

# See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



	-	•	
	- 4.5		
_	-	4	
Form	~	•	ш

Department of the Treasury

## **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047

2008

Open to Public Inspection

ir the	mai Rev	Service he organization may have to use a copy of this return to satisfy state	reporting requirem	nents Inspection			
A	For t	he 2008 calendar year, or tax year beginning July 1 , 2008, and endi					
8	Check E	applicable. Please C Name of organization Morris Educational Foundation, Incorpor	rated D	Employer identification number			
	Addres	s change label or Doing Business As		22 3205909			
_		print or Number and street (or P.O. box if mail is not delivered to street address) Room/s	uite E	Telephone number			
_	initial n	1,3pc.   DO D 4004	1 (9	973 ) 631-1415			
_		Specific	<del></del>				
_	Term:n	tions Manietaum N. 1.07062 4324		Gross receipts \$ 143,306			
		E Name and address of advisor of the					
Ц	Applicat			nup return for affiliates 7 🗆 Yes 🔻 🛭 N			
	T	Same as C Above	L Company	filiates included? Yes N			
<u>+</u>		tempt status.     501(c) ( 3 )    (insert no.)		ttach a list. (see instructions)			
J		ite: ► www.morrisedfoundation.org	H(c) Group exemp				
<u>K</u>			tion: \1992, M	State of legal domicile: NJ			
Р	art I	· · · · · · · · · · · · · · · · · · ·		San bed			
	1	Briefly describe the organization's mission or most significant activities: [2].		7,91			
	}	STMT 1 - 10	FEB 2 2	2010 1:1			
Governance	1		-	2010 1:1			
Ē			700	$-\int x  dx$			
ē	2	Check this box ▶ ☐ If the organization discontinued its operations or disposed of more than	LAW MEAN				
ŝ	1	——————————————————————————————————————	E ZON GERGE	23 21			
<b>∞</b>	3	Number of voting members of the governing body (Part VI, line 1a).	.: · · · · · · · · · · · · · · · · · · ·	4			
Activities &	4	Number of independent voting members of the governing body (Part VI, line 1	(O)	5 0			
Ã	1	Total number of employees (Part V, line 2a)	· · }				
¥	1	Total number of volunteers (estimate if necessary)		6 50			
		Total gross unrelated business revenue from Part VIII, line 12, column (C).	· · · · }	7a 0			
	b	Net unrelated business taxable income from Form 990-T, line 34	<del>,</del>	7b 0			
	1		Prior Year	Current Year			
	8	Contributions and grants (Part Viii, line 1h)	137,	,915 125,95 <u>6</u>			
Revenue	9	Program service revenue (Part VIII, line 2g)					
8	1	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	23,	,876 <u>15,236</u>			
Œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		55 (13,088)			
		Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	161,	,846 128,104			
	<del></del>		115,				
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)					
22		Benefits paid to or for members (Part IX, column (A), line 4)		<del></del>			
Expenses		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)					
8	i	Professional fundraising fees (Part IX, column (A), line 11e)	a constituent and a second				
ű	t	Total full and any expenses ( at by, column (c), into 20, -					
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		,155 29,200			
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	137,				
	19	Revenue less expenses. Subtract line 18 from line 12		,540 (103,038)			
5 8			Beginning of Yea	aar End of Year			
Seets Jalon	20	Total assets (Part X, line 16)	667,	,698 564,660			
₹ <u>0</u>	1	Total liabilities (Part X, line 26)	_				
25		Net assets or fund balances. Subtract line 21 from line 20	667,	698 564,660			
Pa	rt II	Signature Block					
		Under penalties of pedury I declare that I have examined this return, including accompanying sched	tules and statements,	and to the best of my knowledge			
		and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based or	all information of wh	hich preparer has any knowledge			
e:-		1. X N. And harton tong	11 -	2-15-15			
Sig		Signature of officer	Date				
He	re		Fraid &	of Tristeen a			
			Zxuia	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
		Type or print name and little	heck if Pren				
		Preparer's	off-	parer's identifying number instructions)			
Paid		signature //ri/pain er	mployed > 4	0-48-4961			
_	arer's	(1010)		10 10 150			
•		Firm's name (or yours)	EIN >				
use	Use Only of self-employed), address, and ZIP + 4 Michael F. Albanese, CPA Phone no ▶ (30) 1 1906-5733						
Ma	the	IRS discuss this return with the preparat shown above? (see instructions) .		. Yes No			
_		10 2.02 004.1	C-1 N- **CCC**	200			
For	Priva	by Act and Paperwork Reports of Sales of Sales of the Papers of 705 of thoms.	Cat. No. 11282Y	Form 33U (2008			

24

11.

Form	990 (2008)	Page 2
Par	rt III Statement of Program Service Accomplishments (see instructions)	
1	Briefly describe the organization's mission STMT 1	
2	·	☐ Yes ☑ No
	If "Yes," describe these new services on Schedule O	
3		☐ Yes 🗹 No
	If "Yes," describe these changes on Schedule O	
4	Describe the exempt purpose achievements for each of the organization's three largest program services by Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount allocations to others, the total expenses, and revenue, if any, for each program service reported	
4a	(Code ) (Expenses \$ 7,294 including grants of \$ 201,942 ) (Revenue \$ See STMT 15	128,104 )
	Expenses incurred in support of the educational purposes, programs and services of the Morris Schoo which provides excellent and innovative programs in academics, athletics and the arts to all individuals Morris School District in a non-discriminatory manner regardless of ability to pay.	in the
4b	(Code) (Expenses \$including grants of \$) (Revenue \$	
4c	(Code. ) (Expenses \$ including grants of \$ ) (Revenue \$	<u> </u>
	The state of the s	
	***************************************	
	***************************************	
		**********
4d	Other program services (Describe in Schedule O) (Expenses \$ including grants of \$ ) (Revenue \$ )	·
4e	Total program service expenses ► \$ 209,236 (Must equal Part IX. Line 25, column (B))	

Par	t IV Checklist of Required Schedules	<del></del>		
	r		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	1	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		✓_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		1
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	1	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes" complete Schedule D, Part II	7		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		<b>√</b> _
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		
10 11	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VIII, IX, or X as applicable	10	<b>√</b>	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12		<b>✓</b>
13 14a	Is the organization a school described in section 170(b)(1)(A)(1)? If "Yes," complete Schedule E	13 14a		<b>√</b>
b	busitiess, and program service activities outside the O.S. II res, complete schedule 1, 1 arc.	14b		✓_
15	Did the organization report on Part IX, column (A), line 3. more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		✓
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F. Part III	16 17		1
17	Did the organization report more than \$15,000 on Part IX, column (A). line 11e? If 'Yes " complete Schedule G, Part I	18		<u> </u>
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	19	<u> </u>	1
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G. Part III	20		7
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	21	1	<u> </u>
21 22	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions			,
	24b-24d and complete Schedule K. If "No," go to question 25	24a		1
þ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?.	24b		1
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		1
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		- <u>v</u>
	The design of the second secon	25a		1
b	person with a prior year; if res, complete coneduce 2, rater.	25b		1
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		1

Pa	t IV Checklist of Required Schedules (continued)			
			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII. Section A)? If "Yes," complete Schedule L, Part IV	28a		✓
þ	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		✓
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		✓
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N. Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes." complete Schedule R. Parts II, III, IV, and V. line 1	34		✓
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V. line 2	35		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R. Part V, line 2	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37		✓
			000	

Form **990** (2008)

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable	1		
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable . Ltb 0		į	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	✓	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			}
	Statements, filed for the calendar year ending with or within the year covered by this return	2b		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	ı		
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
	this return?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		<del> </del>
4a	At any time during the calendar year, did the organization have an interest in or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		<b>✓</b>
b	If "Yes," enter the name of the foreign country. ▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		4
C	If "Yes," to question 5a or 5b did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity	5c		-
8-	Regarding Prohibited Tax Shelter Transaction?  Did the organization solicit any contributions that were not tax deductible?	6a		1
	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
v	gifts were not tax deductible?	6b		ļ
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than	7a		1
_	\$75?	7b		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
·	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year		}	
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal		}	,
	benefit contract?	7e	<u> </u>	1
	Did the organization during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f 7g	1	<u> </u>
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			<del>                                     </del>
n	For contributions of cars, boats airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	1	
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section			
0	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring		]	
	organization, have excess business holdings at any time during the year?	8	<u> </u>	1
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	0-		
a	Did the organization make any taxable distributions under section 4966?	9a_ 9b	-	1
	Did the organization make a distribution to a donor, donor advisor, or related person?	-55	<del> </del> -	<del>                                     </del>
10 a	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Pan VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12 for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders .	}		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	<u> </u>	<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.   12b			

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	tion A. Governing Body and Management			
	· ·		Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the			
	circumstances, processes, or changes in Schedule O See instructions	1		
1a	Enter the number of voting members of the governing body 1a 21	1		
b	Enter the number of voting members that are independent	į		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	- 1		
	any other officer, director, trustee, or key employee?	2		∡.
3	Did the organization delegate control over management duties customarily performed by or under the direct			
-	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		✓
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		. ✓
5	Did the organization become aware during the year of a material diversion of the organization's assets?	_5_		
6	Does the organization have members or stockholders?	6		✓_
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a		✓_
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
Ū	the year by the following.			
а	The governing body?	8a	✓	
b	Each committee with authority to act on behalf of the governing body?	8b	✓	
	Does the organization have local chapters, branches or affiliates?	9a		1
	If "Yes." does the organization have written policies and procedures governing the activities of such chapters,	1		
b	affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations	امدا	,	
	must describe in Schedule O the process, if any the organization uses to review the Form 990	10	✓	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		
Sec	tion B. Policies			
		40-	Yes	No
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	~	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	400		
	rise to conflicts?	12b	<b>✓</b>	-
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	4.0	,	
	describe in Schedule O how this is done	12c	<b>√</b>	
13	Does the organization have a written whistleblower policy?	13		· ·
14	Does the organization have a written document retention and destruction policy?	14		<b>✓</b>
15	Did the process for determining compensation of the following persons include a review and approval by	ĺ		
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a		
b	Other officers or key employees of the organization?	15b		<b>_</b>
	Describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	1		
	with a taxable entity during the year?	16a	ļ	1
ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	į		
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard		1	1
	the organization's exempt status with respect to such arrangements? .	16b	<u> </u>	<u> </u>
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶New Jersey			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(or	c)(3)s	only)	
	available for public inspection, Indicate how you make these available. Check all that apply			
	☐ Own website ☐ Another's website ☑ Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	of int	erest	
	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and reco	rds o	f the	
	organization ► Patricia Haralampoudis 18 Arrowhead Rd. Morris township, NJ 07960 (973) 631-1415			<b>-</b> -

