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Form 990-PF

**Return of Private Foundation** 

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

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

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

Depa	rtmen	t of the Treasury	► Into			social security numbers on m 990-PF and its separate				2017
		venue Service	or tax year begin		10001101	m 660-11 and its separate	, and e		o.gov, rorm.coop	Open to Public Inspection
		foundation	or tax your bogin	·····9			, 4		A Employer identification	number
			ILY FOUN			· · · · · · · · · · · · · · · · · · ·			35-2124850	
		ind street (or PO to 50 N GR	box number if mail is AY RD	not deliver	ed to street	address)		Room/suite	317-848-404	10
		own, state or pr MEL, IN	ovince, country, a			ostal code			C If exemption application is pe	nding, check here
		all that apply	Initial	return		Initial return of a fo	ormer public o	charity	D 1. Foreign organizations,	check here
				ss chang		Amended return Name change			Foreign organizations mee check here and attach con	ting the 85% test,
H	_	type of organiz	zation XS ) nonexempt cha			empt private foundation Other taxable private founda	ation		E If private foundation state under section 507(b)(1)(	
	ır ma	arket value of all	assets at end of		Account	ng method X Cash	Acci	rual	F If the foundation is in a 6	0-month termination
	om I ·\$	Part II, col. (c),	601,04			ther (specify) mn (d) must be on cash i	basis.)		under section 507(b)(1)(	B), check here
Pa	irt l	The total of amo	evenue and Experiments in columns (b), all the amounts in columns.	(c), and (d)	may not	(a) Revenue and expenses per books		ivestment ome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1		gifts, grants, etc			601,228.			N/A	
	3	Interest on saving cash investments	if the foundation is not re gs and temporary s	equired to attac	ch Sch B	20.		20.		STATEMENT 1
	4		interest from sec	urities				<del></del>		
	l .	Gross rents Net rental income	e or (loss)					·····		······································
e	۱ ـ		from sale of assets r			125,653.				
Revenue	b   7	assets on line 6a	ncome (from Part IV,	301,0	120.		12	5,653.	<u> </u>	
æ	8	Net short-term			RE					41'
	9 10a	Income modifi Gross sales less and allowances		ြု				······································		······
		Less Cost of goo	ods sold	ò	MAY	1 2 (* 2015 - 121				<del>- 11 - 11 - 11 - 11 - 11 - 11 - 11 - 1</del>
	C	Gross profit or	(loss)	1,		<u> </u>   <u> </u>   <u> </u>				
	11	Other income	d 46		OG	JEN,726,901.	12	5,673.		······
	12 13		es 1 through 11 f officers, directors, t		tall, planterment	0.	12	0.		0.
	14	•	e salaries and wa	•	•					
	15		, employee benefi	•						
ses	16a	Legal fees								
Operating and Administrative Expenses	b	Accounting fee	es	STMT	r 2	827.		414.		413.
Ĕ		Other profession	onal fees							
ţį	17	Interest					<u></u>			
stra	18	Taxes								
Ë	19	Depreciation a	na aepietion							
μþ	20 21	Occupancy Travel confere	ences, and meetin	ac						
ē	22	Printing and pr		iys						
ā	23	Other expense		STMT	r 3	20.		20.	1	0.
atin	24		g and administra							
per	-	·-	d lines 13 through			847.		434.		413.
Õ	25	-	gifts, grants paid			30,089.				413. 30,089.
	26	Total expense	s and disbursem	ents.						
		Add lines 24 a	nd 25			30,936.		434.	<u> </u>	30,502.
	27	Subtract line 2	6 from line 12			605.055				
	1		e over expenses and			695,965.		E 232	· · · · · · · · · · · · · · · · · · ·	<del>' '                         </del>
	l		nt Income (if negati		)-)		12	5,239.	N/A	
4235 11-2	j <b>C</b> 01		ncome (if negative, perwork Reducti		tion see	Instructions	L		IN/A	Form <b>990-PF</b> (2014)
11-2	4-14	LMA FOR Pa	ihai.Mair uanncti	UII ACL NO	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	matruvtion3.	1		g HV	runn <b>330-FF</b> (2014)

