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## Form **990-PF**

SCANNED AUG 1 9 2010

## **Return of Private Foundation**

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

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

2008

OMB No 1545-0052

Ford	alen	dar year 2008, or tax yea	r beginning	OCT	1, 2008		, and ending	SEE	30, 2009	
			nitial return		Final return		Amended return	X Add	iress change	Name change
	the I	Name of foundation				_	<del>-</del>	A Em	nployer identification	number
	abel.							١,	00 0270711	
		se, MORRIS FAN							<u> 38-0379711</u>	
	print	· ·			elivered to street address)		Room/suite		lephone number	4.4
	type Spec	SELECT PART		STR	EET		204	<del>                                     </del>	<u> 702-841-06</u>	44
	uctio	ine   City or town, state, a			_				xemption application is p	
		CARSON CIT		<u>970</u>					Foreign organizations	
H_C	heck	type of organization:	X Section 501(c		cempt private foundation			2.	Foreign organizations me check here and attach co	mputation
	] Se	ction 4947(a)(1) nonexem	pt charitable trust	Ш.	Other taxable private for	ounda	tion	E If c	orivate foundation stat	tus was terminated
I Fa	ır ma	rket value of all assets at e	end of year   J Ac	counti	ng method: 🔼 Ca	ash	Accrual	un	der section 507(b)(1)	(A), check here
(fr	om F	Part II, col. (c), line 16)	L		ther (specify)			F If t	he foundation is in a 6	60-month termination
_	\$			i, colu	mn (d) must be on c	ash b	pasis.)	un	der section 507(b)(1)	(B), check here
Pa	rt I	(The total of amounts in colunecessarily equal the amoun	mns (b), (c), and (d) may	у поt	(a) Revenue and expenses per boo	ks	(b) Net investment income		(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grant	ts. etc., received		400,00	0.				
	2		n is not required to attach So	h B						
	3	interest on savings and tempo	•		85,86	1.	85,861		85,861.	STATEMENT 1
	4	Dividends and interest fro	om securities		3.3.7.3.3					
	•	Gross rents	3111 000d111100					F=		
		Net rental income or (loss)							RECEIV	FD
	_	· · · -					<del></del>	11		C
ire	Va h	Net gain or (loss) from sale of Gross sales price for all	assets not on line to				<del></del>	100	AUG 172	010 0
Revenue	7	assets on line 6a	Red IV line 2)				0		HUG I / Z	010   0
æ	7	Capital gain net income (from								8
	8	Net short-term capital gai	H1			$\neg$	· · · · · · · · · · · · · · · · · · ·	+	OGDEN	
	9	Income modifications Gross sales less returns	1			$\dashv$		┤┺╼	JODLIV,	
	10a	and allowances					<u> </u>	+		
		Less Cost of goods sold				$\dashv$		+		
		Gross profit or (loss)			2 50	-	3,586	-	3 506	STATEMENT 2
	11	Other income			3,58 489,44		89,447		89,447.	DIMIEMENI Z
	12	Total. Add lines 1 throug			407,44	0.	09,447		0.	0.
	13	Compensation of officers, dire				۷٠		•	U •	<u> </u>
	14	Other employee salaries a	•					+		
S	15	Pension plans, employee		2	3,61	<u> </u>	0	+	0.	3,612.
seuses	İ	Legal fees	STMT	3			0	$\overline{}$	0.	5,615.
ĝ		Accounting fees	STMT	4	5,61					
Ä		Other professional fees	STMT	2	1,45	0.	0	•	0.	1,450.
ξį	17	Interest	Cm m	_	F 00	-		+		E 0.60
and Administrative	18	Taxes	STMT	ō	5,86	8.	0	•	0.	5,868.
ij	19	Depreciation and depletion	n		<u> </u>			+-		
퉏	20	Occupancy			06.40					26 426
٩	21	Travel, conferences, and			26,42	6.	0	+-	0.	26,426.
	22	Printing and publications		_	20.45			-		32 000
ing	23	Other expenses	<del>-</del>	7	32,15	5.	0	•	0.	32,000.
Operating	24	Total operating and adm				ایر	_		^	<b>54</b> 054
8		expenses. Add lines 13 t	•		75,12		0	•	0.	74,971.
•	25	Contributions, gifts, gran	-		5,00	0.				5,000.
	26	Total expenses and disb	ursements.			_	-		-	
		Add lines 24 and 25			80,12	6.	0		0.	79,971.
	27	Subtract line 26 from line	2 12:			ا ہ				
		Excess of revenue over exper		9	409,32	1.		<del> </del>		
	b	Net investment income (	(if negative, enter -0-)		ļ		89,447	•		
	C	Adjusted net income (if n	egative, enter -0-)		<u> </u>				<u>89,447.</u>	5 000 DE (0000)