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- List all of the organization's current officers, directors trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100 000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order, individual trustees or directors, institutional trustees officers, key employees highest compensated employees; and former such persons

Check this box if the organization did not co	mpensate	any c	offic	er.	dire	ctor,	trus	tee, or key em	ployee.	
(A)	(B)			(0	2)			(D)	(E)	(F)
Name and Title	Average	Positi	on (c		k all	tnat ap		Reportable	Reportable compensation	Estimated amount of
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key emplavee	Highest compensated employee	Former	compensation from the organization (W-2/1099-M/SC)	compensation from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
Fran Rossoff Chairperson - Trustee	3							0	0	0
Katherine Henkler Vice-Chairperson - Trustree	3							0	0	0
			-							· · · · · · · · · · · · · · · · · · ·
Canadan Taraba	3	į						0	0	0
Patricia Haralampoudis		<del> </del> -	-	-	-		Ì			
Treasurer - Trustee	3						ļ	0	0	0
Caral Alican		ļ	$\vdash$			<del>                                     </del>				
Treaurer Emeritus - Trustee	3	İ		i		ĺ		0	0	0
Vicki Craig				$\vdash$					_	
Trustee	3	Ì	1	1				0	0	0
Vincent Morreale			İ							
Trustee	3							0	0	0
Deboray Sontupe	3							0	0	0
Trustee		ļ	<u> </u>	ļ	_	ļ	<u> </u>			
Charles P. Frost	3			1				0	0	0
Trustee	<u> </u>	-	<u> </u> -	}	ļ	<del> </del>	<del> </del> -			
Kathy Heher Trustee	3							0	0	0
Len Muscarella		†	Ī	T			1			_
Trustee	3	<u> </u>	 				]	0	0	0
Marcie Yarnis	3		ļ			1	}	0	0	0
Trustee		i							<u> </u>	<u> </u>
MaryEllen Meslar Fultz	3							0	o	0
Trustee		<u> </u>	_	1	ļ	ļ				
Paul Hughes	3	į						0	0	0
Trustee	<u> </u>	ļ	-	<del> </del>	<del> </del>		┼	ļ	ļ	
Dave Perry	3	!				ĺ		0	0	0
Trustee	<del> </del> -	<del> </del>	┼	┼	┼	├	+-	<del> </del>		
Mark George	3				1			0	0	0
Trustee Sharen Lagari	<del> </del>	<del> </del>	-	$\vdash$	┼	-	+-	<del> </del>		
Sharon Laconi	3							0	0	0
Trustee	L	1			<u> </u>		1	<u> </u>	<u> </u>	<u> </u>

Part VII Section A. Officers, Directors, Tru	ıstees, Key	Emp	loy	ees,	an	d Hig	hest	t Compensate	i Employees (co	ntınue	d)	
(A)	(B)			(0	<b>C)</b>			(D)	(E)		(F)	
Name and title	Average hours per week	Positi		Officer	k all Key	that ap	Former	Reportable compensation from	Reportable compensation from related		stimate nount other	
		Individual trustee or girector	Institutional trustee	cer	employee	Highest compensated employee	mer	the organization (W-2/1099-*(ISC)	organizations (W-2/1099-MISC)	org an	ipensa rom th ganizat id relat anizati	e ion ed
Ann Rhines Trustee	3							0	0	1		0
Sandy Gibson	<del></del>	<u> </u>	-			<del> </del>				<del> </del>		
Trustee	3	ĺ						0	0			0
Claire Mackin				1-								
Trustee	3					1		0	0	{		0
Philip Sibona Trustee	3							0	0			0
		<del> </del> -	1	1-	!	<del>                                     </del>				1		
	:	1										
		<del> </del>	1	<del>                                     </del>			1-			<b>†</b>		
		}								]		
		1										
		<del> </del>	<u> </u>		_							
		<u> </u>	-		-	<del> </del>	$\vdash$			<del> </del>		
				<u> </u>						<u> </u>		
·		•	1				1					
-		ļ				<del> </del> -		<b></b>		┼		
		]										
1b Total	L	1	<u> </u>	J	i	1	J			+-		
Total number of individuals (including thos organization	e ın 1a) wh	no rec	eive	ed r	nor	e thar	1 \$1	00.000 in repo	rtable compens	sation	from	the
								······································			Yes	No
3 Did the organization list any former office employee on line 1a? If "Yes," complete S							oye	e, or highest o	compensated	3		1
4 For any individual listed on line 1a, is the s							· ·	d other compo	neation from		<del>                                     </del>	
the organization and related organizations										4		1
5 Did any person listed on line 1a receive services rendered to the organization? If "									anization for	5		Ι.
Section B. Independent Contractors	, co, comp	nete .	00//		70 C	, 101 3	,401	, person ,	<del></del>	1 3	L	1
Complete this table for your five highest or compensation from the organization	ompensate	d ind	epe	ende	ent e	contra	acto	rs that receive	d more than \$1	00,00	0 of	
(A)							Γ	(B)			>)	
Name and business address Description of services Comp							compe	= ISALO	11			
N/A					<del></del>		-					
							+-					
							I					
2 Total number of independent contractors		those	III	1) v	/ho	recei	ved	more than \$1	00,000 in			
compensation from the organization ► 0						<del></del>			<del></del>			

	<del>.</del> .			<del></del>				
Par	- VIII	Statement of Re	venue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513 or 514
Contributions, gifts, grants and other similar amounts	b d	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contri	1a	45,521				
Contributic and other	g	All other contributions, gifts, g and similar amounts not inclu Noncash contributions include <b>Total.</b> Add lines 1a–1f	ded above 1f	63,382 17,053	125,956			
Program Service Revenue	2a b c d			Business Code				
Progran	f g	All other program servi Total. Add lines 2a–2f		•				
	3 4 5	Investment income (inc other similar amounts) Income from investment of Royalties			19,346			19,346
	b	Gross Rents Less, rental expenses Rental income or (loss) Net rental income or (ic			,			
		Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses	(i) Securities (4,110)	tii) Other				
		Gain or (loss)  Net yain or (loss)	(4,110)	. •	(4,110)			(4,110)
Other Revenue		Gross income from events (not including \$ of contributions reported See Part IV, line 18	d on line 1c) · a	15,202				
Othe		Less: direct expenses Net income or (loss) fro	om fundraising e	15,202 events . ▶	0	STMT 11	STMT 12	
		Gross income from gam See Part IV, line 19	а	0				
		Less: direct expenses. Net income or (loss) from		ities , •	0			
	ь	Gross sales of inverteurns and allowances Less: cost of goods so Net income or (loss) from	a ld <b>b</b> n sales of invent	ory 🕨				
	112	Miscellaneous Revi		Business Code 900099	(13,088)			(13,088)
	b							
	1	All other revenue .			(13,088)			
	,	Total. Add lines 11a-1 Total Revenue. Add lin 9c, 10c. and 11e	nes 1h, 2g, 3, 4,	<b>&gt;</b> , 5, 6d, 7d, 8c, <b>&gt;</b>	128,104			2,148

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).									
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses					
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	201,392	201,392							
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22.	550	550							
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16									
5	Compensation of current officers, directors, trustees, and key employees .									
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)									
7	Other salaries and wages .									
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)									
9	Other employee benefits .									
10	Payroll taxes									
11	Fees for services (non-employees):		-	ł						
а	Management									
b	Legal									
	Accounting	5,500		5,500						
d	Lobbying									
	Professional fundraising services. See Part IV, line 17									
f	Investment management fees									
g	Other									
12	Advertising and promotion .									
13	Office expenses									
14	Information technology .		}							
15	Royalties									
16	Occupancy									
	· · ·									
17	Travel									
18	Payments of travel or entertainment expenses for any federal, state, or local public officials									
19	Conferences, conventions, and meetings	1,855		1,855						
20	Interest				<u> </u>					
21	Payments to affiliates									
22	Depreciation, depletion, and amortization.									
23	Insurance	3,766	}	3,766						
24	Other expenses Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)									
а	STMT 14	18,079	7,294	10,785						
b										
C				I						
_										
d										
e		49.070	7 204	10 705						
o f	All other expenses	18,079	7,294	10,785,						
<u>25</u>	Total functional expenses. Add lines 1 through 24f	231,142	209,236	21,906						
26	Joint Costs. Check here ► ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and									
	fundraising solicitation	0	0	0	o					

Pa	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	424,944	1	
	2	Savings and temporary cash investments	238,522		
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L.		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
ş	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
A	9	Prepaid expenses and deferred charges		9	- <del></del>
	10a	Land. buildings, and equipment: cost basis 10a			
	b	Less accumulated depreciation Complete Part VI of Schedule D		10c	
	11	Investments—publicly traded securities	242,754	11	241,138
	12	Investments—other securities. See Part IV, line 11	STMT 16	12	85,000
	13	Investments—program-related See Part IV. line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34) .	667,698		564,660
į	17	Accounts payable and accrued expenses .		17	
	18	Grants payable ,	<del></del>	18	
Liabilities	19	Deferred revenue		19 20	
	20	Tax-exempt bond liabilities		21	
	21 22	Escrow account liability. Complete Part IV of Schedule D  Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	ar a mada manaka manana ya yayan da ma
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable		24	
	25	Other liabilities Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0	26	0
Fund Balances		Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.			
lan	27	Unrestricted net assets	58,286		53,211
Ba	28	Temporarily restricted net assets	609,412	28	511,449
P.	29	Permanently restricted net assets		29	
or Fu		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds	···	30	
Net Assets	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
A	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ne	33	Total net assets or fund balances	667,698	33	564,660
	34	Total liabilities and net assets/fund balances	667,698	34	564,660
Ŀε	rt XI	Financial Statements and Reporting	·····		
b	Were Were	counting method used to prepare the Form 990	ependent accountan ountant? responsibility for over	sight of	2a
За	As a	result of a federal award, was the organization required to undergo an single Audit Act and OMB Circular A-133?	·		
b	If "Y	es," did the organization undergo the required audit or audits?			3b

#### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

## **Public Charity Status and Public Support**

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt chantable trusts.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization Employer identification number Morris Educational Foundation, Incorporated 22 3205909 Reason for Public Charity Status (All organizations must complete this part.) (see instructions) The organization is not a private foundation because it is (Please check only one organization) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H) A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33% % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 33% % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2), (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4), (see instructions) 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a 🗌 Type I c Type III-Functionally integrated b 🔲 Type II e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type II, or Type III supporting organization, check this box . . Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) 11g(i) and (iii) below, the governing body of the supported organization? 11g(n) (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(m) Provide the following information about the organizations the organization supports. (i) Name of supported (iii) Type of organization (iv) is the organization (v) Did you notify (vi) is the (vii) Amount of in col (i) listed in your organization in col organization the organization in (i) organized in the above or IRC section governing document? col (i) of your support? (see instructions)) No Yes No Yes Yes

