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked .....				
<b>2</b> Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked .....				
<b>3</b> Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked .....				
<b>4</b> Short-term capital gain from installment sales from Form 6252, line 26 or 37 .....				<b>4</b>
<b>5</b> Short-term capital gain or (loss) from like-kind exchanges from Form 8824 .....				<b>5</b>
<b>6</b> Unused capital loss carryover (attach computation) .....				<b>6</b> ( )
<b>7</b> Net short-term capital gain or (loss). Combine lines 1a through 6 in column h .....				<b>7</b>

**Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year**

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)
<b>8a</b> 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 .....				
<b>8b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked .....				
<b>9</b> Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked .....				
<b>10</b> Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked .....				
<b>11</b> Enter gain from Form 4797, line 7 or 9 .....				<b>11</b> 3.
<b>12</b> Long-term capital gain from installment sales from Form 6252, line 26 or 37 .....				<b>12</b>
<b>13</b> Long-term capital gain or (loss) from like-kind exchanges from Form 8824 .....				<b>13</b>
<b>14</b> Capital gain distributions .....				<b>14</b>
<b>15</b> Net long-term capital gain or (loss). Combine lines 8a through 14 in column h .....				<b>15</b> 3.

**Part III Summary of Parts I and II**

<b>16</b> Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15) .....	<b>16</b>	
<b>17</b> Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7) .....	<b>17</b>	3.
<b>18</b> Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the applicable line on other returns .....	<b>18</b>	3.

**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))

Department of the Treasury  
Internal Revenue Service

Attach to your tax return.  
Go to [www.irs.gov/Form4797](http://www.irs.gov/Form4797) for instructions and the latest information.

Name(s) shown on return

Identifying number

**MORGAN FAMILY FOUNDATION**

**30-0205024**

- 1a** Enter the gross proceeds from sales or exchanges reported to you for 2022 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 .....
- b** Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of MACRS assets .....
- c** Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS assets .....

**1a**

**1b**

**1c**

**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)
	<b>MPOWERED CAPITAL ACCESS FUND I, L.P.</b>						<b>3.</b>

- 3** Gain, if any, from Form 4684, line 39 .....
- 4** Section 1231 gain from installment sales from Form 6252, line 26 or 37 .....
- 5** Section 1231 gain or (loss) from like-kind exchanges from Form 8824 .....
- 6** Gain, if any, from line 32, from other than casualty or theft .....
- 7** Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows .....

**3**

**4**

**5**

**6**

**7**

**3.**

**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.

- 8** Nonrecaptured net section 1231 losses from prior years. See instructions .....
- 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 .....

**8**

**9**

**3.**

**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 .....
- 12** Gain, if any, from line 7 or amount from line 8, if applicable .....
- 13** Gain, if any, from line 31 .....
- 14** Net gain or (loss) from Form 4684, lines 31 and 38a .....
- 15** Ordinary gain from installment sales from Form 6252, line 25 or 36 .....
- 16** Ordinary gain or (loss) from like-kind exchanges from Form 8824 .....
- 17** Combine lines 10 through 16 .....

**11**

**12**

**13**

**14**

**15**

**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), 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), Part I, line 4 .....

**18b**

LHA For Paperwork Reduction Act Notice, see separate instructions.

**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			
<b>These columns relate to the properties on lines 19A through 19D.</b>			
		<b>Property A</b>	<b>Property B</b>
		<b>Property C</b>	<b>Property D</b>
20	Gross sales price ( <b>Note:</b> See line 1a 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	<b>If section 1245 property:</b>		
a	Depreciation allowed or allowable from line 22	25a	
b	Enter the <b>smaller</b> of line 24 or 25a	25b	
26	<b>If section 1250 property:</b> 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 <b>smaller</b> 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 <b>smaller</b> of line 26c or 26d	26e	
f	Section 291 amount (corporations only)	26f	
g	Add lines 26b, 26e, and 26f	26g	
27	<b>If section 1252 property:</b> 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 <b>smaller</b> of line 24 or 27b	27c	
28	<b>If section 1254 property:</b>		
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 <b>smaller</b> of line 24 or 28a	28b	
29	<b>If section 1255 property:</b>		
a	Applicable percentage of payments excluded from income under section 126. See instructions	29a	
b	Enter the <b>smaller</b> 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	

Name of person filing this return **MORGAN FAMILY FOUNDATION** Filer's identifying number **30-0205024**

Number, street, and room or suite no. (or P.O. box number if mail is not delivered to street address)  
**506 S HIGH ST STE B**

City or town, state, and ZIP code  
**YELLOW SPRINGS, OH 45387-0561**

Filer's tax year beginning **JAN 1**, 20**22**, and ending **DEC 31**, 20**22**

**Important:** Fill in all applicable lines and schedules. All information **must** be in English. All amounts **must** be stated in U.S. dollars unless otherwise indicated.

Check here  FDE of a U.S. person  FDE of a controlled foreign corporation (CFC)  FDE of a controlled foreign partnership  
 FB of a U.S. person  FB of a CFC  FB of a controlled foreign partnership

Check here  Initial Form 8858  Final Form 8858

**1a** Name and address of FDE or FB  
**CBC EXPORT TRADE SERVICES (SHANGHAI ROOM F1, 12F, 666 FUZHOU ROAD SHANGHAI CHINA**

**b(1)** U.S. identifying number, if any  
**98-1338359**

**b(2)** Reference ID number (see instructions)

**c** For FDE, country(ies) under whose laws organized and entity type under local tax law  
**CHINA PARTNERSHIP**

**d** Date(s) of organization  
**07 15 10**

**e** Effective date as FDE  
**07/15/10**

**f** If benefits under a U.S. tax treaty were claimed with respect to income of the FDE or FB, enter the treaty and article number

**g** Country in which principal business activity is conducted  
**CHINA**

**h** Principal business activity  
**NONDEPOSITORY**

**i** Functional currency  
**USD**

**2** Provide the following information for the FDE's or FB's accounting period stated above.

**a** Name, address, and identifying number of branch office or agent (if any) in the United States  
**CBC EQUITY FUNDING, LLC  
 3 EMBARCADERO CENTER, SUITE 550  
 SAN FRANCISCO, CA 94111  
 81-4502499**

**b** Name and address (including corporate department, if applicable) of person(s) with custody of the books and records of the FDE or FB, and the location of such books and records, if different

**3** For the **tax owner** of the FDE or FB (if different from the filer), provide the following (see instructions):

**a** Name and address  
**WHITE OAK FIXED INCOME FUND C, LP  
 3 EMBARCADERO CENTER, SUITE 550  
 SAN FRANCISCO, CA 94111**

**b** Annual accounting period covered by the return (see instructions)  
**01/01/22 - 12/31/22**

**c(1)** U.S. identifying number, if any  
**47-1100734**

**c(2)** Reference ID number (see instructions)

**d** Country under whose laws organized  
**UNITED STATES**

**e** Functional currency  
**USD**

**4** For the **direct owner** of the FDE or FB (if different from the tax owner), provide the following (see instructions):

**a** Name and address  
**CBC EQUITY FUNDING, LLC  
 3 EMBARCADERO CENTER, SUITE 550  
 SAN FRANCISCO, CA 94111**

**b** Country under whose laws organized  
**CHINA**

**c** U.S. identifying number, if any  
**81-4502499**

**d** Functional currency  
**USD**

**5** Attach an organizational chart that identifies the name, placement, percentage of ownership, tax classification, and country of organization of all entities in the chain of ownership between the tax owner and the FDE or FB, and the chain of ownership between the FDE or FB and each entity in which the FDE or FB has a 10% or more direct or indirect interest. See instructions.