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

Form **990-PF** (2008)

823511 01-02-09

See the Part VI instructions.

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

		379711		age 4
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - s Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	ee msuu	CLIOII	13)
14	Date of ruling letter: (attach copy of ruling letter if necessary-see instructions)			
h	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%		1,78	39.
•	of Part I, line 27b			-
c	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
	Add lines 1 and 2		1,78	39.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		1,78	39.
6	Credits/Payments;			
а	a 2008 estimated tax payments and 2007 overpayment credited to 2008 6a 3,240.			
b	b Exempt foreign organizations - tax withheld at source 6b			
C	c Tax paid with application for extension of time to file (Form 8868)			
d	d Backup withholding erroneously withheld			
	Total credits and payments. Add lines 6a through 6d		3,24	
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached 8			8.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	<del></del>		
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		1,44	
	Enter the amount of line 10 to be: Credited to 2009 estimated tax			0.
	art VII-A Statements Regarding Activities		Vaa	No
1a	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	
	any political campaign?	1a		X
D	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
_	distributed by the foundation in connection with the activities	10		X
	c Did the foundation file Form 1120-POL for this year?	1c		
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$ 0 .				
	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
-	managers. > \$ 0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
_	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
•	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	b If "Yes," has it filed a tax return on Form 990-T for this year?	A 4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?	7	X	
	If "Yes," complete Part II, col. (c), and Part XV.			
8a	a Enter the states to which the foundation reports or with which it is registered (see instructions) NONE	$-\mid \mid$		
h	b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	— I I		
of each state as required by General Instruction G? If "No," attach explanation SEE STATEMENT 8				X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	8 <u>8b</u>		
year 2008 or the taxable year beginning in 2008 (see instructions for Part XIV)? If "Yes," complete Part XIV			х	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X
_		Form <b>990</b>	-PF (2	(8002

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Form **990-PF** (2008)

had not been removed from jeopardy before the first day of the tax year beginning in 2008?

orm 990-PF (2008) MORRIS FAMILY FUND			88-03797	11	· Page 6
Part VII-B   Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (secti	on 4945(e))?	Ye	es X No		
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indir				
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purpose	es?	Ye	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organizat	ion described in section				1
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	es 🗶 No		
(5) Provide for any purpose other than religious, charitable, scientific, literar					
the prevention of cruelty to children or animals?		Y	es 🗶 No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify u	nder the exceptions described	ın Regulations		.	
section 53.4945 or in a current notice regarding disaster assistance (see inst	ructions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check	here		▶□	1	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption	from the tax because it mainta	ained			
expenditure responsibility for the grant?	ľ	√I/A 🗀 Ye	es 🔲 No		
If "Yes," attach the statement required by Regulations section 53.49	45-5(d).		1		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to					
a personal benefit contract?			es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?			6b	Х
If you answered "Yes" to 6b, also file Form 8870.	•				
7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?		es X No		
b If yes, did the foundation receive any proceeds or have any net income attribu				7b	
Information About Officers Directors True		nagers, Highly		•	
Part VIII Paid Employees, and Contractors					
List all officers, directors, trustees, foundation managers and their	r compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e)	Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation		unt, other wances
OONALD E. MORRIS, PH.D.	PRESIDENT	•			
L0624 S. EASTERN AVE. #A201					
HENDERSON, NV 89052	1.00	0.	٥.		0.
ANITA MORRIS, PH.D.	DIRECTOR				
LO624 S. EASTERN AVE. #A201					
HENDERSON, NV 89052	1.00	0.	0.		0.
	<del>                                     </del>				
	7				
	-				
				1	
	-				,
2 Compensation of five highest-paid employees (other than those in	ncluded on line 1). If none,	enter "NONE."			
	(b) Title, and average		(d) Contributions to	(e)	Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation		unt, other wances
NONE	dovoted to position		compensation		
HOND	-				
<del></del>			-		
	4				
				-	
	1			-	
<del></del>		<u> </u>			
	+				
	-	<del> </del>		<u> </u>	
	-				
F. L. L. sumbar of other ample (con and a see ACO 000		<u> </u>		L	0
Total number of other employees paid over \$50,000		-	Farre	000 P	PF (2008)
			rorm	マラひ-ド	• (ZUU8)