Total

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 Calendar year (or fiscal year beginning in) (f) Total Gifts, grants, contributions, and membership fees received. (Do not 66,643 195,014 150,735 124,123 773,037 236,522 include any "unusual grants") Tax revenues levied for the organization's benefit and either paid to or expended on its hehalf The value of services or facilities furnished by a governmental unit to the organization without charge 236,522 66,643 195,014 150,735 124,123 773,037 Total. Add lines 1-3 . . The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount 2,385 shown on line 11, column (f) Public support. Subtract line 5 from line 4 770,652 Section B. Total Support (c) 2006 (a) 2004 (b) 2005 (d) 2007 (e) 2008 Calendar year (or fiscal year beginning in) > (f) Total 236,522 66,643 195,014 150,735 124,123 773,037 Amounts from line 4 Gross income from interest, dividends, payments received on secunties loans, rents, royalties and income from similar 9,953 21,196 16,398 23,804 19,346 90,697 Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets 17,035 17,035 (Explain in Part IV) 880,769 Total support. Add lines 7 through 10 . 12 0 12 Gross receipts from related activities etc. (see instructions) First five years. If the Form 990 is for the organization's first, second, third fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 87.4976 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 14 90.7650 % 15 15 Public support percentage from 2007 Schedule A. Part IV-A. line 26f 16a 33%% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33%% or more, check this box and stop here. The organization qualifies as a publicly supported organization  $\mathbf{Z}$ . . 331/3 % support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization. 17a 10%-facts-and-circumstances test-2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the ▶ □ organization meets the "facts and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test-2007, if the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions 🕨 🗌

	Support Schedule for Organ (Complete only if you checke				)(2) 			···-
	tion A. Public Support	(-) 0004	(F) 000E	(-) 200e	(d) 2007	101	2000	(f) Total
Ca 1	llendar year (or fiscal year beginning in)  Gifts, grants, contributions, and membership fees received (Do not include	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e)	2008	(i) rotai
2	any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.							
3	Gross receipts from activities that are not an unrelated made or business under section 513							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf			N/A				
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6	Total. Add lines 1-5			ļ				
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .							
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5.000							
¢	Add lines 7a and 7b	·				<u> </u>		
8	Public support (Subtract line 7c from line 6)							
	tion B. Total Support							
Ca	elendar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
9 10a	Amounts from line 6 Gross income from interest dividends, payments received on securities loans, rents, royalties and income from similar sources							
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975			N/A				
с 11	Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	:				ļ 		
13	Total support. (Add lines 9, 10c, 11, and 12.)					<u> </u>		
14	First five years. If the Form 990 is for torganization, check this box and stop	here		ind, third, fourth	n, or fifth tax y	ear as	a section	on 501(c)(3) 
Sec	tion C. Computation of Public Su							
15 16	Public support percentage for 2008 (lin Public support percentage from 2007 S	Schedule A P	art IV-A, line 2		(f)) . 	15 16		<u>%</u> %
Sec	tion D. Computation of Investmer	it Income P	ercentage				·	
17	Investment income percentage for 2008	3 (line 10c, co	lumn (f) divide	ed by line 13, co	olumn (f)) .	17		<u>%</u>
18	Investment income percentage from 20	07 Schedule	A, Part IV-A, I	ne 27h		18		<u>%</u>
19a	331/3 % support tests—2008. If the orga 17 is not more than 331/3 %, check this b	anization did r	ot check the b	oox on line 14, a	and line 15 is i s as a publicly	more th suppo	nan 33/3 rted org	%, and line anization ► □
b	33\% % support tests - 2007. If the organ line 18 is not more than 33\% %, check this	ization did not	check a box o	n line 14 or line	19a, and line	16 is m	ore than	331/3 %, and
20	Private foundation. If the organization							

Part IV	Page 4  Supplemental Information. Complete this part to provide the explanation required by Part II, line 10;  Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)
Unusual	Grant
500 share	es of Amerisource Bergen Corp. common stock va.ued at \$17,035, were contributed on 12/1/2008.
	· · · · · · · · · · · · · · · · · · ·
	······································
- ^ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	
	·····
· · · · · · · · · · · · · · · · ·	
	***************************************

#### SCHEDULE D (Form 990)

# **Supplemental Financial Statements**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Inspection Employer identification number

Mor	ris Educational Foundation, Incorporated		22 3205909			
Pa		nor Advised Funds or Other Similar	Funds or Accounts. Complete if			
	the organization answered "Yes					
		(a) Donor adv sed funds	(b) Funds and other accounts			
1	Total number at end of year .	3	1			
2	Aggregate contributions to (during year)	18,557	0			
3	Aggregate grants from (during year)	15,481	0			
4	Aggregate value at end of year .	210,984	72,722			
5	Did the organization inform all donors and funds are the organization's property, subj	donor advisors in writing that the assets ect to the organization's exclusive legal c	held in donor advised ontrol? , ,			
6	Did the organization inform all grantees, dused only for charitable purposes and not impermissible private benefit?	for the benefit of the donor or donor adv	sor or other			
Pat	t II Conservation Easements. Com	olete if the organization answered "Yes"	' to Form 990, Part IV, line 7.			
1 2	Purpose(s) of conservation easements held Preservation of land for public use (e.g. Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held on the last day of the tax year	, recreation or pleasure)	on of an historically important land area ion of certified historic structure			
			Held at the End of the Year			
_	Total number of conservation easements ,		2a			
a			2b			
b	Total acreage restricted by conservation e		2c			
C	Number of conservation easements on a c	• •	2d			
ď	Number of conservation easements includ		· · · · · · · · · · · · · · · · · · ·			
3	Number of conservation easements modified the taxable year ▶	ed, transferred, released, extinguished, or	terminated by the organization during			
4	Number of states where property subject to conservation easement is located ▶					
5	Does the organization have a written polic enforcement of the conservation easemen		ction, violations, and . Yes No			
6	Staff or volunteer hours devoted to monitor					
7	Amount of expenses incurred in monitoring	g, inspecting, and enforcing easements d	uring the year > \$			
8	Does each conservation easement reporte 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	d on line 2(d) above satisfy the requirement	nts of section Yes No			
9	In Part XIV. describe how the organization balance sheet, and include, if applicable, the organization's accounting for conserve	he text of the footnote to the organization tion easements	n's financial statements that describes			
Par		ections of Art, Historical Treasures, overed "Yes" to Form 990, Part IV, line 8				
1a	If the organization elected, as permitted unart, historical treasures, or other similar ass provide, in Part XIV, the text of the footnot	ets held for public exhibition, education, or	research in furtherance of public service			
b	If the organization elected, as permitted un historical treasures, or other similar assets provide the following amounts relating to	held for public exhibition education, or these items.	esearch in furtherance of public service			
	(i) Revenues included in Form 990, Part \	/III line 1	<b>&gt;</b> \$			
	(ii) Assets included in Form 990, Part X		<b>▶</b> \$			
2	If the organization received or held works following amounts required to be reported					
а	Revenues included in Form 990, Part VIII,	line 1	. ▶ \$			
b	Assets included in Form 990, Part X		• \$			

_	$\sim$

•	Schedule D (Form 990) 2008

Sched	dule D (Form 990) 2008								ge <b>2</b>
Par	t III Organizations Maintaini	ng Collections	of Art, Hi	storica	ıl Treasures,	or O	ther Similar A	ssets (continue	ed)
3	Using the organization's accession items (check all that apply):	and other record	s, check a	any of th	he following ti	hat ar	e a significant i	use of its collec	tion
а	Public exhibition		d		oan or exchai	nge p	rograms		
b	Scholarly research		e		Other				
C	Preservation for future general	ions							
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.								
5	During the year, did the organization sassets to be sold to raise funds rathe	r than to be maint	ained as pa	art of th	e organization'	s coll	ection?	Yes	No
Par	Trust, Escrow and Custo Part IV, line 9, or reported					n ans	wered "Yes" to	Form 990,	
1a	Is the organization an agent, trustee		her interm	ediary	for contributio	ns or	other assets n		
	included on Form 990, Part X? .							L Yes L	No
b	If "Yes," explain the arrangement in	Part XIV and cor	nplete the	follow	ng table:	Γ	· · · · · · · · · · · · · · · · · · ·		
	_					10		Arnount	
C	Beginning balance .				•	1c	<del> </del>		
đ	• •			•		1d	1		
е	Distributions during the year		•	٠	•	1e	<del> </del>	<del></del>	
f	Ending balance			040		1f	<u> </u>		
2a	Did the organization include an ame If "Yes," explain the arrangement in	ount on Form 990 Deat XIV	, Part X, I	ine 21?		•	• •	L_  Yes L_	No
	rt V Endowment Funds. Co		zation an	swered	d "Yes" to Fo	orm 9	990. Part IV. II	ne 10.	
	Lindownion Condo. Co	(a) Current year	(b) Prio					k (e) Four years b	ack
4.0	Casimpian of war holongs	61,427	<u> </u>		1				
1a	Beginning of year balance Contributions	0			<u> </u>				
b	Investment earnings or losses .	0					<del> </del>		
d	Grants or scholarships	1,250					<del></del>		
e	Other expenditures for facilities and programs	Ū							
	Administrative expenses	0	<del>                                     </del>						
g	End of year balance	60,177							
2	Provide the estimated percentage of			l as					
a	Board designated or quasi-endowm		%						
þ	Permanent endowment ▶0								
C	Term endowment ▶9						4		
Зa	Are there endowment funds not in the	e possession of the	ne organiza	ation th	at are neio an	a aam	inistered for the	Yes	No
	organization by:  (i) unrelated organizations							3a(i) ✓	
	(ii) related organizations	-	•	•			•	3a(ii)	1
b	If "Yes" to 3a(ii), are the related org	anizations listed :	as required	d on Sc	hedule R?			3b	
4	Describe in Part XIV the intended u					•		<u> </u>	
Pai	t.VI Investments—Land, Bu	ildings, and Ed	uipment	. See F	orm 990, Pa	art X,	line 10.		
	Description of investment	(a) Cost or o			ost or other rs (other)	(c)	Depreciation	(d) Book value	
1a	Land .								
b	Buildings								
c	Leasehold improvements								
d	Equipment								
e	Other								
Tota	II. Add lines 1a-1e (Column (d) should e	equal Form 990, Pa	art X, colun	nn (B), li	ne 10(c) )		. •		

_	,
Page	٠.