**SEE STATEMENT 27**

**Schedule C Income Statement** (see instructions)

**Important:** Report all information in functional currency in accordance with U.S. GAAP. Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules or the average exchange rate determined under section 989(b)). If the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for FDEs or FBs that use U.S. dollar approximate separate transactions method of accounting (DASTM).

If you are using the average exchange rate (determined under section 989(b)), check the following box

	Functional Currency	U.S. Dollars
1	1	
2	2	
3	3	
4	4	
5	5	
6	6	
7	7	
8	8	
9	9	
10	10	
11	11	
12	12	
13	13	
14	14	

**Schedule C-1 Section 987 Gain or Loss Information**

	(a) Amount stated in functional currency of FDE or FB	(b) Amount stated in functional currency of recipient	
		Yes	No
1	1		
2	2		
3	3		
4			
5			

**Schedule F Balance Sheet**

**Important:** Report all amounts in U.S. dollars computed in functional currency and translated into U.S. dollars in accordance with U.S. GAAP. See instructions for an exception for FDEs or FBs that use DASTM.

Assets		(a) Beginning of annual accounting period	(b) End of annual accounting period
1	1		
2	2		
3	3		
<b>Liabilities and Owner's Equity</b>			
4	4		
5	5		
6	6		

**Schedule G Other Information**

	Yes	No
1		X
2		X
3		
4		X
5		X

**Schedule G Other Information** (continued)

		Yes	No
6	Is the FDE or FB a qualified business unit as defined in section 989(a)?		X
<i>Do not complete lines 7 and 8 if you are an individual who owns an FB or FDE directly or through tiers of FBs and FDEs.</i>			
7a	During the tax year, did the FDE or FB receive, or accrue the receipt of, any amounts defined as a base erosion payment under section 59A(d) or have a base erosion tax benefit under section 59A(c)(2) from a foreign person, which is a related party of the taxpayer? See instructions. If "Yes," complete lines 7b and 7c		X
b	Enter the total amount of the base erosion payments \$ _____		
c	Enter the total amount of the base erosion tax benefit \$ _____		
8a	During the tax year, did the FDE or FB pay, or accrue the payment of, any amounts defined as a base erosion payment under section 59A(d) or have a base erosion tax benefit under section 59A(c)(2) to a foreign person, which is a related party of the taxpayer? See instructions. If "Yes," complete lines 8b and 8c		X
b	Enter the total amount of the base erosion payments \$ _____		
c	Enter the total amount of the base erosion tax benefit \$ _____		
9	<i>Answer only if the tax owner of the FDE or FB is a CFC:</i> Were there any intracompany transactions between the FDE or FB and the CFC or any other branch of the CFC during the tax year, in which the FDE or FB acted as a manufacturing, selling, or purchasing branch?  <i>Answer the remaining questions in Schedule G only if the tax owner of the FB or the interest in the FDE is a U.S. corporation. Answer questions 10a through 11c if the tax owner of the FB or the interest in the FDE is treated as a U.S. corporation solely for purposes of these questions.</i>		
10a	If the FB or the interest in the FDE is a separate unit under Regulations section 1.1503(d)-1(b)(4), and is not part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii), does the separate unit have a dual consolidated loss as defined in Regulations section 1.1503(d)-1(b)(5)(ii)?		N/A
b	If "Yes," enter the amount of the dual consolidated loss \$ ( _____ )		
11a	If the FB or the interest in the FDE is a separate unit and part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii), does the combined separate unit have a dual consolidated loss as defined in Regulations section 1.1503(d)-1(b)(5)(ii)? If "Yes," complete lines 11b and 11c		
b	Enter the amount of the dual consolidated loss for the combined separate unit \$ ( _____ )		
c	Enter the net income (loss) attributed to the individual FB or the individual interest in the FDE as determined under Regulations section 1.1503(d)-5(c)(4)(ii)(A) \$ _____		
12a	Was any portion of the dual consolidated loss on line 10b or 11b taken into account in computing U.S. taxable income for the year? If "Yes," go to line 12b. If "No," go to line 13		
b	Was this a permitted domestic use of the dual consolidated loss under Regulations section 1.1503(d)-6? If "Yes," see the instructions and go to line 12c. If "No," go to line 12d		
c	If "Yes," is the documentation that is required for the permitted domestic use under Regulations section 1.1503(d)-6 attached to the return? After answering this question, go to line 13a		
d	If this was not a permitted domestic use, was the dual consolidated loss used to compute consolidated taxable income as provided under Regulations section 1.1503(d)-4? If "Yes," go to line 12e		
e	Enter the separate unit's contribution to the cumulative consolidated taxable income ("cumulative register") as of the beginning of the tax year \$ _____ . See instructions.		
13a	During the tax year, did any triggering event(s) occur under Regulations section 1.1503(d)-6(e) requiring recapture of any dual consolidated loss(es) attributable to the FB or interest in the FDE, individually or as part of a combined separate unit, in any prior tax years?		
b	If "Yes," enter the total amount of recapture \$ _____ . See instructions.		

**Schedule H Current Earnings and Profits or Taxable Income** (see instructions)

**Important:** Enter the amounts on lines 1 through 6 in functional currency.

1	Current year net income (loss) per foreign books of account	1	
2	Total net additions	2	
3	Total net subtractions	3	
4	Current earnings and profits (or taxable income-see instructions) (line 1 plus line 2 minus line 3)	4	
5	DASTM gain (loss) (if applicable)	5	
6	Combine lines 4 and 5	6	
7	Current earnings and profits (or taxable income) in U.S. dollars (line 6 translated at the average exchange rate determined under section 989(b) and the related regulations (see instructions))	7	
8	Enter exchange rate used for line 7		

**Schedule I Transferred Loss Amount** (see instructions)

**Important:** See instructions for who has to complete this section.

		Yes	No
1	Were any assets of an FB (including an FB that is an FDE) transferred to a foreign corporation? If "No," stop here. If "Yes," go to line 2 .....		
2	Was the transferor a domestic corporation that transferred substantially all of the assets of an FB (including an FB that is an FDE) to a specified 10%-owned foreign corporation? If "No," stop here. If "Yes," go to line 3 .....		
3	Immediately after the transfer, was the domestic corporation a U.S. shareholder with respect to the transferee foreign corporation? If "No," stop here. If "Yes," go to line 4 .....		
4	Enter the transferred loss amount included in gross income as required under section 91. See instructions .....	4	

**Schedule J Income Taxes Paid or Accrued** (see instructions)

(a) Country or Possession	Foreign Income Taxes				Foreign Tax Credit Separate Categories			
	(b) Foreign Tax Year (YYYY-MM-DD)	(c) Foreign Currency	(d) Conversion Rate	(e) U.S. Dollars	(f) Foreign Branch	(g) Passive	(h) General	(i) Other
<b>Totals</b>								



**Information Return of U.S. Persons With Respect to Foreign  
 Disregarded Entities (FDEs) and Foreign Branches (FBs)**

▶ Go to [www.irs.gov/Form8858](http://www.irs.gov/Form8858) for instructions and the latest information.