Form 990-PF (2008) · MORRIS FAMILY FUND	88-0379711	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Management Paid Employees, and Contractors (continued)	ers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000	b) Type of service (c) Comp	ensation
NONE		
Table pumples of others assessment and ECO 000 for participations.		
Total number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	such as the Expenses	
1 LEARNING DISABILITY OUTREACH, TEACHER TRAINING, AND AWARENESS PROGRAM, SUPERVISED BY DR. ANJALI MORRIS.	PUBLIC	
- HULLIA DOGODAY DEBEGUACE AND DEWEDTAL GOVACE EDUCATI		000.
2 FULWA PROGRAM. PRESCHOOL AND REMEDIAL SCHOOL EDUCAT. HEALTH PROGRAM FOR CHILDREN OF SEX WORKERS, IN CONJ.		
WITH VANCHIT VIKASH, SUPERVISED BY DR. MORRIS.		000.
3		
4		
Part IX-B   Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount	
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.		
Total. Add lines 1 through 3	<u> </u>	0.

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	1,911,527.
b	Average of monthly cash balances	1b	2,483,038.
C		1c	
d	Total (add lines 1a, b, and c)	1d	4,394,565.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	4,394,565.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	65,918.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,328,647.
6	Minimum investment return. Enter 5% of line 5	6	216,432.
P	<b>art XI</b> Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here   X and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2008 from Part VI, line 5		
b	Income tax for 2008. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	79,971.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	79,971.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	79,971.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for	the section

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2007	(c) 2007	( <b>d)</b> 2008
1 Distributable amount for 2008 from Part XI,	Colpus	Tours prior to 2007	2001	2000
line 7				0.
2 Undistributed income, if any, as of the end of 2007				
a Enter amount for 2007 only			0.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2008:				
<b>a</b> From 2003				
<b>b</b> From 2004				
c From 2005				
<b>d</b> From 2006				
e From 2007				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2008 from				
Part XII, line 4: ► \$ N/A				
a Applied to 2007, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior		•		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2008 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2008 (If an amount appears in column (d), the same amount must be shown in column (a))	0.		-	0.
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'			-	
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2007. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2008. Subtract				
lines 4d and 5 from line 1. This amount must				1.
be distributed in 2009		-		0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2003				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2009.				
Subtract lines 7 and 8 from line 6a	0.			<del></del>
10 Analysis of line 9:				
a Excess from 2004				
b Excess from 2005				
c Excess from 2006				
d Excess from 2007				
e Excess from 2008				F 000 DE (0000)

Form **990-PF** (2008)

NONE

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

Total 823611 01-02-09

Form **990-PF** (2008)

0.