<b>P</b>	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	E	nd of ye	ear
Part	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value		(c) Fair Market Value
1	Cash - non-interest-bearing				
2	Savings and temporary cash investments	31,879.	601,04	2.	601,042
1	Accounts receivable ►				
	Less allowance for doubtful accounts ▶				
4	Pledges receivable ►				
	Less allowance for doubtful accounts ▶				
5	Grants receivable				
6	Receivables due from officers, directors, trustees, and other				·
•	disqualified persons				
7	· · · · · · · · · · · · · · · · · · ·			-	
'	Less allowance for doubtful accounts	İ		1	
2 8			· · · - · · · · · · · · · · · · · ·		
5   [					
9	Prepaid expenses and deferred charges				
108	Investments - U.S. and state government obligations		<del> </del>		
- 1	Investments - corporate stock				
1	Investments - corporate bonds			<del> </del>	
11	Investments - land buildings, and equipment basis	1			
	Less accumulated depreciation				
12	Investments - mortgage loans				
13	Investments - other		· · · · · · · · · · · · · · · · · · ·		
14	Land, buildings, and equipment, basis				
	Less accumulated depreciation				
15	Other assets (describe				
16	Total assets (to be completed by all filers - see the				
	instructions Also, see page 1, item I)	31,879.	601,04	2.	601,042
17	Accounts payable and accrued expenses	1,149.			
18	Grants payable				
19	Deferred revenue				
20 21	Loans from officers, directors, trustees, and other disqualified persons				
21	Mortgages and other notes payable				
22	Other liabilities (describe )				
23	Total liabilities (add lines 17 through 22)	1,149.		0.	
1-0	Foundations that follow SFAS 117, check here			_	
	and complete lines 24 through 26 and lines 30 and 31.				
3 24	Unrestricted				
24					
25	Temporarily restricted				
26	Permanently restricted  Foundations that do not follow SFAS 117, check here		••		
	,				
	and complete lines 27 through 31.			^	
24 25 26 27 28 29 30	Capital stock, trust principal, or current funds	0.		0.	
28	Paid-in or capital surplus, or land, bldg , and equipment fund	0.		0.	
29	Retained earnings, accumulated income, endowment, or other funds	30,730.	601,04		
30	Total net assets or fund balances	30,730.	601,04	2.	
				_	
31	Total liabilities and net assets/fund balances	31,879.	601,04	2.	····
art	Analysis of Changes in Net Assets or Fund Ba	lances			
		·- · · · · · · · · · · · · · · · · · ·			
	net assets or fund balances at beginning of year - Part II, column (a), line 3	0			20 -22
•	t agree with end-of-year figure reported on prior year's return)			1	30,730
Ente	r amount from Part I, line 27a		[	2	695,965
Othe	r increases not included in line 2 (itemize)			3	0.
Add	lines 1, 2, and 3		Į	4	726,695.
Decr	eases not included in line 2 (itemize)	SEE STA	TEMENT 4	5	125,653.
Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, coli	umn (b), line 30		6	601,042.
					Form <b>990-PF</b> (20

1 MODO	GAN FAMILY FOU				3 :	5-212	1850 p.	
	and Losses for Tax of		Income			<u> </u>	BOJO Pa	ige :
(a) List and descr	ibe the kind(s) of property sol rehouse, or common stock, 20	d (e g , real estate,		(b) How acquired P - Purchase D - Donation	(c) Date a (mo , da		(d) Date sold (mo , day, yr	
1a PUBLICLY TRADEI		<u> </u>		D				
b								
С								
d								
е					<u> </u>			
(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis pense of sale			in or (loss) (f) minus (	· ·	
a 301,028.			175,37	5.			125,65	3
b							- · ·	
C					<del> · · · · · · · · · · · · · · · · · ·</del>			
<u>d</u>		<del> </del>	<del></del> -—					_
e	n ann in aclumn (h) and augs	nd by the foundation	on 12/21/60		(I) Oning (On			
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exc	ess of col (I) ol (j), if any		(I) Gains (Co col (k), but no Losses (		-0-) or	
(,)	as 01 12/3 1/09	OVELO	(j), ii aliy				125,65	3
a						· · · ·	123,03	
<u>b</u>	· · · · · · · · · · · · · · · · · · ·			-				
d d					<del></del>			
е								_
2 Capital gain net income or (net cap	oital loss) {   If gain, also	enter in Part I, line 7 ter -0- in Part I, line 7	,	} 2			125,65	3
3 Net short-term capital gain or (loss if gain, also enter in Part I, line 8, of if (loss), enter -0- in Part I, line 8		(5) and (6)		}		N/A		
Part V Qualification U	nder Section 4940(e)	for Reduced	Tax on Net	Investment	Income			_
(For optional use by domestic private	·							
If section 4940(d)(2) applies, leave th	is part Dialik							
Was the foundation liable for the secti	on 4942 tax on the distributat	ole amount of any yea	ir in the base peri	od?			Yes X	No
f "Yes," the foundation does not quali								
1 Enter the appropriate amount in e			re making any en				(d)	
(a) Base period years Calendar year (or tax year beginnin	g in) Adjusted qualifyi	ng distributions	Net value of nor	(c) icharitable-use as:		Dıstrıbı col (b) dıvı	itión ratio ded by col. (c))	_
2013	· · · · · -	30,575.		46,4			.6581	
2012		40,722.		81,5			.4994	
2011		55,750.	_ <del></del>	129,0			.4321	
2010		85,750. 77,806.	<del></del>	198,6 206,0			.3775	
2009		11,000.		200,0	04.		•3773	4.
2 Total of line 1, column (d)					2		2.3989	9
3 Average distribution ratio for the 5 the foundation has been in existen		total on line 2 by 5, o	r by the number (	of years	3		.4798	0
Enter the net value of noncharitable	e-use assets for 2014 from Pa	art X, line 5			4		311,71	4
5 Multiply line 4 by line 3					5		149,56	0
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)				6		1,25	2
7 Add lines 5 and 6	. ,				7		150,81	
3 Enter qualifying distributions from	Part XII. line 4				8		30,50	