Information furnished for the FDE's or FB's annual accounting period (see instructions)

beginning **JAN 1**, 20**22**, and ending **DEC 31**, 20**22**

Name of person filing this return **MORGAN FAMILY FOUNDATION** Filer's identifying number **30-0205024**

Number, street, and room or suite no. (or P.O. box number if mail is not delivered to street address)  
**506 S HIGH ST STE B**

City or town, state, and ZIP code  
**YELLOW SPRINGS, OH 45387-0561**

Filer's tax year beginning **JAN 1**, 20**22**, and ending **DEC 31**, 20**22**

**Important:** Fill in all applicable lines and schedules. All information **must** be in English. All amounts **must** be stated in U.S. dollars unless otherwise indicated.

Check here  FDE of a U.S. person  FDE of a controlled foreign corporation (CFC)  FDE of a controlled foreign partnership  
 FB of a U.S. person  FB of a CFC  FB of a controlled foreign partnership

Check here  Initial Form 8858  Final Form 8858

**1a** Name and address of FDE or FB  
**WO-91395 DESIGNATED ACTIVITY COMPAN**  
**3 EMBARCADERO CENTER, SUITE 550**  
**SAN FRANCISCO CA 94111**

**b(1)** U.S. identifying number, if any  
**98-1396122**

**b(2)** Reference ID number (see instructions)

**c** For FDE, country(ies) under whose laws organized and entity type under local tax law  
**IRELAND LIMITED LIABILITY C**

**d** Date(s) of organization  
**10 11 17**

**e** Effective date as FDE  
**10/11/17**

**f** If benefits under a U.S. tax treaty were claimed with respect to income of the FDE or FB, enter the treaty and article number

**g** Country in which principal business activity is conducted  
**IRELAND**

**h** Principal business activity  
**523900**

**i** Functional currency  
**USD**

**2** Provide the following information for the FDE's or FB's accounting period stated above.

**a** Name, address, and identifying number of branch office or agent (if any) in the United States

**b** Name and address (including corporate department, if applicable) of person(s) with custody of the books and records of the FDE or FB, and the location of such books and records, if different

**3** For the **tax owner** of the FDE or FB (if different from the filer), provide the following (see instructions):

**a** Name and address  
**WHITE OAK COMMERCIAL AVIATION HOLDC**  
**3 EMBARCADERO CENTER, SUITE 550**  
**SAN FRANCISCO, CA 94111**

**b** Annual accounting period covered by the return (see instructions)  
**01/01/22 - 12/31/22**

**c(1)** U.S. identifying number, if any  
**82-3192273**

**c(2)** Reference ID number (see instructions)

**d** Country under whose laws organized  
**UNITED STATES**

**e** Functional currency  
**USD**

**4** For the **direct owner** of the FDE or FB (if different from the tax owner), provide the following (see instructions):

**a** Name and address  
**WO-IRELAND LLC**  
**3 EMBARCADERO CENTER, SUITE 550**  
**SAN FRANCISCO, CA 94111**

**b** Country under whose laws organized  
**UNITED STATES**

**c** U.S. identifying number, if any  
**82-3192273**

**d** Functional currency  
**USD**

**5** Attach an organizational chart that identifies the name, placement, percentage of ownership, tax classification, and country of organization of all entities in the chain of ownership between the tax owner and the FDE or FB, and the chain of ownership between the FDE or FB and each entity in which the FDE or FB has a 10% or more direct or indirect interest. See instructions.

**SEE STATEMENT 28**

**Schedule C Income Statement** (see instructions)

**Important:** Report all information in functional currency in accordance with U.S. GAAP. Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules or the average exchange rate determined under section 989(b)). If the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for FDEs or FBs that use U.S. dollar approximate separate transactions method of accounting (DASTM).

If you are using the average exchange rate (determined under section 989(b)), check the following box

	Functional Currency	U.S. Dollars
1 Gross receipts or sales (net of returns and allowances)	1	50,918.
2 Cost of goods sold	2	
3 Gross profit (subtract line 2 from line 1)	3	50,918.
4 Dividends	4	
5 Interest	5	
6 Gross rents, royalties, and license fees	6	
7 Gross income from performance of services	7	
8 Foreign currency gain (loss)	8	
9 Other income	9	
10 Total income (add lines 3 through 9)	10	50,918.
11 Total deductions (exclude income tax expense)	11	50,918.
12 Income tax expense	12	
13 Other adjustments	13	
14 Net income (loss) per books	14	0.

**Schedule C-1 Section 987 Gain or Loss Information**

	(a) Amount stated in functional currency of FDE or FB	(b) Amount stated in functional currency of recipient	
		Yes	No
<b>Note:</b> See the instructions if there are multiple recipients of remittances from the FDE or FB.			
1 Remittances from the FDE or FB	1		
2 Section 987 gain (loss) recognized by recipient	2		
3 Section 987 gain (loss) deferred under Regulations section 1.987-12 (attach statement)	3		
4 Were all remittances from the FDE or FB treated as made to the direct owner?			
5 Did the tax owner change its method of accounting for section 987 gain or loss with respect to remittances from the FDE or FB during the tax year? If "Yes," attach a statement describing the method used prior to the change and new method of accounting			

**Schedule F Balance Sheet**

**Important:** Report all amounts in U.S. dollars computed in functional currency and translated into U.S. dollars in accordance with U.S. GAAP. See instructions for an exception for FDEs or FBs that use DASTM.

Assets		(a)	(b)
		Beginning of annual accounting period	End of annual accounting period
1 Cash and other current assets	1	791,540.	0.
2 Other assets	2	0.	0.
3 Total assets	3	791,540.	0.
<b>Liabilities and Owner's Equity</b>			
4 Liabilities	4	791,540.	0.
5 Owner's equity	5	0.	0.
6 Total liabilities and owner's equity	6	791,540.	0.

**Schedule G Other Information**

	Yes	No
1 During the tax year, did the FDE or FB own an interest in any trust?		X
2 During the tax year, did the FDE or FB own at least a 10% interest, directly or indirectly, in any foreign partnership?		X
3 Answer only if the FDE made its election to be treated as disregarded from its owner during the tax year: Did the tax owner claim a loss with respect to stock or debt of the FDE as a result of the election?		
4 During the tax year, did the FDE or FB pay or accrue any foreign tax that was disqualified for credit under section 901(m)?		X
5 During the tax year, did the FDE or FB pay or accrue foreign taxes to which section 909 applies, or treat foreign taxes that were previously suspended under section 909 as no longer suspended?		X