Part VII Investments - Other Securitie	s. See Form 990, Part X,	line 12.	
(a) Description of security or category (including name of security)	(b) Book value	<b>(c)</b> Method of value Cost or end-of-year ma	ation rket value
Financial derivatives and other financial products.			
Closely-held equity interests .			
Other Certificates Of Deposit	85,000	Cost	
	-		
Total. (Column (b) should equal Form 990. Part X, col. (B) line 12.)	95.000		
Part VIII Investments—Program Relate	85,000 ed. See Form 990. Part X	line 13	· · · · · · · · · · · · · · · · · · ·
(a) Description of investment type	(b) Book value	(c) Method of valu	ation
in beautiful of modules type	(0) 5001 1330	Cost or end-of-year ma	
			· · · · · · · · · · · · · · · · · · ·
	<u> </u>		
	<del></del>		
			· · · · · · · · · · · · · · · · · · ·
Total. (Column (b) should equal Form 990, Part X, col. (b) line 13.)		<u></u>	
Part IX Other Assets. See Form 990, Part IX			(b) Book value
	(a) Description		(b) Book value
			ļ
		·	
Total. (Column (b) should equal Form 990, Part X, c	ol. (B) line 15 ) .		
Part X Other Liabilities. See Form 990			
(a) Description of liab lity	(b) Amount		
ederal income taxes			
		7	
	<u> </u>		
		_	
Fotal. (Column (b) should equal Form 990, Part X, col. (B) line 25.) 🕨	1		

_	4
Page	4

The state of the s		
Reconciliation of Change in Net Assets from Form 990 to Financial Statement	<u>s</u>	· · · · · · · · · · · · · · · · · · ·
Total revenue (Form 990, Part VIII, column (A), line 12)	1	128,104
Total expenses (Form 990. Part IX, column (A), line 25)	$\overline{}$	231,142
Excess or (deficit) for the year Subtract line 2 from line 1		(103,038)
Net unrealized gains (losses) on investments		
Donated services and use of facilities		
Investment expenses		<u> </u>
Prior penod adjustments		
Other (Describe in Part XIV)		ļ <u>.</u>
Total adjustments (net). Add lines 4–8		(400,000)
		(103,038)
	; pe	143,306
, , , , , , , , , , , , , , , , , , , ,		143,300
1 - 1	1	
The directized gains on myestments	-	
Dorlated Services and use of facilities		
necoveries of prior year grants		
Office (Describe III are Arry)	┥.	45 200
· · · · · · · · · · · · · · · · · · ·	26	
!	3	3 128,104
investment expenses not included on Form 550, Fart VIII, line 75	4	
Other (Describe fire art XIV)		
	40	
	5	120,10
Reconciliation of Expenses per Audited Financial Statements With Expense	ies j	
Total expenses and losses per audited financial statements , , , ,	1	1 246,344
Amounts included on line 1 but not on Form 990. Part IX, line 25		
Donated Services and use of radiaties	4	ļ
Prior year aujustinents	4	
Losses reported on Form 550 Fair IX, line 25 .		
Other (Describe in Part XIV)	2	
Add lines 2a through 2d	2	2e 15,20
Subtract line 2e from line 1	3	3 231,14
Amounts included on Form 990, Part IX, line 25, but not on line 1:	-	
Investment expenses not included on Form 990, Part VIII, line 7b . 4a	_	
Other (Describe in Part XIV)	_	
	4	lc
	5	5 231 14
t XIV Supplemental Information		
plete this part to provide the descriptions required for Part II. lines 3, 5, and 9, Part III, lines 1a a 2b; Part V, line 4, Part X, Part XI, line 8, Part XII lines 2d and 4b, and Part XIII lines 2d and 4b	nd 4;	l; Part IV, lines 1b
nn T. Cunningham Scholarship - \$1,250 is awarded each year to a Morris High School senior	for th	their freshman year
d is paid directly to the college or university.		
ul S. Swanger Fellowship - an award is made as a stipend to a Morris High School teacher wi	th le	ess than 10 years of
vice to develop their teaching skills.		
		••
	Total revenue (Form 990, Part VIII, column (A), line 12) Total expenses (Form 990, Part IX, column (A), line 25) Excess or (cleficit) for the year Subtract line 2 from line 1 Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior penod adjustments Other (Describe in Part XIV) Total adjustments (net), Add lines 4–8 Excess or (deficit) for the year per financial statements. Combine lines 3 and 9  XII Reconciliation of Revenue per Audited Financial Statements With Revenue Total revenue, gains, and other support per audited financial statements. Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains on investments Donated services and use of facilities. Recoveries of prior year grants Other (Describe in Part XIV) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIV) Add lines 4a and 4b Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)  XXII Reconciliation of Expenses per Audited Financial Statements With Expense Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities Prior year adjustments Losses reported on Form 990, Part IX, line 25 Donated services and use of facilities Prior year adjustments Losses reported on Form 990, Part IX, line 25 Other (Describe in Part XIV) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIV) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part II, lines 18, 4a  Zib Part IV, line 4, Part X, Part XI, line 8, Part XII lines 2d and 4b, and Part XIII lines 2d and 4b Total expenses. Add lines 3 and 4c. (This should eac	Total revenue (Form 990, Part VIII, column (A), line 12)  Total expenses (Form 990, Part IX, column (A), line 25)  Excess or (deficit) for the year Subtract line 2 from line 1  3. Net unrealized gains (losses) on investments  4. Donated services and use of facilities Investment expenses  5. Fror period adjustments  Other (Describe in Part XIV)  Total adjustments (net). Add lines 4–8.  Excess or (deficit) for the year per financial statements Combine lines 3 and 9  Total adjustments (net). Add lines 4–8.  Excess or (deficit) for the year per financial statements Combine lines 3 and 9  Total revenue, gains, and other support per audited Financial Statements With Revenue per Total revenue, gains, and other support per audited financial statements  Amounts included on line 1 but not on Form 990, Part VIII, line 12  Net unrealized gains on investments  Donated services and use of facilities  Pecovenes of pnor year grants  Donated services and use of facilities  Recoveries of pnor year grants  Donated services and use of facilities  Pror year adjustment included on Form 990, Part VIII, line 12, but not on line 1 linvestment expenses not included on Form 990, Part VIII, line 12  EXIII Reconciliation of Expenses per Audited Financial Statements With Expenses  Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25  Donated services and use of facilities  Pror year adjustments  Losses reported on Form 990, Part IX, line 25  Other (Describe in Part XIV)  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1:  Investment expenses not included on Form 990, Part IX, line 25  Other (Describe in Part XIV)  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1:  Investment expenses not included on Form 990, Part IX, line 3, 5, and 9, Part III, lines 1a and 4 lines 4 and 4b  Total expenses. Add lines 3 and 4c. (This should equal

Page \$ Part XIV Supplemental Information (continued)						
ed)	rt XIV Supplemental Information (continu	Part XIV				
	,					
	······································					
		-*				

#### SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Supplemental Information Regarding Fundraising or Gaming Activities

Attach to Form 990 or Form 990-EZ Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a

OMB No 1545-0047
2008

Open To Public Inspection

Employer identification numb Name of the organization 3205909 Morris Educational Foundation, Incorporated 22 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17 Part I Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations e Solicitation of non-government grants а f Solicitation of government grants h Email solicitations g 🗹 Special fundraising events Phone solicitations C In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees b if "Yes." list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization Form 990-EZ filers are not required to complete this table. (vi) Amount paid to (or retained by) organization (v) Amount paid to (or retained by) fundraiser listed in (i) Name of individual (ii) Activity (iii) Did fundraiser have custody or control of (iv) Gross receipts or entity (fundraiser) from activity contributions? col (i) Yes No N/A Total 3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing Registered In New Jersey

		more than \$15,000 on F	· · · · · · · · · · · · · · · · · · ·				
			(a) Event #1  M'tn's Got Talent (event type)	(b) Event #2 Team Up For Turf (event type)	(c) Other Events  (total number)	(d) Total Ev (Add col (a) If col (c))	rough
Revanue	1	Gross receipts	31,675	29,048			60,723
Re	2	Less Charitable contributions					
_	3	Gross revenue (line 1 minus line 2)	31,675	29,048			60,723
	4	Cash prizes					
Direct Expenses	5	Non-cash prizes .					
EXD	6	Rent/facility costs					
	7	Other direct expenses .	14,652	550,			15,202
	8	Direct expense summary Ad Net income summary Comb	_	•	<b>.</b>	(	15,202 <sup>)</sup> 45,521
Par	ri III		the organization answ		990, Part IV, line 19,	or reported	
Revenue			(a) Bingo	(b) Puli tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gan col (a) throug	ning (Add gn cot <b>(c)</b> )
le Re	1	Gross revenue					N/A
ses	2	Cash prizes .					
Expe	3	Non-cash prizes					<del></del>
Direct Expenses	4	Rent/facility costs					
	5	Other direct expenses .					
	6	Volunteer labor	☐ Yes% ☐ No	☐ Yes% ☐ No	☐ Yes % ☐ No		
	7	Direct expense summary Ad	ld lines 2 through 5 in ci	olumn (d) .		(	)
	8	Net gaming income summar	y Combine lines 1 and	7 in column (d)	<del>.</del>	<u> </u>	
_	En.	tor the state(s) in which the e	vaanization anarataa as	umuna patuutiaa		[	Yes No
9 a	ls	ter the state(s) in which the o the organization licensed to c				1 - 1	
ь	If "	No," Explain					
		ere any of the organization's ( 'Yes." Explain	gaming licenses revoke	d suspended or termin	nated during the tax year	ar? 10a	
				• • • • • • • • • • • • • • • • • • • •			
2	ls t	es the organization operate of the organization a grantor, be med to administer charitable	eneficiary or trustee of a		a partnership or other	entity   11   12	

cher	dule G (Form 990 or 990-EZ) 2008		p	age 3
	300 0 ( 0111 030 01 030 12) 200		Yes	
3	Indicate the percentage of gaming activity operated in			
-	The organization's facility			
	An outside facility			
4	Provide the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name ▶			
	Address ▶			
5a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a		
b	If "Yes,' enter the amount of gaming revenue received by the organization ▶ \$			
c	If "Yes," enter name and address:			
6	Name ▶			
	Name >			
	Gaming manager compensation ▶ \$			
	Description of services provided ►			
	☐ Director/officer ☐ Employee ☐ independent contractor			
7	Mandatory distributions			
	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	17a	<u> </u>	ļ
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$			

# SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

ance to Organizations,	in the U.S.
<b>\$</b>	duals
Assistance	d Individu
_	and
Othe	ernments,
and	ernm
Grants	Gov

▶ Complete if the organization answered "Yes." on Form 990, Part IV, lines 21 or 22. ▶ Attach to Form 990.