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

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	rt VI Excise Tax Based on Investment Income (Section 4940(a), 49	40(b), 4940(e), or	4948	- see ins	tru	ctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here   and enter "N/A" of	on line 1					
	Date of ruling or determination letter (attach copy of letter if necessary-sec						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 📖 and	d enter 1%	1		••••	2,5	05.
	of Part I, line 27b						
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, I	line 12, col (b) 丿					_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter	-0-)	2	ļ			0.
-	Add lines 1 and 2		3			2,5	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter	r -0-)	4			<del></del>	0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5		<del></del>	2,5	05.
6	Credits/Payments						
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a	<del></del>	_				
b	Exempt foreign organizations - tax withheld at source		4				
C	Tax paid with application for extension of time to file (Form 8868)		4				
d	Backup withholding erroneously withheld 6d	·	4				_
	Total credits and payments Add lines 6a through 6d		7				0.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here X if Form 2220 is attached		8_			<del></del>	31.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9			2,5	<u> 36.</u>
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	, <b>•</b>	10				
11	Enter the amount of line 10 to be Credited to 2015 estimated tax	Refunded -	11				
	rt VII-A Statements Regarding Activities	<del></del>		<del></del>			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	id it participate or interven	e in	-		Yes	
	any political campaign?			<b>—</b>	1a		X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see in:				1 b		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies	of any materials publish	ed or				
	distributed by the foundation in connection with the activities.					]	v
	Did the foundation file Form 1120-POL for this year?				1 C		X
đ	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.	<u>-</u>				
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax im	iposed on foundation					
	managers ►\$ 0.				,	1	х
	Has the foundation engaged in any activities that have not previously been reported to the IRS?			<del> </del>	2		
	If "Yes," attach a detailed description of the activities.	adialas of incorporation	•	1			
	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument,	, articles of incorporation,	UI		3	<u> </u>	х
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				4a		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?  If "Yes," has it filed a tax return on Form 990-T for this year?		N	. / 🖫 🗀	4b		<del></del> -
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		-		5		X
	If "Yes," attach the statement required by General Instruction T.				·····		
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either						
	By language in the governing instrument, or						
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions</li> </ul>	s that conflict with the sta	e law	]			
	remain in the governing instrument?	o that commot men the ota-			6	Х	[
	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Pai	rt II. col. (c). and Part X	V	<u>-</u>	7	Х	
•		, (-),			•		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)						
	IN						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gel	neral (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation			[ ;	8b	Х	<u> </u>
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942	(j)(3) or 4942(j)(5) for cal	endar				
	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete H				9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing the	ir names and addresses	<u> TMT</u>	5	10	Х	

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Pa	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► KRISTIN COYER Telephone no ►317-58			
	Located at ► 11250 NORTH GRAY ROAD, CARMEL, IN ZIP+4 ► 46	033	-97	03
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		<b></b>	
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A_	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,	-	Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 1). If "Yes," enter the name of the			
	foreign country			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	}		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?  N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2014?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
-	before 2014? Yes X No			
	If "Yes," list the years ▶			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	ļ		
	statement - see instructions ) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	<b>▶</b>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after	İ		
	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2014.)  N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		Х