**Schedule G Other Information** (continued)

	Yes	No
<b>6</b> Is the FDE or FB a qualified business unit as defined in section 989(a)?	X	
<i>Do not complete lines 7 and 8 if you are an individual who owns an FB or FDE directly or through tiers of FBs and FDEs.</i>		
<b>7a</b> During the tax year, did the FDE or FB receive, or accrue the receipt of, any amounts defined as a base erosion payment under section 59A(d) or have a base erosion tax benefit under section 59A(c)(2) from a foreign person, which is a related party of the taxpayer? See instructions. If "Yes," complete lines 7b and 7c		X
<b>b</b> Enter the total amount of the base erosion payments \$		
<b>c</b> Enter the total amount of the base erosion tax benefit \$		
<b>8a</b> During the tax year, did the FDE or FB pay, or accrue the payment of, any amounts defined as a base erosion payment under section 59A(d) or have a base erosion tax benefit under section 59A(c)(2) to a foreign person, which is a related party of the taxpayer? See instructions. If "Yes," complete lines 8b and 8c		X
<b>b</b> Enter the total amount of the base erosion payments \$		
<b>c</b> Enter the total amount of the base erosion tax benefit \$		
<b>9</b> Answer only if the tax owner of the FDE or FB is a CFC: Were there any intracompany transactions between the FDE or FB and the CFC or any other branch of the CFC during the tax year, in which the FDE or FB acted as a manufacturing, selling, or purchasing branch? <i>Answer the remaining questions in Schedule G only if the tax owner of the FB or the interest in the FDE is a U.S. corporation. Answer questions 10a through 11c if the tax owner of the FB or the interest in the FDE is treated as a U.S. corporation solely for purposes of these questions.</i>		
<b>10a</b> If the FB or the interest in the FDE is a separate unit under Regulations section 1.1503(d)-1(b)(4), and is not part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii), does the separate unit have a dual consolidated loss as defined in Regulations section 1.1503(d)-1(b)(5)(ii)?		X
<b>b</b> If "Yes," enter the amount of the dual consolidated loss \$		
<b>11a</b> If the FB or the interest in the FDE is a separate unit and part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii), does the combined separate unit have a dual consolidated loss as defined in Regulations section 1.1503(d)-1(b)(5)(ii)? If "Yes," complete lines 11b and 11c		X
<b>b</b> Enter the amount of the dual consolidated loss for the combined separate unit \$		
<b>c</b> Enter the net income (loss) attributed to the individual FB or the individual interest in the FDE as determined under Regulations section 1.1503(d)-5(c)(4)(ii)(A)		
<b>12a</b> Was any portion of the dual consolidated loss on line 10b or 11b taken into account in computing U.S. taxable income for the year? If "Yes," go to line 12b. If "No," go to line 13		X
<b>b</b> Was this a permitted domestic use of the dual consolidated loss under Regulations section 1.1503(d)-6? If "Yes," see the instructions and go to line 12c. If "No," go to line 12d		
<b>c</b> If "Yes," is the documentation that is required for the permitted domestic use under Regulations section 1.1503(d)-6 attached to the return? After answering this question, go to line 13a		
<b>d</b> If this was not a permitted domestic use, was the dual consolidated loss used to compute consolidated taxable income as provided under Regulations section 1.1503(d)-4? If "Yes," go to line 12e		
<b>e</b> Enter the separate unit's contribution to the cumulative consolidated taxable income ("cumulative register") as of the beginning of the tax year \$ . See instructions.		
<b>13a</b> During the tax year, did any triggering event(s) occur under Regulations section 1.1503(d)-6(e) requiring recapture of any dual consolidated loss(es) attributable to the FB or interest in the FDE, individually or as part of a combined separate unit, in any prior tax years?		X
<b>b</b> If "Yes," enter the total amount of recapture \$ . See instructions.		

**Schedule H Current Earnings and Profits or Taxable Income** (see instructions)

**Important:** Enter the amounts on lines 1 through 6 in functional currency.

<b>1</b> Current year net income (loss) per foreign books of account	<b>1</b>	0.
<b>2</b> Total net additions	<b>2</b>	
<b>3</b> Total net subtractions	<b>3</b>	
<b>4</b> Current earnings and profits (or taxable income-see instructions) (line 1 plus line 2 minus line 3)	<b>4</b>	
<b>5</b> DASTM gain (loss) (if applicable)	<b>5</b>	
<b>6</b> Combine lines 4 and 5	<b>6</b>	
<b>7</b> Current earnings and profits (or taxable income) in U.S. dollars (line 6 translated at the average exchange rate determined under section 989(b) and the related regulations (see instructions))	<b>7</b>	
<b>8</b> Enter exchange rate used for line 7		

**Schedule I Transferred Loss Amount** (see instructions)

**Important:** See instructions for who has to complete this section.

		Yes	No
1	Were any assets of an FB (including an FB that is an FDE) transferred to a foreign corporation? If "No," stop here. If "Yes," go to line 2 .....		
2	Was the transferor a domestic corporation that transferred substantially all of the assets of an FB (including an FB that is an FDE) to a specified 10%-owned foreign corporation? If "No," stop here. If "Yes," go to line 3 .....		
3	Immediately after the transfer, was the domestic corporation a U.S. shareholder with respect to the transferee foreign corporation? If "No," stop here. If "Yes," go to line 4 .....		
4	Enter the transferred loss amount included in gross income as required under section 91. See instructions .....	4	

**Schedule J Income Taxes Paid or Accrued** (see instructions)

(a) Country or Possession	Foreign Income Taxes				Foreign Tax Credit Separate Categories			
	(b) Foreign Tax Year (YYYY-MM-DD)	(c) Foreign Currency	(d) Conversion Rate	(e) U.S. Dollars	(f) Foreign Branch	(g) Passive	(h) General	(i) Other
<b>Totals</b>								

**Information Return of U.S. Persons With Respect to Foreign  
 Disregarded Entities (FDEs) and Foreign Branches (FBs)**

▶ Go to [www.irs.gov/Form8858](http://www.irs.gov/Form8858) for instructions and the latest information.

Information furnished for the FDE's or FB's annual accounting period (see instructions)

beginning **JAN 1**, 20**22**, and ending **DEC 31**, 20**22**

Name of person filing this return **MORGAN FAMILY FOUNDATION** Filer's identifying number **30-0205024**

Number, street, and room or suite no. (or P.O. box number if mail is not delivered to street address)  
**506 S HIGH ST STE B**

City or town, state, and ZIP code  
**YELLOW SPRINGS, OH 45387-0561**

Filer's tax year beginning **JAN 1**, 20**22**, and ending **DEC 31**, 20**22**

**Important:** Fill in all applicable lines and schedules. All information **must** be in English. All amounts **must** be stated in U.S. dollars unless otherwise indicated.

Check here  FDE of a U.S. person  FDE of a controlled foreign corporation (CFC)  FDE of a controlled foreign partnership  
 FB of a U.S. person  FB of a CFC  FB of a controlled foreign partnership

Check here  Initial Form 8858  Final Form 8858

**1a** Name and address of FDE or FB  
**WO-91396 DESIGNATED ACTIVITY COMPAN**  
**3 EMBARCADERO CENTER, SUITE 550**  
**SAN FRANCISCO CA 94111**

**b(1)** U.S. identifying number, if any  
**98-1395211**

**b(2)** Reference ID number (see instructions)

**c** For FDE, country(ies) under whose laws organized and entity type under local tax law  
**IRELAND LIMITED LIABILITY C**

**d** Date(s) of organization  
**10 11 17**

**e** Effective date as FDE  
**10/11/17**

**f** If benefits under a U.S. tax treaty were claimed with respect to income of the FDE or FB, enter the treaty and article number

**g** Country in which principal business activity is conducted  
**IRELAND**

**h** Principal business activity  
**523900**

**i** Functional currency  
**USD**

**2** Provide the following information for the FDE's or FB's accounting period stated above.

**a** Name, address, and identifying number of branch office or agent (if any) in the United States

**b** Name and address (including corporate department, if applicable) of person(s) with custody of the books and records of the FDE or FB, and the location of such books and records, if different

**3** For the **tax owner** of the FDE or FB (if different from the filer), provide the following (see instructions):

**a** Name and address  
**WHITE OAK COMMERCIAL AVIATION HOLDC**  
**3 EMBARCADERO CENTER, SUITE 550**  
**SAN FRANCISCO, CA 94111**

**b** Annual accounting period covered by the return (see instructions)  
**01/01/22 - 12/31/22**

**c(1)** U.S. identifying number, if any  
**82-3192273**

**c(2)** Reference ID number (see instructions)

**d** Country under whose laws organized  
**UNITED STATES**

**e** Functional currency  
**USD**

**4** For the **direct owner** of the FDE or FB (if different from the tax owner), provide the following (see instructions):

**a** Name and address  
**WO-IRELAND LLC**  
**3 EMBARCADERO CENTER, SUITE 550**  
**SAN FRANCISCO, CA 94111**

**b** Country under whose laws organized  
**UNITED STATES**

**c** U.S. identifying number, if any  
**82-3192273**

**d** Functional currency  
**USD**

**5** Attach an organizational chart that identifies the name, placement, percentage of ownership, tax classification, and country of organization of all entities in the chain of ownership between the tax owner and the FDE or FB, and the chain of ownership between the FDE or FB and each entity in which the FDE or FB has a 10% or more direct or indirect interest. See instructions.