OMB No 1545-0047

Open to Publ

Support educationa Schedule I (Form 990) 2008 ŝ (h) Purpose of grant or assistance Form 990, Part IV, line 21, for any recipient that received more than S5,000. Check this box if no one recipient received more than \$5,000. Use Employer identification number 3205909 Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance 22 (f) Method of valuation (book FMV, appraisal, Cat No 50055P Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (e) Amount of non-cash assistance (d) Amount of cash grant 180.798 . Part IV and Schedule I-1 (Form 990) if additional space is needed For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of section 501(c)(3) and government organizations (c) IRC section if applicable the selection criteria used to award the grants or assistance? Part | General Information on Grants and Assistance 501(c)(3) 22-1946483 Morris Educational Foundation, Incorporated (b) Ein Enter total number of other organizations 1 (a) Name and address of organization 31 Hazel Street Morristown. NJ Morris School District or government : Name of the organization

Page 2

Schedule I (Form 990) 2008

(f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States, Complete if the organization answered "Yes" on Form 990, Part IV. line 22. Use Schedule I-1 (Form 990) if additional space is needed. Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance Part IV Part III X X

# SCHEDULE O (Form 990)

# Supplemental Information to Form 990

OMB No 1545-0047
2008
Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service
Name of the organization

Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information

Morris Educational Foundation, Incorporated	22	3205909
Form 990 Part VI Governance, Management and Disclosure Section A Governing Body an	d Mana	gement Line 10
The Board of Trustees compares dollar amounts on the Form 990 and required schedules	to the	adjusted trial balance and
supporting schedules and reviews answers to questions in Form 990 and required schedules	ules for	correctness, after the
completion of an audit of the Foundation's financial statments, on the Cash Basis, by an o	outside	CPA.
Form 990 Part VI Section B Policies Line 12c The Foundation requires all trustees must	disclos	e any interests or
relationships to the Board of Trustees which could give rise to conflicts of interest. This is	s reinfo	rced at monthly meetings.
Form 990 Part VI Section B Policies Line 15 The Board of Trustees, which includes both o	fficers	and non-officers, is not
compensated.		
Form 990 Part VI Secrion C Disclosure Line 19 The Foundation's Form 990, audited finance	ial stat	ements, and governing
documents are available upon request.		
······································		
	<del>-</del> -	,
	••••	
· · · · · · · · · · · · · · · · · · ·		

COMMUNITY BENEFIT STATEMENT FORM 990, PART III, STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

#### BACKGROUND \_=======

THE MORRIS SCHOOL DISTRICT SERVES THE EDUCATIONAL NEEDS OF THE COMMUNITIES OF MORRISTOWN AND MORRIS TOWNSHIP FOR GRADES K-12 AND MORRIS PLAINS FOR GRADES 9-12. IN THE CLASSROOMS AND ON THE PLAYGROUNDS OF THIS EXTRAORDINARY AND EXPANSIVE SCHOOL SYSTEM, OVER 4,700 CHILDREN OF EVERY RACE, ETHNICITY, RELIGION AND ECONOMIC BACKGROUND COME TOGETHER TO LEARN WITH AND FROM EACH OTHER. MULTICULTURAL, HARMONIOUS, AND COMMITTED TO THE BELIEF THAT ALL CHILDREN CAN EXCEL, THE MORRIS SCHOOL DISTRICT STANDS AS A BEACON OF AMERICA AT ITS BEST.

IN SPITE OF ITS SUCCESS, THE MORRIS SCHOOL DISTRICT, LIKE ALL OTHERS IN THE STATE AND ACROSS THE NATION, IS CONFRONTED BY THE EVER-INCREASING CHALLENGE OF FUNDING PUBLIC EDUCATION. ESCALATING COSTS, EXPANDING ENROLLMENT AND DECREASING STATE AID MUST BE OFFSET BY ALTERNATIVE SOURCES OF FUNDING IF THE DISTRICT IS TO MAINTAIN THE EXTRAORDINARY RANGE AND CALIBER OF ACADEMIC, EXTRA-CURRICULAR, ATHLETIC AND SOCIAL OPPORTUNITIES WHICH HAVE BEEN ITS STANDARD.

WHILE COLLEGES AND UNIVERSITIES, PRIVATE, PAROCHIAL AND INDEPENDENT PREP SCHOOLS HAVE LONG RELIED UPON PRIVATE ENDOWMENTS AND CONTRIBUTIONS TO SUSTAIN OR EXPAND PROGRAMS, SCHOOL TAXES HISTORICALLY HAVE BEEN THE ONLY SOURCE OF REVENUE FOR PUBLIC EDUCATION. INDEPENDENT OF THE MORRIS SCHOOL DISTRICT, THE FOUNDATION IS A 501 (C) (3) CORPORATION THAT SEEKS TO ATTRACT PRIVATE RESOURCES TO SUPPORT A VARIETY OF EDUCATIONAL PROGRAMS THAT TAX DOLLARS DO NOT COVER. THROUGH EFFECTIVE SOLICITATION AND DISTRIBUTION OF FUNDS, THE MORRIS EDUCATIONAL FOUNDATION HELPS ENABLE THE DISTRICT TO CONTINUE TO BE THE MODEL OF VISIONARY SOCIAL AND EDUCATIONAL LEADERSHIP IT HAS BEEN SINCE ITS INCEPTION.

#### MISSION ======

IT IS THE MISSION OF THE MORRIS EDUCATIONAL FOUNDATION TO GENERATE AND DISTRIBUTE FINANCIAL AND OTHER RESOURCES TO AND FOR THE MORRIS SCHOOL DISTRICT FOR ENRICHMENT PROGRAMS AND OTHER PROJECTS AIMED AT ENHANCING THE QUALITY OF EDUCATION AND EDUCATIONAL OPPORTUNITIES FOR STUDENTS IN THE DISTRICT.

THE FOUNDATION WILL CARRY OUT ITS MISSION BY FOCUSING SUPPORT IN THE FOLLOWING AREAS:

#### FACILITATE STUDENT DEVELOPMENT

- SUPPORT NEW APPROACHES TO IMPROVING STUDENT ACHIEVEMENT
- PROVIDE FUNDS FOR ENRICHMENT ACTIVITIES
- PROVIDE EQUIPMENT AND FACILITIES NOT FUNDED THROUGH OTHER MEANS

#### ENCOURAGE EXCELLENCE THROUGH CREATIVE TEACHING

- SUPPORT PROFESSIONAL GROWTH OF TEACHERS
- PROVIDE VENTURE CAPITAL FOR CREATIVE IDEAS AND PROGRAMS

#### PROMOTE COMMUNITY/SCHOOL PARTNERSHIPS

- PROMOTE COMMUNITY AWARENESS OF EDUCATIONAL CHALLENGES AND SOLUTION
- DEVELOP ENRICHMENT PROGRAMS TO ADDRESS THE NEEDS OF THE MORRIS SCHOOL DISTRICT AND THE COMMUNITIES IT SERVES
- FOSTER THE DEVELOPMENT OF ALUMNI RELATIONS
- PROVIDE A VEHICLE FOR INDIVIDUALS, BUSINESSES AND ORGANIZATIONS TO SHARE

RESOURCES AND GIFTS WITH THE MORRIS SCHOOL DISTRICT AND ITS STUDENTS

# COMMUNITY BENEFIT ACHIEVEMENTS

#### SCHOLARSHIPS

SCHOLARSHIPS FOR SENIORS ARE AVAILABLE THROUGH THE GUIDANCE DEPARTMENT AT MORRISTOWN HIGH SCHOOL. ALL OF THE AWARDS OFFERED THROUGH THE MORRIS EDUCATIONAL FOUNDATION, LISTED BELOW, ARE FUNDED BY INDIVIDUALS OR OTHER FOUNDATIONS IN HONOR OF THE PERSON FOR WHOM THE SCHOLARSHIP IS NAMED. THERE ARE MANY OTHER SCHOLARSHIPS OFFERED THROUGH LOCAL AND NATIONAL ORGANIZATIONS THAT ARE POSTED AS SOON AS THE APPLICATIONS ARE AVAILABLE.

# DOROTHY F. JOHNSON SCHOLARSHIP

THIS NEW SCHOLARSHIP, CREATED THROUGH A BEQUEST FROM THE ESTATE OF DOROTHY F. JOHNSON, 1947 MHS GRADUATE AND COMMUNITY LEADER, WILL BE

STATEMENT 2

AWARDED TO EACH OF TWO (2) GRADUATING SENIORS FOR TWO YEARS IN THE AMOUNT OF \$1,750 PER STUDENT PER YEAR. THE SELECTED STUDENTS MUST BE TAKING BUSINESS ADMINISTRATION RELATED COURSES NOW AND INTENDING TO PURSUE BUSINESS ADMINISTRATION IN COLLEGE.

#### FRENCH CLUB

TO HONOR RUTH M. COHEN'S PASSION FOR TEACHING FRENCH, HER HUSBAND, MURRAY, ESTABLISHED THIS ANNUAL AWARD AND FUND FOR STUDENTS OF FRENCH LANGUAGE AND LITERATURE. MRS. COHEN TAUGHT AT MHS FOR MORE THAN 30 YEARS.

# JOHN T. CUNNINGHAM SCHOLARSHIP

THIS SCHOLARSHIP WAS ESTABLISHED BY THE MEF THROUGH THE SALE OF THE BOOK "YOUTH'S BRIGHT YEARS: AN AMERICAN HIGH SCHOOL", WRITTEN BY ALUMNUS JOHN T. CUNNINGHAM, CLASS OF '32. THE MHS GRADUATING SENIOR PURSUING A MAJOR IN THE BROAD FIELD OF COMMUNICATIONS AT A FOUR-YEAR COLLEGE, MEETING THE CRITERIA OF GRADE POINT AVERAGE, RELATED EXTRA-CURRICULAR ACTIVITIES, TEACHER RECOMMENDATIONS, AND EXCELLENT WRITING SKILLS WILL BE AWARDED \$1,250.

#### SIMON SCHOLARS

THE WILLIAM E. SIMON FOUNDATION IS RESPONSIBLE FOR AWARDING \$1,250 FOR EACH OF TWO SENIORS (ONE IN 2003) GRADUATING FROM MORRISTOWN HIGH SCHOOL. THE WINNERS ARE SELECTED BY THE MHS GUIDANCE DEPARTMENT AS MODEL CANDIDATES FOR THIS HONOR AND FINANCIAL ASSISTANCE, BASED ON A FINE ACADEMIC RECORD. THIS AWARD IS RENEWED FOR EACH OF FOUR YEARS AT COLLEGE IF THEY MAINTAIN A 3.0 GRADE POINT AVERAGE. THE SCHOLARSHIP WILL NOT BE OFFERED IN 2004, HOWEVER, ALL CURRENT OBLIGATIONS WILL BE HONORED UNTIL THEY GRADUATE.

## SUPERINTENDENT'S ART SCHOLARSHIP

THIS SCHOLARSHIP WAS MADE POSSIBLE BY DR. THOMAS FICARRA, MSD SUPERINTENDENT OF SCHOOLS, WHO HOSTED A CONFERENCE FOR SUPERINTENDENTS AT DREW. THE PROCEEDS OF THE CONFERENCE WERE DONATED TO THE MEF AND USED TO FUND THE SCHOLARSHIP.