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Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	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 (section	n 4945(e))?	Ye	es X No		
(2) Influence the outcome of any specific public election (see section 4955), o	or to carry on, directly or indire				
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Yı	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		C C		
4945(d)(4)(A)? (see instructions)			es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f		<b>□</b> ₩		
the prevention of cruelty to children or animals?			s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		in Regulations	N/A		1
section 53 4945 or in a current notice regarding disaster assistance (see instru				5b	
Organizations relying on a current notice regarding disaster assistance check h		and.			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		⊪eα J/A □ Υι	as 🗀 No		
expenditure responsibility for the grant?		'/A 11	18 NU		
If "Yes," attach the statement required by Regulations section 53.494s  6a Did the foundation, during the year, receive any funds, directly or indirectly, to					
a personal benefit contract?	Pay Pronnonna On		s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6b	ĺх
If "Yes" to 6b, file Form 8870.			ļ.		
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	s X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b	
Part VIII Information About Officers, Directors, Trust		nagers, Highl	У		
Paid Employees, and Contractors					
1 List all officers, directors, trustees, foundation managers and their	<del></del>	(a) Componentian	(d) Contributions to		
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	acco	Expense ount, other
	to position	enter -0-)	compensation	all	owances
CHARLES P. MORGAN	TRUSTEE				
11250 NORTH GRAY ROAD CARMEL, IN 46033	0.00	0.	0.		0.
ROXANNA L. MORGAN	TRUSTEE		0.	+	
11250 NORTH GRAY ROAD	INOUTED				
CARMEL, IN 46033	0.00	0.	О.		0.
CHRILLY IN 10000					
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	1 .	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit plans and deferred	acco	Expense ount, other
MONE	devoted to position		compensation	ali	owances
NONE					
		<u> </u>			<del></del>
	· · · · · · · · · · · · · · · · · · ·			-	
· · · · · · · · · · · · · · · · · · ·				-	
				l	
Total number of other employees paid over \$50,000			<b>•</b>		0

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Part VIII	Information About Officers, Directors, Trustees, Foundat Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five high	est-paid independent contractors for professional services. If none, enter	NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
1	IONE		
Total number	of others receiving over \$50,000 for professional services		<u>▶</u>   0
<del> </del>	Summary of Direct Charitable Activities		<del></del>
number of or	ation's four largest direct charitable activities during the tax year. Include relevant statistic janizations and other beneficiaries served, conferences convened, research papers produ	al information such as the ced, etc	Expenses
11	I/A		
<u> </u>			_
2		<u> </u>	1
			1
3			
			]
4			-
			-
Part IX-F	Summary of Program-Related Investments		
Describe the	wo largest program-related investments made by the foundation during the tax year on life	nes 1 and 2	Amount
	I/A		
			]
2			
			1
All other prog	ram-related investments. See instructions		
			-
Total. Add I	nes 1 through 3	<b>•</b>	0.

Form **990-PF** (2014)

P	Minimum Investment Return (All domestic foundations must complete this part.	Foreign foundations, se	ee 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	0.
	Average of monthly cash balances	1b	316,461.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	316,461.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	0.	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	316,461.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	4,747.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	- 5	311,714.
6	Minimum investment return. Enter 5% of line 5	6	15,586.
P	foreign organizations check here and do not complete this part.)	undations and certain	
1	Minimum investment return from Part X, line 6	1	15,586.
2a	Tax on investment income for 2014 from Part VI, line 5	2,505.	
b			
	Add lines 2a and 2b	2c	2,505.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	13,081.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	13,081.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	13,081.
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		20 502
a		<u>1a</u>	30,502.
b		1b	<u> </u>
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	
þ	•	3b	20 502
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	30,502.
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	30,502.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	foundation qualifies for t	he section

Form **990-PF** (2014)

4940(e) reduction of tax in those years

Page 9

Part XIII Undistributed Income (see instructions)