**SEE STATEMENT 29**

**Schedule C Income Statement** (see instructions)

**Important:** Report all information in functional currency in accordance with U.S. GAAP. Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules or the average exchange rate determined under section 989(b)). If the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for FDEs or FBs that use U.S. dollar approximate separate transactions method of accounting (DASTM).

If you are using the average exchange rate (determined under section 989(b)), check the following box

	Functional Currency	U.S. Dollars
1 Gross receipts or sales (net of returns and allowances)	1	49,523.
2 Cost of goods sold	2	
3 Gross profit (subtract line 2 from line 1)	3	49,523.
4 Dividends	4	
5 Interest	5	
6 Gross rents, royalties, and license fees	6	
7 Gross income from performance of services	7	
8 Foreign currency gain (loss)	8	
9 Other income	9	
10 Total income (add lines 3 through 9)	10	49,523.
11 Total deductions (exclude income tax expense)	11	49,523.
12 Income tax expense	12	
13 Other adjustments	13	
14 Net income (loss) per books	14	0.

**Schedule C-1 Section 987 Gain or Loss Information**

	(a) Amount stated in functional currency of FDE or FB	(b) Amount stated in functional currency of recipient	
		Yes	No
<b>Note:</b> See the instructions if there are multiple recipients of remittances from the FDE or FB.			
1 Remittances from the FDE or FB	1		
2 Section 987 gain (loss) recognized by recipient	2		
3 Section 987 gain (loss) deferred under Regulations section 1.987-12 (attach statement)	3		
4 Were all remittances from the FDE or FB treated as made to the direct owner?			
5 Did the tax owner change its method of accounting for section 987 gain or loss with respect to remittances from the FDE or FB during the tax year? If "Yes," attach a statement describing the method used prior to the change and new method of accounting			

**Schedule F Balance Sheet**

**Important:** Report all amounts in U.S. dollars computed in functional currency and translated into U.S. dollars in accordance with U.S. GAAP. See instructions for an exception for FDEs or FBs that use DASTM.

Assets	(a) Beginning of annual accounting period	(b) End of annual accounting period
1 Cash and other current assets	1 1,261,871.	0.
2 Other assets	2 0.	0.
3 Total assets	3 1,261,871.	0.
<b>Liabilities and Owner's Equity</b>		
4 Liabilities	4 1,261,871.	0.
5 Owner's equity	5 0.	0.
6 Total liabilities and owner's equity	6 1,261,871.	0.

**Schedule G Other Information**

	Yes	No
1 During the tax year, did the FDE or FB own an interest in any trust?		X
2 During the tax year, did the FDE or FB own at least a 10% interest, directly or indirectly, in any foreign partnership?		X
3 Answer only if the FDE made its election to be treated as disregarded from its owner during the tax year: Did the tax owner claim a loss with respect to stock or debt of the FDE as a result of the election?		
4 During the tax year, did the FDE or FB pay or accrue any foreign tax that was disqualified for credit under section 901(m)?		X
5 During the tax year, did the FDE or FB pay or accrue foreign taxes to which section 909 applies, or treat foreign taxes that were previously suspended under section 909 as no longer suspended?		X

**Schedule G Other Information** (continued)

	Yes	No
<b>6</b> Is the FDE or FB a qualified business unit as defined in section 989(a)?	X	
<i>Do not complete lines 7 and 8 if you are an individual who owns an FB or FDE directly or through tiers of FBs and FDEs.</i>		
<b>7a</b> During the tax year, did the FDE or FB receive, or accrue the receipt of, any amounts defined as a base erosion payment under section 59A(d) or have a base erosion tax benefit under section 59A(c)(2) from a foreign person, which is a related party of the taxpayer? See instructions. If "Yes," complete lines 7b and 7c		X
<b>b</b> Enter the total amount of the base erosion payments \$		
<b>c</b> Enter the total amount of the base erosion tax benefit \$		
<b>8a</b> During the tax year, did the FDE or FB pay, or accrue the payment of, any amounts defined as a base erosion payment under section 59A(d) or have a base erosion tax benefit under section 59A(c)(2) to a foreign person, which is a related party of the taxpayer? See instructions. If "Yes," complete lines 8b and 8c		X
<b>b</b> Enter the total amount of the base erosion payments \$		
<b>c</b> Enter the total amount of the base erosion tax benefit \$		
<b>9</b> Answer only if the tax owner of the FDE or FB is a CFC: Were there any intracompany transactions between the FDE or FB and the CFC or any other branch of the CFC during the tax year, in which the FDE or FB acted as a manufacturing, selling, or purchasing branch?		
<i>Answer the remaining questions in Schedule G only if the tax owner of the FB or the interest in the FDE is a U.S. corporation. Answer questions 10a through 11c if the tax owner of the FB or the interest in the FDE is treated as a U.S. corporation solely for purposes of these questions.</i>		
<b>10a</b> If the FB or the interest in the FDE is a separate unit under Regulations section 1.1503(d)-1(b)(4), and is not part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii), does the separate unit have a dual consolidated loss as defined in Regulations section 1.1503(d)-1(b)(5)(ii)?		X
<b>b</b> If "Yes," enter the amount of the dual consolidated loss \$		
<b>11a</b> If the FB or the interest in the FDE is a separate unit and part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii), does the combined separate unit have a dual consolidated loss as defined in Regulations section 1.1503(d)-1(b)(5)(ii)? If "Yes," complete lines 11b and 11c		X
<b>b</b> Enter the amount of the dual consolidated loss for the combined separate unit \$		
<b>c</b> Enter the net income (loss) attributed to the individual FB or the individual interest in the FDE as determined under Regulations section 1.1503(d)-5(c)(4)(ii)(A)		
<b>12a</b> Was any portion of the dual consolidated loss on line 10b or 11b taken into account in computing U.S. taxable income for the year? If "Yes," go to line 12b. If "No," go to line 13		X
<b>b</b> Was this a permitted domestic use of the dual consolidated loss under Regulations section 1.1503(d)-6? If "Yes," see the instructions and go to line 12c. If "No," go to line 12d		
<b>c</b> If "Yes," is the documentation that is required for the permitted domestic use under Regulations section 1.1503(d)-6 attached to the return? After answering this question, go to line 13a		
<b>d</b> If this was not a permitted domestic use, was the dual consolidated loss used to compute consolidated taxable income as provided under Regulations section 1.1503(d)-4? If "Yes," go to line 12e		
<b>e</b> Enter the separate unit's contribution to the cumulative consolidated taxable income ("cumulative register") as of the beginning of the tax year \$		
<b>13a</b> During the tax year, did any triggering event(s) occur under Regulations section 1.1503(d)-6(e) requiring recapture of any dual consolidated loss(es) attributable to the FB or interest in the FDE, individually or as part of a combined separate unit, in any prior tax years?		X
<b>b</b> If "Yes," enter the total amount of recapture \$		