#### WONG FAMILY SCHOLARSHIP

ROBERT WONG, MHS CLASS OF 1967, ESTABLISHED THIS SCHOLARSHIP IN MEMORY OF HIS PARENTS. THIS GENEROUS AWARD IS FOR \$4000 PER YEAR FOR UP TO FOUR YEARS. THE MORRISTOWN HIGH SCHOOL GRADUATING SENIOR MUST INTEND TO PURSUE AN UNDERGRADUATE DEGREE IN LIBERAL ARTS AND EXEMPLIFY THE TRAITS OF SCHOLARSHIP, PERSEVERANCE, PATIENCE, DILIGENCE AND CONSIDERATION OF OTHERS. THE STUDENT MUST CONTINUE TO MEET THE LISTED CRITERIA AS HE/SHE MOVES AHEAD.

#### ELL/BILINGUAL DEPARTMENT SCHOLARSHIP

THE TEACHERS OF THE ELL/BILINGUAL DEPARTMENT DECIDED TO INITIATE A BILINGUAL SCHOLARSHIP AS A MEANS TO MOTIVATE HIGH SCHOOL ELL/BILINGUAL STUDENTS TO DO BETTER IN SCHOOL, BOTH IN ATTENDANCE AND ACADEMICS. TWO YEARS A SCHOLARSHIP WAS ISSUED FOR \$2,300.

THE RECIPIENT OF THE ELL/BILINGUAL DEPARTMENT SCHOLARSHIP FOR 2007 WAS A COUNTY COLLEGE OF MORRIS STUDENT FROM GUATEMALA. THE RECIPIENT WORKS NIGHTS IN A RESTAURANT AND ATTENDS CCM DURING THE DAY. SHE WANTS TO BE A REGISTERED NURSE AND IS PURSUING THAT CAREER AT CCM. THE RECIPIENT SPOKE TO THE MORRISTOWN HIGH SCHOOL ELL/BILINGUAL SENIORS ABOUT HER EXPERIENCE AT CCM AND AS A RECIPIENT OF THE SCHOLARSHIP AND ENCOURAGED OTHER ELL/BILINGUAL STUDENTS TO STRIVE FOR SIMILAR ACHIEVEMENTS.

# GRANTS AND AWARDS

THE REASON THAT 25 OR SO BUSY PROFESSIONALS, RETIREES, TEACHERS, PARENTS AND COMMUNITY LEADERS VOLUNTEER THEIR TIME AND EFFORTS TO ATTRACT FUNDING TO THE MORRIS EDUCATIONAL FOUNDATION IS SO THAT THEY CAN FULFILL THE MISSION OF THE ORGANIZATION AND PROVIDE GRANTS AND AWARDS TO DESERVING INDIVIDUALS IN THEIR COMMUNITY. THE PROCESS IS QUITE SIMPLE. MORRIS EDUCATIONAL FOUNDATION TRIES TO REACH THE PUBLIC, BOTH INDIVIDUAL AND CORPORATE, WITH THE MESSAGE THAT BETTER EDUCATION CAN BE ACCOMPLISHED WITH FINANCIAL SUPPORT FOR INNOVATIVE IDEAS AND PROGRAMS. EVERY STAFF MEMBER OF THE MORRIS SCHOOL DISTRICT IS ENCOURAGED TO APPLY FOR A GRANT. THE ACTUAL APPLICATION FORM IS AVAILABLE FOR DOWNLOAD ON MANY PAGES OF THIS WEBSITE. THE GRANTS COMMITTEE IS ALWAYS EAGER TO DISCUSS AN IDEA OR ANSWER ANY QUESTIONS YOU MIGHT HAVE REGARDING GRANTS OR THE GRANTS

PROCESS.

THE FOLLOWING GRANTS WERE DISTRIBUTED DURING THE 2007 - 2008 SCHOOL YEAR:

A CELEBRATION OF DIVERSITY: THOMAS JEFFERSON SCHOOL/AFRICAN AMERICAN HISTORY AWARENESS PROGRAM IN COOPERATION WITH THE STYLE CLUB OF MORRISTOWN HIGH SCHOOL

THIS DIVERSITY BASED PROGRAM WILL UTILIZE THE LOCAL ARTS IN ORDER TO INFORM STUDENTS OF THE CONTRIBUTIONS OF AFRICAN AMERICANS TO UNITED STATES HISTORY. THE FIFTH GRADE STUDENTS OF THOMAS JEFFERSON SCHOOL AND MEMBERS OF THE MHS STYLE CLUB WILL SEE THE PRODUCTION OF THE BLACK JOURNEY AT THE COMMUNITY THEATRE. AFTER THE PERFORMANCE, BOTH GROUPS WILL MEET TO DISCUSS ISSUES OF DIVERSITY. REV. ROBERT ROGERS, PASTOR OF THE CHURCH OF GOD AND CHRIST, WILL PARTICIPATE IN THIS PROGRAM AS A LOCAL COMMUNITY RESOURCE.

IN PREVIOUS YEARS, MORRIS EDUCATIONAL FOUNDATION HAS AWARDED VARIOUS GRANTS TO THE COMMUNITY INCLUDING:

## CULTURAL ARTS GRANTS

WITH THE INTRODUCTION OF THE CULTURAL ARTS GRANT FOR EACH ELEMENTARY SCHOOL IN THE DISTRICT, MORRIS EDUCATIONAL FOUNDATION HAS GIVEN AT LEAST ONE GRANT TO EACH OF THE TEN SCHOOLS IN THE DISTRICT. BELOW IS A SAMPLING OF SOME OF THE MORE RECENT PROJECTS.

ALEXANDER HAMILTON -- THE SPORT OF READING. AUTHOR DAN GUTMAN WILL BE COMING TO AH TO EXCITE THE STUDENTS ABOUT READING. EACH STUDENT WILL GET AN AUTOGRAPHED PAPERBACK. THE MEF WILL BE BUYING BOOKS FOR STUDENTS WHO CANNOT AFFORD TO PURCHASE ONE ON THEIR OWN.

ALFRED VAIL -- CAMPFIRE: SURE AND SAFE. THIS RESIDENCY PROVIDES CHARACTER EDUCATION THROUGH HANDS-ON ACTIVITIES WHICH TOOK PLACE IN SIX SESSIONS LAST SPRING.

FRELINGHUYSEN -- DARE PROGRAM. EACH AND EVERY STUDENT IN THE SIXTH GRADE PARTICIPATES IN THE DARE PROGRAM. DARE ADDRESSES MANY OF THE NJ CORE CURRICULUM STANDARDS INCLUDING HEALTH EDUCATION, DECISION MAKING SKILLS, CONFLICT RESOLUTION, AND WAYS TO DEAL WITH PEER PRESSURE. THIS MONEY

FILLS THE GAP BETWEEN THE MORRIS TOWNSHIP CONTRIBUTION AND WHAT IS NEEDED TO SUCCESSFULLY COMPLETE THE PROGRAM FOR THE STUDENTS.

HILLCREST -- CHARACTER COIN BANK. THE GOAL OF THIS PROJECT IS TO OBSERVE STUDENTS PERFORMING GOOD DEEDS SO AS TO CHANGE ANY NEGATIVE BEHAVIORAL PATTERNS THAT CURRENTLY EXIST. COINS WILL BE AWARDED FOR ACTS OF KINDNESS, PERSONAL IMPROVEMENT IN THE ACADEMIC DOMAIN, AND POSITIVE SOCIAL INTERACTION AMONG STUDENTS. THE CHILDREN WILL DEPOSIT THEIR COINS IN A BANK. DEPOSIT SLIPS, BANK BOOKS, AND WITHDRAWAL SLIPS WILL BE PROVIDED BY THE FIRST MORRIS BANK AND TRUST.

LAFAYETTE -- CONCERT. THE STUDENTS WERE TREATED TO A MUSICAL CONCERT WITH ANDY WASSERMAN.

MORRISTOWN HIGH SCHOOL -- DIGITAL MICROSCOPE. THE BIOLOGY STUDENTS WILL NOW HAVE THE OPPORTUNITY TO SEE MICROSCOPIC SAMPLES CLEARLY ON AN OVERHEAD SCREEN.

NORMANDY PARK -- THE OUTDOOR GARDEN. AS AN EXTENSION OF THE GARDEN CURRENTLY BEING CULTIVATED IN THE INNER COURTYARD, A NEW OUTDOOR CLASSROOM WILL BE DEVELOPED. STUDENTS WILL BE ABLE TO SIT, APPRECIATE THE NATURAL BEAUTY AROUND THEM, LEARN FROM THEIR TEACHERS AND OLDER MENTORS. ONE OF THE MOST VALUABLE OBJECTIVES OF THIS PROJECT IS TO FOSTER A DEEPER UNDERSTANDING AND APPRECIATION FOR CHARACTER DEVELOPMENT.

SUSSEX -- THE ORGANWISE GUYS/TAKE 10! THIS YEAR-ROUND AWARD-WINNING PROGRAM WILL PROVIDE AN EXPERIENTIAL EDUCATIONAL OUTREACH TO THE FIFTH GRADE STUDENTS THAT WILL PROMOTE THE WELLNESS AND WELL-BEING OF CHILDREN WITH A FOCUS ON CHILDHOOD OBESITY. TO PREVENT CHILD AND ADOLESCENT OBESITY, HEALTHFUL BEHAVIORS MUST BE INTRODUCED, MODELED AND REINFORCED EARLY IN CHILDHOOD.

THOMAS JEFFERSON--CHARACTER COUNTS. COLOR-CODED WRIST BANDS WILL BE DISTRIBUTED TO STUDENTS. THESE BANDS WILL REINFORCE THE SIX CORE ETHICAL VALUES (TRUSTWORTHINESS, RESPECT, RESPONSIBILITY, FAIRNESS, CARING AND CITIZENSHIP). THROUGH THE USE OF THESE BANDS, STUDENTS WILL REMEMBER AND INTERNALIZE THE SIX PILLARS AND BECOME T.R.R.F.C.C. MEMBERS OF SOCIETY.

# AFRICAN AMERICANS OF CHARACTER

THE AFRICAN AMERICANS OF CHARACTER GRANT IS FOR BOOKS ON AFRICAN AMERICANS OF CHARACTER THAT WILL BE PART OF A SCHOOL WIDE PROJECT DURING

BLACK HISTORY MONTH. A STORYTELLER WILL VISIT THE SCHOOL AT A KICKOFF ASSEMBLY. THEN STUDENTS WILL CREATE RESEARCH REPORTS RELATED TO AN AFRICAN AMERICAN OF CHARACTER. THIS PROJECT COMPLEMENTS THE MORRIS SCHOOL DISTRICT COMMITMENT TO CHARACTER EDUCATION AND DIVERSITY. LIBRARY OF BOOKS WILL BE AVAILABLE TO ANY OTHER SCHOOL IN THE DISTRICT.