Part XVI-A	Analysis of Income-Producing	<b>Activities</b>

Enter gross amounts unless otherwise indicated.	Unrelated	business income		ded by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	( <b>b)</b> Amount	Exclu- sion code	(d) Amount	Related or exempt function income
	Code		0000		
a	- <del> </del>				
b	- <del>  -</del>				· · · · · · · · · · · · · · · · · · ·
<u> </u>	-				
d	-		<b>.</b>		
e	-				
T	-				
g Fees and contracts from government agencies	1	<del> </del>			
2 Membership dues and assessments	1				<del> </del>
3 Interest on savings and temporary cash investments			14	85,861.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income			14	3,586.	
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a					
b					·····
C					
d	1 1				
e					
2 Subtotal. Add columns (b), (d), and (e)	_	0.		89,447.	0.
3 Total. Add line 12, columns (b), (d), and (e)				13	89,447.
See worksheet in line 13 instructions to verify calculations.)					

			· <del></del>	
Part XVI-B	Relationship of A	ctivities to the	Accomplishment of Exempt	Purpose

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

Pa	art X\	/II Information Re Exempt Organ	egarding Transfers To a	and Transactions	and Relations	nips With Nonchari	table	•	<u> </u>
1	Did th	e organization directly or indi	rectly engage in any of the followir	ng with any other organizat	tion described in section	on 501(c) of		Yes	No
			)(3) organizations) or in section 52						
a	Trans	fers from the reporting found	ation to a noncharitable exempt or	rganization of:					
	(1) (	Cash					1a(1)		X
(2) Other assets							1a(2)		X
b	Other	transactions:							
	(1) S	Sales of assets to a noncharita	ble exempt organization				1b(1)		X
	(2) F	Purchases of assets from a no	ncharitable exempt organization				1b(2)		X
	(3) F	Rental of facilities, equipment,	or other assets .				1b(3)		X
	(4) F	Reimbursement arrangements					1b(4)		X
	(5) L	oans or loan guarantees					1b(5)		X
			embership or fundraising solicitation				1b(6)		X
C			uling lists, other assets, or paid em			Į	<u>1c</u>	L	X
d			"Yes," complete the following scho					ets,	
			oundation. If the foundation receiv		alue in any transaction	or sharing arrangement, sho	ow in		
			other assets, or services received.		1 (1)				
(a)	tne no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(0) Description	of transfers, transactions, and sh	arıng ar	rangeme	ents
			N/A	<del></del>					
	-								
_				<del></del>					
_			<u> </u>						
								-	
						<del></del>			
				————		<del> </del>		-	
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_						· · · · · · · · · · · · · · · · · · ·	_	•	
					-				
_						<del></del>		_	
2a			tly affiliated with, or related to, one		nizations described		-		_
			r than section 501(c)(3)) or in sec	ction 527?		<u> </u>	Yes	X	No
<u>b</u>	If "Ye	s," complete the following sch	·	(A) T (		-) Description of relationship			
_		(a) Name of org	ganization	(b) Type of organization	1   (	c) Description of relationship	) 		
_		N/A		<u> </u>	<del> </del>				
		·····		<u> </u>					
		<del></del>			<u> </u>				
		<u>-</u>			-				
$\neg$	Under	enalties of person, I declare that I h	nave examined this return, including acc	omnanying schedules and state	ements, and to the best of	my knowledge and belief, it is tru	e. corre	ect.	
	and con	nplete Declaration of preparer (other	er than taxpayer or fiduciary) is based on	all information of which prepar	rer has any knowledge	<b>,</b>	•		
8/13/2010 PRESIDI						ENT			
9	$\frac{1}{S_1}$	gnature of officer or trustee		Date	Title	DIN I			
완	<b>y</b> 0.	· · · · · · · · · · · · · · · · · · ·	~ /		Date Ch	eck if Preparer's	identif	ying nun	nber
Sign Here	ະ ≥	Preparer's Signature	All con		08/10/10 sel	ploved > PODI	744	14	
S	Paid Preparer's Use Only	DIN	ACCOUNTANCY CO	ORPORATION	UU	EIN >	- 10	'-'	-
	<u> 9</u> 9 8		14TH STREET, SU			E-111 F			
	2			7.111 1200		Phone no. (510)	89	3-6	908
	address, and ZIP code OAKLAND, CA 94612   Phone no. (510) 893-690   Form 990-PF (200								

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

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

➤ Attach to Form 990, 990-EZ, and 990-PF.