**Schedule H Current Earnings and Profits or Taxable Income** (see instructions)

**Important:** Enter the amounts on lines 1 through 6 in functional currency.

<b>1</b> Current year net income (loss) per foreign books of account	<b>1</b>	0.
<b>2</b> Total net additions	<b>2</b>	
<b>3</b> Total net subtractions	<b>3</b>	
<b>4</b> Current earnings and profits (or taxable income-see instructions) (line 1 plus line 2 minus line 3)	<b>4</b>	
<b>5</b> DASTM gain (loss) (if applicable)	<b>5</b>	
<b>6</b> Combine lines 4 and 5	<b>6</b>	
<b>7</b> Current earnings and profits (or taxable income) in U.S. dollars (line 6 translated at the average exchange rate determined under section 989(b) and the related regulations (see instructions))	<b>7</b>	
<b>8</b> Enter exchange rate used for line 7		

**Schedule I Transferred Loss Amount** (see instructions)

**Important:** See instructions for who has to complete this section.

		Yes	No
1	Were any assets of an FB (including an FB that is an FDE) transferred to a foreign corporation? If "No," stop here. If "Yes," go to line 2 .....		
2	Was the transferor a domestic corporation that transferred substantially all of the assets of an FB (including an FB that is an FDE) to a specified 10%-owned foreign corporation? If "No," stop here. If "Yes," go to line 3 .....		
3	Immediately after the transfer, was the domestic corporation a U.S. shareholder with respect to the transferee foreign corporation? If "No," stop here. If "Yes," go to line 4 .....		
4	Enter the transferred loss amount included in gross income as required under section 91. See instructions .....	4	

**Schedule J Income Taxes Paid or Accrued** (see instructions)

(a) Country or Possession	Foreign Income Taxes				Foreign Tax Credit Separate Categories			
	(b) Foreign Tax Year (YYYY-MM-DD)	(c) Foreign Currency	(d) Conversion Rate	(e) U.S. Dollars	(f) Foreign Branch	(g) Passive	(h) General	(i) Other
<b>Totals</b>								



**Transactions Between Foreign Disregarded Entity (FDE) or Foreign Branch (FB) and the Filer or Other Related Entities**

OMB No. 1545-1910

▶ Attach to Form 8858.

▶ Go to [www.irs.gov/Form8858](http://www.irs.gov/Form8858) for instructions and the latest information.

Name of person filing Form 8858 <b>MORGAN FAMILY FOUNDATION</b>	Identifying number <b>30-0205024</b>
--	---

Name of FDE or FB <b>CBC EXPORT TRADE SERVICES (SH</b>	U.S. identifying number, if any <b>98-1338359</b>	Reference ID number (see instructions)
---	--	--

Name of tax owner <b>WHITE OAK FIXED INCOME FUND C, LP</b>	U.S. identifying number, if any <b>47-1100734</b>
---	--

**Important:** Complete a separate Schedule M for each FDE or FB. Enter the totals for each type of transaction that occurred during the annual accounting period between the FDE or FB and the persons listed in the applicable columns (b) through (f). All amounts must be stated in U.S. dollars translated from functional currency at the appropriate exchange rate for the FDE's or FB's tax year. See instructions.

**1.000000**

Enter the relevant functional currency and the exchange rate used throughout this schedule ▶ **UNITED STATES, DOLLAR**

**Column headings.** This schedule contains three sets of column headings. Check the box that identifies the status of the tax owner and complete lines 1 through 21 with respect to the applicable set of column headings.

<input type="checkbox"/> <b>Controlled Foreign Partnership</b>					
(a) Transactions of FDE or FB	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlling or controlled by the filer	(d) Any foreign corporation or partnership controlling or controlled by the filer (other than the tax owner)	(e) Any U.S. person with a 10% or more direct interest in the controlled foreign partnership (other than the filer)	
<input type="checkbox"/> <b>Controlled Foreign Corporation</b>					
(a) Transactions of FDE or FB	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlled by the filer	(d) Any foreign corporation or partnership controlled by the filer (other than tax owner)	(e) 10% or more U.S. shareholder of any corporation controlling the tax owner	(f) 10% or more U.S. shareholder, or other owner, of any entity controlling the tax owner
<input checked="" type="checkbox"/> <b>U.S. Tax Owner</b>					
(a) Transactions of FDE or FB	(b) U.S. person filing this return (other than the tax owner of the FDE or FB)	(c) Any domestic corporation or partnership controlled by the filer (other than the tax owner of the FDE or FB)	(d) Any foreign corporation (including its branches or disregarded entities) controlling or controlled by the filer	(e) Any foreign partnership (including its branches or FDEs) controlling or controlled by the filer	
<b>1</b> Sales of inventory .....					
<b>2</b> Sales of property rights .....					
<b>3</b> Compensation received for certain services .....					
<b>4</b> Commissions received .....					
<b>5</b> Rents, royalties, and license fees received .....					
<b>6</b> Dividends/Distributions received .....					
<b>7</b> Interest received .....					
<b>8</b> Loan guarantee fees received .....					
<b>9</b> Other .....					
<b>10</b> Add lines 1 through 9 .....					
<b>11</b> Purchases of inventory .....					
<b>12</b> Purchases of tangible property other than inventory .....					
<b>13</b> Purchases of property rights .....					
<b>14</b> Compensation paid for certain services .....					
<b>15</b> Commissions paid .....					
<b>16</b> Rents, royalties, and license fees paid .....					
<b>17</b> Interest paid .....					
<b>18</b> Loan guarantee fees paid .....					
<b>19</b> Add lines 11 through 18 .....					
<b>20</b> Amounts borrowed (see instructions) .....					
<b>21</b> Amounts loaned (see instructions) .....					

**Transactions Between Foreign Disregarded Entity (FDE) or Foreign Branch (FB) and the Filer or Other Related Entities**

OMB No. 1545-1910

▶ **Attach to Form 8858.**

▶ **Go to [www.irs.gov/Form8858](http://www.irs.gov/Form8858) for instructions and the latest information.**

Name of person filing Form 8858 <b>MORGAN FAMILY FOUNDATION</b>	Identifying number <b>30-0205024</b>
--	---

Name of FDE or FB <b>WO-91395 DESIGNATED ACTIVITY</b>	U.S. identifying number, if any <b>98-1396122</b>	Reference ID number (see instructions)
--	--	--

Name of tax owner <b>WHITE OAK COMMERCIAL AVIATION HOLDC</b>	U.S. identifying number, if any <b>82-3192273</b>
---	--

**Important:** Complete a separate Schedule M for each FDE or FB. Enter the totals for each type of transaction that occurred during the annual accounting period between the FDE or FB and the persons listed in the applicable columns (b) through (f). All amounts must be stated in U.S. dollars translated from functional currency at the appropriate exchange rate for the FDE's or FB's tax year. See instructions.

**1.000000**

Enter the relevant functional currency and the exchange rate used throughout this schedule ▶ **UNITED STATES, DOLLAR**

**Column headings.** This schedule contains three sets of column headings. Check the box that identifies the status of the tax owner and complete lines 1 through 21 with respect to the applicable set of column headings.