#### CHALLENGE DAY

MORRIS EDUCATIONAL FOUNDATION PROVIDES GRANTS FOR CHALLENGE DAY WHICH IS A PROGRAM THAT IS DESIGNED TO HELP STOP THE VIOLENCE AND ALIENATION THAT YOUTH FACE EVERY DAY. ONE HUNDRED STUDENTS SPEND THE DAY PARTICIPATING IN A VARIETY OF ACTIVITIES THAT WILL HELP TEAR DOWN BARRIERS THAT KEEP THEM APART AND MAKE CONNECTIONS TO UNITE THEM. THE PROGRAM HELPS STUDENTS DEVELOP CHARACTER EDUCATION, LEARN HOW TO BECOME MODEL CITIZENS AND PREPARE FOR THE POSTSECONDARY PHASE OF THEIR LIVES.

## CHARACTER COUNTS REWARDS PROGRAM

MONEY AWARDED BY THIS GRANT WILL BE USED TO PURCHASE COLOR CODED WRIST BANDS THAT WILL BE DISTRIBUTED TO STUDENTS. THESE BANDS WILL REINFORCE THE SIX CORE ETHICAL VALUES (TRUSTWORTHINESS, RESPECT, RESPONSIBILITY, FAIRNESS, CARING, AND CITIZENSHIP) THAT ESTABLISH THE FOUNDATION OF THE TJ CHARACTER EDUCATION PROGRAM. VIA THE USE OF THESE BANDS, STUDENTS WILL REMEMBER AND INTERNALIZE THE SIX PILLARS. THEIR CHARACTER COUNTS PROGRAM IS A WAY OF HELPING THE STUDENTS BECOME T.R.R.F.C.C. MEMBERS OF SOCIETY.

#### CHARACTER EDUCATION

THE STUDENTS WILL EXPLORE SIX DIFFERENT AREAS OF CHARACTER EDUCATION. READER'S THEATER SCRIPTS WILL PROVIDE THE VEHICLE. EACH SCRIPT HAS A CHARACTER EDUCATION COMPONENT EMBEDDED IN IT. THE PLAYS WILL BE DISCUSSED. AS A CULMINATING ACTIVITY, THESE PLAYS WILL BE PERFORMED AT HILLCREST SCHOOL.

#### CITE RIGHT @ YOUR LIBRARY SITE

THIS GRANT WILL ALLOW THE DISTRICT TO SUBSCRIBE TO NOODLETOOLS.COM. THIS PROGRAM IS A COMPREHENSIVE MLA AND APA STYLE BIBLIOGRAPHY CREATOR WITH A FULLY INTEGRATED NOTE-TAKING COMPONENT. THIS PROGRAM TAKES STUDENTS

THROUGH STEPS TO HELP THEM DECIDE WHICH TYPE OF SOURCE THEY ARE USING AND THEN ASKS FOR INFORMATION WHICH IS USED TO CREATE THE CITATION.

#### CLASSROOM JEOPARDY

THE CLASSROOM JEOPARDY GAME IS AN EXCITING AND INTERESTING WAY TO LEARN, PRACTICE, AND REVIEW MATERIAL IN ANY SUBJECT AREA. THE GAME LENDS ITSELF TO FOSTERING HEALTHY COMPETITION THROUGH ORGANIZED TEAM INITIATIVES. IN ADDITION, IT ALLOWS FOR STUDENTS AT ALL ACADEMIC LEVELS TO PARTICIPATE IN A COMMON ACTIVITY AND MEET WITH SUCCESS.

OTHER PROGRAMS

TEACHER-SCHOLARS

THE TEACHER-SCHOLARS PROGRAM IS A COLLABORATIVE EFFORT OF THE MORRIS SCHOOL DISTRICT, THE MORRIS EDUCATIONAL FOUNDATION AND THE DODGE FOUNDATION PROVIDE TEACHERS IN THE MORRIS SCHOOL DISTRICT THE OPPORTUNITY TO RETURN TO THE CLASSROOM AS LEARNERS. IN SMALL SEMINARS LED BY PREEMINENT PROFESSORS AT DREW UNIVERSITY TEACHERS ONCE AGAIN BECOME CONNECTED TO THE WORLD OF IDEAS AND THE EXCITEMENT OF LEARNING - THE REASON MANY OF THEM BECAME TEACHERS IN THE FIRST PLACE. THIS UNUSUAL PROGRAM HONORS TEACHERS AND NURTURES THE STRONG INTELLECTUAL TRADITIONS OF THE DISTRICT.

# COLONIAL SYMPHONY MUSIC EDUCATION PROGRAM

THE COLONIAL SYMPHONY CONDUCTS A MUSIC EDUCATION PROGRAM THAT ENHANCES THE CURRICULUM. THERE ARE A SERIES OF COMPOSITION CLASSES FOR ADVANCED MUSIC STUDENTS, A SPECIAL OPEN MASTER CLASS FOR THESE COMPOSITION STUDENTS THAT BENEFITS THE ENTIRE MUSIC DEPARTMENT, A SERIES OF DEMONSTRATION/PERFORMANCES FOR THE WIND ENSEMBLE AND ORCHESTRA BY QUINTETS FROM THE COLONIAL SYMPHONY, AND A MENTORING PROGRAM AT FRELINGHUYSEN MIDDLE SCHOOL.

BRAIN GYM FOR ALL

BRAIN GYM IS A SERIES OF SIMPLE AND ENJOYABLE MOVEMENTS PERFORMED IN AN

INTENTIONAL WAY WHICH OPTIMIZE FUNCTIONING OF THE BRAIN. THESE MOVEMENTS HELP TO STIMULATE AND INTEGRATE NEURAL PATHWAYS WITHIN THE BRAIN TO REMOVE STRESS THAT HAS BEEN ASSOCIATED WITH SPECIFIC LEARNING SITUATIONS. THE TEACHERS WILL RECEIVE TWO BRAIN GYM POSTERS AND THE BRAIN GYM TEACHERS EDITION SO THEY CAN REFER TO THE INTEGRATIVE MOVEMENTS ON A DAILY BASIS.

#### PENGUIN POINTERS

PENGUIN POINTERS WILL ENABLE JENKINSON'S AQUARIUM TO BRING A PENGUIN TO HILLCREST FOR STUDENTS TO WATCH. STUDENTS WILL LEARN ABOUT THEIR BIOLOGY, GEOGRAPHY, CARE AND FEEDING, AND CONSERVATION. AS A RESULT OF THIS GRANT, THE STUDENTS WILL EXPERIENCE THE ULTIMATE INTRODUCTION TO AN EXCITING THEMATIC UNIT.

#### TEAM UP FOR TURF

THE TEAM UP FOR TURF COMMITTEE HAS MADE GREAT STRIDES IN ITS EFFORT TO RAISE FUNDS FOR A TURF FIELD AT MORRISTOWN HIGH SCHOOL. CONTRIBUTIONS FROM INDIVIDUAL DONORS HAVE TOPPED THE \$125,000 MARK AND EFFORTS ARE WELL UNDERWAY TO SECURE DONATIONS FROM POTENTIAL CORPORATE AND BUSINESS SPONSORS.

TURF IS BECOMING MORE COMMON THROUGHOUT MORRIS COUNTY AS THE BENEFITS OF THESE ALL-WEATHER, ALWAYS-AVAILABLE, MULTI-SPORT SURFACES ARE PROVING TO BE WELL WORTH THE INVESTMENT. PLAYER INJURIES ARE FEWER ON TURF, MAINTENANCE COSTS ARE REDUCED SIGNIFICANTLY, AND TURF IS BETTER FOR THE ENVIRONMENT.

MORRISTOWN HIGH SCHOOL OR COMMUNITY RECREATION TEAMS COMPETE AT SCHOOLS WHERE TURF IS INSTALLED AND THE HOME FIELD ADVANTAGE IS MULTIPLIED MANY TIMES OVER. SO MANY ASPECTS OF A GAME ARE INFLUENCED BY THE SURFACE ON WHICH IT IS PLAYED. THE SPEED OF PLAY, FOOTING, AND THE WAY BALLS BOUNCE ARE TOTALLY DIFFERENT ON TURF WHEN COMPARED TO GRASS FIELDS. MORRIS EDUCATIONAL FOUNDATION SUPPORTS THIS CAUSE SO THAT STUDENT ATHLETES CAN BE ON A LEVEL PLAYING FIELD WHEN COMPETING AGAINST TEAMS THAT HAVE TURF.

#### MORRISTOWN'S GOT TALENT

THE MORRIS EDUCATIONAL FOUNDATION TOOK THE TOWN BY STORM WITH ITS FIRST

MAJOR FUNDRAISER IN YEARS, MORRISTOWN'S GOT TALENT! THIS TALENT SHOW FEATURING THE BEST AMATEUR TALENT FROM MORRISTOWN, MORRIS PLAINS AND MORRIS TOWNSHIP, WAS HELD ON FEBRUARY 27TH AT THE COMMUNITY THEATER AT THE MAYO PERFORMING ARTS CENTER. THE EVENING FEATURED 16 ACTS OF VARIOUS TALENTS SELECTED FROM 68 CONTESTANTS WHO AUDITIONED FOR THE SHOW.

THIS YEAR'S CELEBRITY JUDGES, WHO GENEROUSLY DONATED THEIR TIME, INCLUDED: KENT MANAHAN OF NJN NEWS, GUY ADAMI OF CNBC'S FAST MONEY, RIO CLEMENTE, THE "BISHOP OF JAZZ" AND LESLIE MAXIE, ESPN SPORTS REPORTER AND FORMER OLYMPIAN. ALL OF THE JUDGES RESIDE IN THE MORRISTOWN AREA.

THE SHOW WAS THE FIRST OF WHAT THE MORRIS EDUCATIONAL FOUNDATION PLANS TO BE AN ANNUAL EVENT. MORRIS EDUCATIONAL FOUNDATION IS PROUD TO GIVE THE LOCAL AMATEUR COMMUNITY AN OPPORTUNITY TO SHOWCASE THEIR TALENTS IN FRONT OF THEIR HOMETOWN AND IN A TOP NOTCH FACILITY SUCH AS THE COMMUNITY THEATER AT THE MAYO PERFORMING ARTS CENTER. THIS YEAR'S EVENT RAISED OVER \$16,000 FOR THE MEF AND TRULY CAPTURED THE SPIRIT OF COMMUNITY.