OMB No 1545-0047

Name of the organization		Employer identification number				
M	MORRIS FAMILY FUND					
Organization type (check	one):	88-0379711				
Filers of:	Section:					
Form 990 or 990-EZ	501(c)( ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt chantable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
General Rule  X For organizations	and a Special Rule. See instructions.) filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in mor plete Parts I and II.	ney or property) from any one				
Special Rules						
509(a)(1)/170(b)(1	(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of )(A)(vi), and received from any one contributor, during the year, a contribution of the grea 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and I	ater of (1) \$5,000 or (2) 2% of the				
For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III						
some contributior \$1,000. (If this bo etc., purpose. Do	(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one is for use exclusively for religious, charitable, etc., purposes, but these contributions did ix is checked, enter here the total contributions that were received during the year for an inot complete any of the parts unless the <b>General Rule</b> applies to this organization became, etc., contributions of \$5,000 or more during the year.)	not aggregate to more than exclusively religious, charitable,				
they must answer "No" on	at are not covered by the General Rule and/or the Special Rules do not file Schedule B (F Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or et the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	-				

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions

for Form 990. These instructions will be issued separately.

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

Employer identification number

# MORRIS FAMILY FUND

88-0379711

MORTE	O PAMILIT POND		
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ANJALI MORRIS, MD  10624 S. EASTERN AVE. #A370  HENDERSON, NV 89052	\$\$	Person X Payroll  Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	DONALD E. MORRIS, PH.D.  10624 S. EASTERN AVE. #A201  HENDERSON, NV 89052	\$ 200,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	∕ (b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CASH	INVESTMENTS	STATEMENT
SOURCE				AMOUNT
SCHWAB TREASURY INTEREST	85,861.			
TOTAL TO FORM 990-PF, PART I,	LINE 3, CC	LUMN A	=	85,861
FORM 990-PF	OTHER I	NCOME		STATEMENT
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
NET REALIZED GAIN ON LIQUIDAT PORTFOLIO	CION OF	3,586.	3,586.	3,586
TOTAL TO FORM 990-PF, PART I,	LINE 11	3,586.	3,586.	3,586
FORM 990-PF	LEGAL	FEES		STATEMENT :
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLI PURPOSES
LEGAL -	3,612.	0	. (	3,612
TO FM 990-PF, PG 1, LN 16A =	3,612.	0		3,612
FORM 990-PF	ACCOUNTING FEES		STATEMENT 4	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLI PURPOSES
ACCOUNTING	5,615.	0	. (	5,615
TO FORM 990-PF, PG 1, LN 16B	5,615.	0	. (	5,615

FORM 990-PF	OTHER PROFESSIONAL FEES		STATEMENT 5	
DESCRIPTION		(B) NET INVEST- MENT INCOME	ADJUSTED	
CONSULTANT	1,450.	0.	0.	1,450.
TO FORM 990-PF, PG 1, LN 16C	1,450.	0.	0.	1,450.
FORM 990-PF	TAX	ES	Sī	'ATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	CHARITABLE
FEDERAL	5,868.	0.	0.	5,868.
TO FORM 990-PF, PG 1, LN 18	5,868.	0.	0.	5,868.
FORM 990-PF	F OTHER EXPENSES		STATEMENT 7	
DESCRIPTION		(B) NET INVEST- MENT INCOME		
STATE FILING FEES PROGRAM SUPPORT	155. 32,000.		0.	0. 32,000.
TO FORM 990-PF, PG 1, LN 23	32,155.	0.	0.	32,000.

#### **EXPLANATION**

NO REGISTRATION REQUIRED IN NEVADA