	<input type="checkbox"/> <b>Controlled Foreign Partnership</b>				
(a) Transactions of FDE or FB	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlling or controlled by the filer	(d) Any foreign corporation or partnership controlling or controlled by the filer (other than the tax owner)	(e) Any U.S. person with a 10% or more direct interest in the controlled foreign partnership (other than the filer)	
<input type="checkbox"/> <b>Controlled Foreign Corporation</b>	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlled by the filer	(d) Any foreign corporation or partnership controlled by the filer (other than tax owner)	(e) 10% or more U.S. shareholder of any corporation controlling the tax owner	(f) 10% or more U.S. shareholder, or other owner, of any entity controlling the tax owner
<input checked="" type="checkbox"/> <b>U.S. Tax Owner</b>	(b) U.S. person filing this return (other than the tax owner of the FDE or FB)	(c) Any domestic corporation or partnership controlled by the filer (other than the tax owner of the FDE or FB)	(d) Any foreign corporation (including its branches or disregarded entities) controlling or controlled by the filer	(e) Any foreign partnership (including its branches or FDEs) controlling or controlled by the filer	
<b>1</b> Sales of inventory .....					
<b>2</b> Sales of property rights .....					
<b>3</b> Compensation received for certain services .....					
<b>4</b> Commissions received .....					
<b>5</b> Rents, royalties, and license fees received .....					
<b>6</b> Dividends/Distributions received .....					
<b>7</b> Interest received .....					
<b>8</b> Loan guarantee fees received .....					
<b>9</b> Other .....					
<b>10</b> Add lines 1 through 9 .....					
<b>11</b> Purchases of inventory .....					
<b>12</b> Purchases of tangible property other than inventory .....					
<b>13</b> Purchases of property rights .....					
<b>14</b> Compensation paid for certain services .....					
<b>15</b> Commissions paid .....					
<b>16</b> Rents, royalties, and license fees paid .....					
<b>17</b> Interest paid .....					
<b>18</b> Loan guarantee fees paid .....					
<b>19</b> Add lines 11 through 18 .....					
<b>20</b> Amounts borrowed (see instructions) .....					
<b>21</b> Amounts loaned (see instructions) .....					

**Transactions Between Foreign Disregarded Entity (FDE) or Foreign Branch (FB) and the Filer or Other Related Entities**

OMB No. 1545-1910

▶ **Attach to Form 8858.**

▶ **Go to [www.irs.gov/Form8858](http://www.irs.gov/Form8858) for instructions and the latest information.**

Name of person filing Form 8858 <b>MORGAN FAMILY FOUNDATION</b>	Identifying number <b>30-0205024</b>
--	---

Name of FDE or FB <b>WO-91396 DESIGNATED ACTIVITY</b>	U.S. identifying number, if any <b>98-1395211</b>	Reference ID number (see instructions)
--	--	--

Name of tax owner <b>WHITE OAK COMMERCIAL AVIATION HOLDC</b>	U.S. identifying number, if any <b>82-3192273</b>
---	--

**Important:** Complete a separate Schedule M for each FDE or FB. Enter the totals for each type of transaction that occurred during the annual accounting period between the FDE or FB and the persons listed in the applicable columns (b) through (f). All amounts must be stated in U.S. dollars translated from functional currency at the appropriate exchange rate for the FDE's or FB's tax year. See instructions.

**1.000000**

Enter the relevant functional currency and the exchange rate used throughout this schedule ▶ **UNITED STATES, DOLLAR**

**Column headings.** This schedule contains three sets of column headings. Check the box that identifies the status of the tax owner and complete lines 1 through 21 with respect to the applicable set of column headings.

<input type="checkbox"/> <b>Controlled Foreign Partnership</b>  (a) Transactions of FDE or FB	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlling or controlled by the filer	(d) Any foreign corporation or partnership controlling or controlled by the filer (other than the tax owner)	(e) Any U.S. person with a 10% or more direct interest in the controlled foreign partnership (other than the filer)	
<input type="checkbox"/> <b>Controlled Foreign Corporation</b>  (a) Transactions of FDE or FB	(b) U.S. person filing this return	(c) Any domestic corporation or partnership controlled by the filer	(d) Any foreign corporation or partnership controlled by the filer (other than tax owner)	(e) 10% or more U.S. shareholder of any corporation controlling the tax owner	(f) 10% or more U.S. shareholder, or other owner, of any entity controlling the tax owner
<input checked="" type="checkbox"/> <b>U.S. Tax Owner</b>  (a) Transactions of FDE or FB	(b) U.S. person filing this return (other than the tax owner of the FDE or FB)	(c) Any domestic corporation or partnership controlled by the filer (other than the tax owner of the FDE or FB)	(d) Any foreign corporation (including its branches or disregarded entities) controlling or controlled by the filer	(e) Any foreign partnership (including its branches or FDEs) controlling or controlled by the filer	
<b>1</b> Sales of inventory .....					
<b>2</b> Sales of property rights .....					
<b>3</b> Compensation received for certain services .....					
<b>4</b> Commissions received .....					
<b>5</b> Rents, royalties, and license fees received .....					
<b>6</b> Dividends/Distributions received					
<b>7</b> Interest received .....					
<b>8</b> Loan guarantee fees received .....					
<b>9</b> Other .....					
<b>10</b> Add lines 1 through 9 .....					
<b>11</b> Purchases of inventory .....					
<b>12</b> Purchases of tangible property other than inventory .....					
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<b>14</b> Compensation paid for certain services .....					
<b>15</b> Commissions paid .....					
<b>16</b> Rents, royalties, and license fees paid .....					
<b>17</b> Interest paid .....					
<b>18</b> Loan guarantee fees paid .....					
<b>19</b> Add lines 11 through 18 .....					
<b>20</b> Amounts borrowed (see instructions) .....					
<b>21</b> Amounts loaned (see instructions) .....					

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

**2022**

Department of the Treasury  
Internal Revenue Service

Attach to your tax return.  
Go to [www.irs.gov/Form8865](http://www.irs.gov/Form8865) for instructions and the latest information.

Information furnished for the foreign partnership's tax year

beginning **JAN 1**, 2022, and ending **DEC 31**, 2022

Attachment Sequence No. **865**

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**, 2022, and ending **DEC 31**, 2022

**C** Filer's share of liabilities: Nonrecourse \$ Qualified nonrecourse financing \$ Other \$ **22,756.**

**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 3QL**

**2(a)** EIN (if any)

**98-1450398**

**2(b)** Reference ID number

**3** Country under whose laws organized

**GUERNSEY**

<b>4</b> Date of organization <b>07/17/2018</b>	<b>5</b> Principal place of business <b>GUERNSEY</b>	<b>6</b> Principal business activity code number <b>523900</b>	<b>7</b> Principal business activity <b>INVESTMENTS</b>	<b>8a</b> Functional currency <b>USD</b>	<b>8b</b> 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 Regulations section 1.721(c)-1(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?

**LTD 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 Regulations section 1.1503(d)-1(b)(4) or part of a combined separate unit under Regulations section 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 Regulations section 1.1503(d)-1(b)(5)(ii)?