THE MORRIS EDUCATIONAL FOUNDATION IS AN INTEGRAL PART OF THE MORRIS SCHOOL DISTRICT, AND THIS FUNDRAISING EVENT WILL FURTHER THE FOUNDATION'S ABILITY TO DISTRIBUTE FINANCIAL AND OTHER RESOURCES TO AND FOR THE MORRIS SCHOOL DISTRICT FOR ENRICHMENT PROGRAMS AND OTHER PROJECTS AIMED AT ENHANCING THE QUALITY OF EDUCATION AND EDUCATIONAL OPPORTUNITIES FOR STUDENTS IN THE DISTRICT.

Morris Educational Foundation, Incorporated	22-3205909
Form 990, Part VIII - Special Fundraising Events Gross Income "Not Including"	Line 8a
Description	Amount
Morristown's Got Talent Team Up For Turf	17,023 28,498

Total

Statement 11

45,521

# Form 990, Part VIII - Special Fundraising Events

Description	Line 8a Gross <u>Revenue</u>	Line 8b Direct Expenses
Morristown's Got Talent Team Up For Turf	14,652 550	14,652 550
Total	15,202	15,202

Morris Educational Foundation, Incorporated EIN 22-3205909 Support For 2008 Form 990 Part IX Lines 1(A) & 2(A) and Schedule I Part II

I Form 990 Part IX Line 1(A) and Schedule I Part II Grants & Other Assistance To US Governments & Organizations

	Morris School		Metro Race	Armstrong Turner	Duke	Georgetown	John Hopkins	Trustees of Tufts	Trustees of College of Tufts Saint	County College	
G/L A/C	District	USATE	Forum	Consulting	Univesity	Univesity	Univesity	College	Elizabeth	of Morris	Total
#5003 Colonial Challenge		175	289								464
#5004 Major Grants #5005 Minı Grants	148,849										148,849 0
#5010 Midi Grants	7,621										7,621
#5007 Pfizer Grant	24,363										24,363
#5008 Outside Grants	2,500			3,649							6,149
#5020 Unexpended Grants	(2,535)										(2.535)
#5051 Wong Scholarship					4,000	4,000	4,000				12,000
#5052 Cunningham Scholarship								1,250			1,250
#5058 ELL Bilingual scholarship									1,715	1,516	3,231
Total	180,798	175	289	3,649	4,000	4,000	4,000	1,250	1,715	1,516	201,392

# I. Form 990 Part IX Line 2(A) Grants & Other Assistance To US Individuals

Total	300	250
Erica <u>Delaney</u>	250	250
Kathleen Turner <u>MHS Grad</u>	300 ard	300 250
G/L A/C	#5005 Mini Grants #5054 Cohen French Award	Total

# Form 990, Part II Line # 24a Other Expenses

Description	Total	Program <u>Services</u>	Management & General
Outside Contractors	9,093		9,093
Registration Fees	175		175
Bank Charges	913		913
Web Site	340		340
Advertising	125		125
Fall Festival	2,500	2,500	
Foundation Newsletter	4,794	4,794	
Postage and Printing	94		94
Supplies	45		45_
Total	18,079	7,294	10,785

# FORM 990, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE

TO SUPPORT THE EDUCATIONAL PURPOSES, PROGRAMS AND SERVICES OF THE MORRIS SCHOOL DISTRICT, WHICH PROVIDES EXCELLENT AND INNOVATIVE PROGRAMS IN ACADEMICS, ATHLETICS AND THE ARTS TO ALL INDIVIDUALS IN THE MORRIS SCHOOL DISTRICT IN A NON-DISCRIMINATORY MANNER REGARDLESS OF ABILITY TO PAY.

THE MORRIS SCHOOL DISTRICT SERVES THE COMMUNITIES OF MORRISTOWN AND MORRIS TOWNSHIP BY PROVIDING A SUPPORTIVE AND CHALLENGING EDUCATIONAL ENVIRONMENT FOR A TOTAL STUDENT POPULATION OF APPROXIMATELY 4,500. THE MORRIS SCHOOL DISTRICT CONSISTS OF ONE PRESCHOOL, THREE PRIMARY SCHOOLS, THREE INTERMEDIATE SCHOOLS, ONE MULTI-AGE MAGNET SCHOOL, ONE MIDDLE SCHOOL, ONE HIGH SCHOOL AND A COMMUNITY SCHOOL THAT OFFER AN EXTENSIVE ADULT SCHOOL CURRICULUM FOR LIFELONG LEARNERS. PLEASE REFER TO THE GENERAL EXPLANATION ATTACHMENT AT STATEMENT 1 FOR THE ORGANIZATION'S COMMUNITY BENEFIT STATEMENT.

#### Form 990, Part IV - Investments - Publicly Traded Securities

<u>Description</u>	Beginning <u>Book Value</u>	Ending <u>Book Value</u>
Corporate Stcok	61,200	90,736
Mutual Funds	108,053	69,012
Bonds	<u>73,501</u>	81,390
Total	242,754	241,138

Morris Educational Foundation, Incorporated	22-3205909
Form 990, Schedule D Part XII - Other Revenue On Books But Not On Return	
Description	Amount
Special Events Expenses	15,202
Total	15,202

Morris Educational Foundation, Incorporated	22-3205909
Form 990, Schedule D Part XIII - Other Expenses On Books But Not On Return	
Description	Amount
Special Events Expenses	15,202
Total	15,202

# (Rev. April 2009)

Application for Extension of Time To File an **Exempt Organization Return** 

OMB No. 1545-1709

Department of ti Internal Revenue		► Fite a separate application for each return.				
• If you are	filing for	an Automatic 3-Month Extension, complete only Part I and check this box an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page II unless you have already been granted an automatic 3-month extension on a previous	9 2 of ti	his form).		
Part I		tic 3-Month Extension of Time. Only submit original (no copies needed).				
A corporation Part I only		d to file Form 990-T and requesting an automatic 6-month extension—check this bo	ox and	complete · · · ▶ □		
time to file .	income ta					
one of the electronical returns, or a	returns no ly if (1) you composit	ite). Generally, you can electronically file Form 8868 if you want a 3-month automatic ofted below (6 months for a corporation required to file Form 990-T). However, you want the additional (not automatic) 3-month extension or (2) you file Forms 990-E e or consolidated Form 990-T. Instead, you must submit the fully completed and signe is on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Char	u canno SL, 6069 ed page	ot file Form 8868 9, or 8870, group 2 (Part II) of Form		
Type or print		Exempt Organization   Employ A or Tys Education of Found at the The Hold Street, and room or suite no. If a P.O. box, see instructions.	yer ider 3	1 0 59 0 9		
File by the due date for filing your	Number	street, and room or suite no. If a P.O. box, see instructions. /				
return. See instructions.	City, to	vn or post office, state, and ZIP code. For a foreign address, see instructions.				
Check type	of retun	to be filed (file a separate application for each return):				
A Form 99	10	Form 990-T (corporation)	☐ Fo	rm 4720		
☐ Form 990-BL ☐ Form 990-T (sec. 401(a) or 408(a) trust) ☐ Form 5227						
☐ Form 98	☐ Form 990-EZ ☐ Form 990-T (trust other than above) ☐ Form 6069					
☐ Form 99	0-PF	☐ Form 1041-A	☐ Fo	om 8870		
• The book	sare in ti	ne care of > Mis Patty Haralampoulus Treusurer				
Telephone	No. ► (	973) 314-2000 FAX No. ► ( )				
• If the org	anızation (	toes not have an office or place of business in the United States, check this box		▶ 🔲		
for the who	le group,	p Return, enter the organization's four digit Group Exemption Number (GEN)check this box ▶ ☐ . If it is for part of the group, check this box and EINs of all members the extension will cover.				
until _	Febru	automatic 3-month (6 months for a corporation required to file Form 990 $3-15$ , 20.1 $\frac{1}{2}$ , to file the exempt organization return for the organization named tion's return for:	)-T) ex above	tension of time . The extension is		
<ul> <li>★</li> </ul>	tax year	beginning or July 1, 20.65, and ending June	<u>3c</u>	, 20.6.9		
2 If this	tax year i	s for less than 12 months, check reason:  Initial return  Final return  Cha	nge in :	accounting period		
		n is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, undable credits. See instructions.	3a \$			
		n is for Form 990-PF or 990-T, enter any refundable credits and estimated tax . Include any prior year overpayment allowed as a credit.	3b \$	, -0-		
depos	it with FT	ubtract line 3b from line 3a. Include your payment with this form, or, if required, D coupon or, if required, by using EFTPS (Electronic Federal Tax Payment structions.	3c \$	-0-		
Caution. If		oing to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO ins.				
For Privacy	Act and Pa	perwork Reduction Act Notice, see Instructions. Cat. No. 27916D	Form	8868 (Rev. 4-2009)		

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form	8868 (Rev	r. 4-2009)		Page 2	
Note	B. Only c	filing for an Additional (Not Automatic) 3-Month Extension, complete Part II if you have already been granted an automatic 3-month exfiling for an Automatic 3-Month Extension, complete only Part I (on	tension on a pre	and check this box . ▶ ☐ eviously filed Form 8868.	
Pai	at III	Additional (Not Automatic) 3-Month Extension of Time. Only	file the origina	d (no copies needed).	
Type		Name of Exempt Organization		Employer identification number	
File b		Number, street, and room or suite no. If a P.O. box, see instructions.		For IRS use only	
filing the return. See instructions.		City, town or post office, state, and ZIP code. For a foreign address, see instructions			
Che	ck type	of return to be filed (File a separate application for each return):			
□ F	Form 99	0 🗓 Form 990-PF 🗆	Form 1041-A	☐ Form 6069	
	Form 99	0-BL	Form 4720	☐ Form 8870	
_	Form 99		Form 5227		
STOPI Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.					
● The books are in the care of ▶					
Telephone No. ► () FAX No. ► ()					
		nization does not have an office or place of business in the United St			
• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is					
for t	he whol	e group, check this box	check this box.	>  and attach a	
		names and EINs of all members the extension is for.			
4	l reque	st an additional 3-month extension of time until		. 20	
5	For calendar year, or other tax year beginning, 20, and ending, 20				
6	If this tax year is for less than 12 months, check reason:				
7	State in detail why you need the extension				
	$\frac{1}{\sqrt{1}}$				
8a		application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter by nonrefundable credits. See instructions.	the tentative ta	x, 8a \$	
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any				
		t paid previously with Form 8868.		30.\$	
C		e Due. Subtract line 8b from line 8a. Include your payment with this form, or, D coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System			
		Signature and Verification			
		of perjury, I declare that I have examined this form, including accompanying schedules at, and complete, and that I am authorized to prepare this form.	and statements, and	to the best of my knowledge and ballef,	
Signa	uture ► ·	their Hardinger and The Treasur	マゲ	Date > 1. / /	
				Form <b>8868</b> (Rev. 4-2009)	