Yes  No

**11** Does this partnership meet both of the following requirements?

- The partnership's total receipts for the tax year were less than \$250,000.
  - 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** (2022)

- 12 a** Is the filer of this Form 8865 claiming a foreign-derived intangible income (FDII) deduction (under section 250) with respect to any transaction with the foreign partnership? If "Yes," complete lines 12b, 12c, and 12d. See instructions  Yes  No
- b** Enter the amount of gross receipts derived from all sales of general property to the foreign partnership that the filer included in its computation of foreign-derived deduction eligible income (FDDEI) \_\_\_\_\_
- c** Enter the amount of gross receipts derived from all sales of intangible property to the foreign partnership that the filer included in its computation of FDDEI \_\_\_\_\_
- d** Enter the amount of gross receipts derived from all services provided to 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

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

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name			Firm's EIN	
	Firm's address			Phone no.	

**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 LES BANQUES, GUERNSEY GY1	98-1449975		<b>X</b>

**SCHEDULE O  
(Form 8865)**

(Rev. October 2021)  
Department of the Treasury  
Internal Revenue Service

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

OMB No. 1545-1668

▶ **Attach to Form 8865. See the Instructions for Form 8865.**  
▶ **Go to [www.irs.gov/Form8865](http://www.irs.gov/Form8865) for instructions and the latest information.**

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 Regulations section 1.721(c)-1(b)(14))? See instructions .....  Yes  No  
**b** If "Yes," was the gain deferral method applied to avoid the recognition of gain upon the contribution of property? .....  Yes  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)? .....  Yes  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	12/31/22		120,000.				
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							
<b>Totals</b>			<b>120,000.</b>				

**3** Enter the transferor's percentage interest in the partnership: (a) Before the transfer **.3100** % (b) After the transfer **.3100** %

**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) 10-2021

Form **8865**

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

OMB No. 1545-1668

**2022**

Department of the Treasury  
Internal Revenue Service

Attach to your tax return.  
Go to [www.irs.gov/Form8865](http://www.irs.gov/Form8865) for instructions and the latest information.

Attachment  
Sequence No. **865**

Information furnished for the foreign partnership's tax year  
beginning **JAN 1**, 2022, and ending **DEC 31**, 2022

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**, 2022, and ending **DEC 31**, 2022

**C** Filer's share of liabilities: Nonrecourse \$ **63,804**. Qualified nonrecourse financing \$ Other \$

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

Name Address EIN

**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  
**RRG SUSTAINABLE WATER  
IMPACT FUND B LP  
5701 TRUXTUN AVENUE, SUITE 201  
BAKERSFIELD, CA 93309**

**2(a)** EIN (if any)  
**98-1465687**  
**2(b)** Reference ID number  
**3** Country under whose laws organized  
**CAYMAN ISLANDS**

<b>4</b> Date of organization <b>07/31/2019</b>	<b>5</b> Principal place of business <b>CAYMAN ISLANDS</b>	<b>6</b> Principal business activity code number <b>523900</b>	<b>7</b> Principal business activity <b>INVESTMENTS</b>	<b>8a</b> Functional currency <b>USD</b>	<b>8b</b> Exchange rate (see instructions) <b>1.000000</b>
--	---	---	--	---	---

**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  
**RRG SUSTAINABLE WATER IMPACT GP, LLC,  
5701 TRUXTUN AVENUE, SUITE 201  
BAKERSFIELD, CA 93309**

**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

**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

**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 Regulations section 1.721(c)-1(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 Regulations section 1.1503(d)-1(b)(4) or part of a combined separate unit under Regulations section 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 Regulations section 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** (2022)

- 12 a** Is the filer of this Form 8865 claiming a foreign-derived intangible income (FDII) deduction (under section 250) with respect to any transaction with the foreign partnership? If "Yes," complete lines 12b, 12c, and 12d. See instructions  Yes  No
- b** Enter the amount of gross receipts derived from all sales of general property to the foreign partnership that the filer included in its computation of foreign-derived deduction eligible income (FDDEI) \_\_\_\_\_
- c** Enter the amount of gross receipts derived from all sales of intangible property to the foreign partnership that the filer included in its computation of FDDEI \_\_\_\_\_
- d** Enter the amount of gross receipts derived from all services provided to 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

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

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name			Firm's EIN	
	Firm's address			Phone no.	

**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



**SCHEDULE O  
(Form 8865)**

(Rev. October 2021)  
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](http://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 **RRG SUSTAINABLE WATER  
IMPACT FUND B LP** EIN (if any) **98-1465687** Reference ID number (see instr)

- 1 a** Is the partnership a section 721(c) partnership (as defined in Regulations section 1.721(c)-1(b)(14))? See instructions .....  Yes  No  
**b** If "Yes," was the gain deferral method applied to avoid the recognition of gain upon the contribution of property? .....  Yes  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)? .....  Yes  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	12/31/22		190,764.				
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							
<b>Totals</b>			<b>190,764.</b>				

**3** Enter the transferor's percentage interest in the partnership: (a) Before the transfer **.4800** % (b) After the transfer **.4600** %

**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) 10-2021

NAME OF ENTITY IN CHAIN OF OWNERSHIP	PERCENT OF OWNERSHIP	FDE'S POSITION	COUNTRY ORGANIZED
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TAX CLASSIFICATION

MORGAN FAMILY FOUNDATION	.3800%	FILER	US
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WHITE OAK INCOME FUND C, LP	100.0000%	WHITE OAK FIXED INCOME FUND C, LP OWNS 100% OF CBC EQUITY FUNDING, LLC.	US
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CBC EQUITY FUNDING, LLC	.0000%	CBC EQUITY FUNDING, LLC IS THE DIRECT OWNER OF CBC EXPORT TRADE SERVICES	CH
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FOREIGN SINGLE OWNER ELECTING TO BE DISREGARDED AS SEPARATE ENTITY

ATTACHMENT FOR FORM 8858, LINE 5

NAME OF ENTITY IN CHAIN OF OWNERSHIP	PERCENT OF OWNERSHIP	FDE'S POSITION	COUNTRY ORGANIZED
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TAX CLASSIFICATION

WO-91395 DESIGNATED ACTIVITY C FOREIGN SINGLE OWNER ELECTING TO BE DISREGARDED AS SEPARATE ENTITY	FOREIGN DISREGARDED ENTITY	EI
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MORGAN FAMILY FOUNDATION	FILER	US
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WHITE OAK COMMERCIAL AVIATION DOMESTIC ENTITY ELECTING TO BE CLASSIFIED AS A PARTNERSHIP	TAX OWNER	US
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WO-IRELAND LLC DOMESTIC ENTITY ELECTING TO BE CLASSIFIED AS A PARTNERSHIP	DIRECT OWNER	US
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ATTACHMENT FOR FORM 8858, LINE 5

NAME OF ENTITY IN CHAIN OF OWNERSHIP	PERCENT OF OWNERSHIP	FDE'S POSITION	COUNTRY ORGANIZED
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TAX CLASSIFICATION

WO-91396 DESIGNATED ACTIVITY C FOREIGN SINGLE OWNER ELECTING TO BE DISREGARDED AS SEPARATE ENTITY	FOREIGN DISREGARDED ENTITY	EI
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MORGAN FAMILY FOUNDATION	FILER	US
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WHITE OAK COMMERCIAL AVIATION DOMESTIC ENTITY ELECTING TO BE CLASSIFIED AS A PARTNERSHIP	TAX OWNER	US
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WO-IRELAND LLC DOMESTIC ENTITY ELECTING TO BE CLASSIFIED AS A PARTNERSHIP	DIRECT OWNER	US
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ATTACHMENT FOR FORM 8858, LINE 5