,	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI,				
line 7				13,081.
2 Undistributed income, if any, as of the end of 2014	<del>                                      </del>	**************************************	***************************************	
a Enter amount for 2013 only			0.	
b Total for prior years	······································			
		0.		
3 Excess distributions carryover, if any, to 2014				
a From 2009 67,504.				
b From 2010 75,818.				,
c From 2011 49,300.				
d From 2012 36,647.				
e From 2013 28,252.				
f Total of lines 3a through e	257,521.			
4 Qualifying distributions for 2014 from				
Part XII, line 4 $\triangleright$ \$ 30,502.				
a Applied to 2013, but not more than line 2a	HH4114		0.	<u> </u>
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		<del> </del>
c Treated as distributions out of corpus				
(Election required - see instructions)	0.	<del>''                                   </del>		
d Applied to 2014 distributable amount	15 401			13,081.
e Remaining amount distributed out of corpus	17,421.	··· • • • • • • • • • • • • • • • • • •		
5 Excess distributions carryover applied to 2014 (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:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	274,942.			
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		0.		
assessed d Subtract line 6c from line 6b Taxable				······································
amount - see instructions		0.		
e Undistributed income for 2013 Subtract line				
4a from line 2a Taxable amount - see instr			0.	
1 Undistributed income for 2014 Subtract	······································	······································		
lines 4d and 5 from line 1. This amount must				
be distributed in 2015				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.		1 111 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
8 Excess distributions carryover from 2009				
not applied on line 5 or line 7	67,504.		***************************************	
9 Excess distributions carryover to 2015.				
Subtract lines 7 and 8 from line 6a	207,438.		<del></del>	'i dai demodera mandala alamater
10 Analysis of line 9				
a Excess from 2010 75,818.				
b Excess from 2011 49,300.				
c Excess from 2012 36,647.				
d Excess from 2013 28,252.				
e Excess from 2014 17, 421.				Form 990-PF (2014)

art XIV Private Operating For a lifthe foundation has received a ruling or contact.		· · · · · · · · · · · · · · · · · · ·		N/A	<del></del>
foundation, and the ruling is effective for 2					
b Check box to indicate whether the foundat		•	In section	4942(j)(3) or 49	42(1)(5)
a Enter the lesser of the adjusted net	Tax year		Prior 3 years	<u> </u>	
income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c					
Complete 3a, b, or c for the					
alternative test relied upon a "Assets" alternative test - enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(1) Total support other than gross					
investment income (interest, dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization		_			
(4) Gross investment income					
art XV Supplementary Informat any time during the			if the foundatio	n had \$5,000 or mo	ore in assets
Information Regarding Foundation	Managers:	· · · ·			·· <del>·</del>
a List any managers of the foundation who h year (but only if they have contributed more	nave contributed more	than 2% of the total cor section 507(d)(2) )	tributions received by th	e foundation before the clos	se of any tax
EE STATEMENT 6					
b List any managers of the foundation who on other entity) of which the foundation has a	own 10% or more of th 10% or greater intere	ne stock of a corporation st	(or an equally large por	tion of the ownership of a pa	artnership or
HARLES P. MORGAN					
Information Regarding Contribution	n, Grant, Gift, Loan	, Scholarship, etc., F	rograms:		
Check here X if the foundation only the foundation makes gifts, grants, etc. (see	makes contributions e instructions) to indi	to preselected charitable viduals or organizations	organizations and does under other conditions,	not accept unsolicited requi complete items 2a, b, c, and	ests for funds If
a The name, address, and telephone numbe	r or e-mail address of	the person to whom app	lications should be addr	essed	
b The form in which applications should be s	submitted and informa	tion and materials they s	should include.		
c Any submission deadlines					

Part AV Supplementary Information			<del> </del>	
3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment		<u>-</u>
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
·····	or substantial contributor	recipient		
a Paid during the year				
SEE ATTACHED CONTRIBUTION SCHEDULE	NONE	CHARITY	MINSTRY DONATION	
VARIOUS		ļ	<u> </u>	30,089
			1	
Total	<u> </u>	1	<b>▶</b> 3a	30,089
b Approved for future payment		1		
a reproved for factore payment				
NONE				
		1		
	<u> </u>	<u> </u>		
Total			<b>▶</b> 3b	0

Form 990-PF (2014)

# Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelate	d business income		ded by section 512, 513, or 514	(e)
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclu- slon code	(d) Amount	Related or exempt function income
· ·	Code		COGE		
3					
b	}		<del> </del>		
<u> </u>					
d	· - · -	<u> </u>	ļ		
e			<del> </del>		
g Fees and contracts from government agencies			1		
2 Membership dues and assessments			<b> </b>		
3 Interest on savings and temporary cash			14	20.	
investments			14	20.	
4 Dividends and interest from securities		<del></del>	ļ		<del>AlaBarakaraharaharaharaharaharaharaharaharah</del>
5 Net rental income or (loss) from real estate			<del> </del>		
a Debt-financed property		<del> </del>	<u> </u>		<del></del>
b Not debt-financed property			ļ		
6 Net rental income or (loss) from personal					
property					
7 Other investment income		·	<b>!</b>		
8 Gain or (loss) from sales of assets other			1.0	105 650	
than inventory			18	125,653.	
9 Net income or (loss) from special events			ļ		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b			-		<del> </del>
C			<u> </u>		
d			-		
		0.	ļ	125 672	
12 Subtotal Add columns (b), (d), and (e)	<u> </u>	0.	Ц	125,673.	0. 125,673.
13 Total. Add line 12, columns (b), (d), and (e)				13	123,073.
(See worksheet in line 13 instructions to verify calculations.)					
				+ Durmaga	
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ex	emp	it Furposes	
					nnlishment of
Line No. Explain below how each activity for which incom	ne is reported i	ın column (e) of Part XVI-A			nplishment of
	ne is reported i	ın column (e) of Part XVI-A			nplishment of
Line No. Explain below how each activity for which incom	ne is reported i	ın column (e) of Part XVI-A			nplishment of
Line No. Explain below how each activity for which incom	ne is reported i	ın column (e) of Part XVI-A			nplishment of
Line No. Explain below how each activity for which incom	ne is reported i	ın column (e) of Part XVI-A			nplishment of
Line No. Explain below how each activity for which incom	ne is reported i	ın column (e) of Part XVI-A			nplishment of
Line No. Explain below how each activity for which incom	ne is reported i	ın column (e) of Part XVI-A			nplishment of
Line No. Explain below how each activity for which incom	ne is reported i	ın column (e) of Part XVI-A			nplishment of
Line No. Explain below how each activity for which incom	ne is reported i	ın column (e) of Part XVI-A			nplishment of
Line No. Explain below how each activity for which incom	ne is reported i	ın column (e) of Part XVI-A			nplishment of
Line No. Explain below how each activity for which incom	ne is reported i	ın column (e) of Part XVI-A			nplishment of
Line No. Explain below how each activity for which incom	ne is reported i	ın column (e) of Part XVI-A			nplishment of
Line No. Explain below how each activity for which incom	ne is reported i	ın column (e) of Part XVI-A			nplishment of
Line No. Explain below how each activity for which incom	ne is reported i	ın column (e) of Part XVI-A			nplishment of
Line No. Explain below how each activity for which incom	ne is reported i	ın column (e) of Part XVI-A			nplishment of
Line No. Explain below how each activity for which incom	ne is reported i	ın column (e) of Part XVI-A			nplishment of
Line No. Explain below how each activity for which incom	ne is reported i	ın column (e) of Part XVI-A			nplishment of
Line No. Explain below how each activity for which incom	ne is reported i	ın column (e) of Part XVI-A			nplishment of
Line No. Explain below how each activity for which incom	ne is reported i	ın column (e) of Part XVI-A			nplishment of
Line No. Explain below how each activity for which incom	ne is reported i	ın column (e) of Part XVI-A			nplishment of

Part XVII	Information Regarding Trar Exempt Organizations	sfers To a	nd Transa	ctions a	and Relation	ships With Nor	ncharitable	Э	
1 Did the o								Yes	No
	(other than section 501(c)(3) organizations) of								
	from the reporting foundation to a noncharita			<b>3</b>					
(1) Cash	1	,					1a(1)		Х
(2) Othe	r assets						1a(2)		X
<b>b</b> Other trai	nsactions								
(1) Sales	s of assets to a noncharitable exempt organiza	tion					1b(1)		X
(2) Puro	hases of assets from a noncharitable exempt	organization					1b(2)		Х
(3) Rent	al of facilities, equipment, or other assets						1b(3)		<u>X</u>
` '	nbursement arrangements						1b(4)		<u>X</u>
	ns or loan guarantees						1b(5)		<u>X</u>
	ormance of services or membership or fundra	-		•			1b(6)	-	X
•	of facilities, equipment, mailing lists, other asso		•				<u>  1c  </u>	<u> </u>	X
	wer to any of the above is "Yes," complete the es given by the reporting foundation. If the fou							sets,	
column (	d) the value of the goods, other assets, or sen	rices received			·	•			
(a) Line no	(b) Amount involved (c) Name o	f noncharitable	exempt organiz	ation	(d) Description	on of transfers, transaction	ns, and shanng ar	rangeme	nts
		N/A				·			
			<del></del>						
					_				
-					<del>- </del>				
						· · · · · · · · · · · · · · · · · · ·	<u></u>		
			<u> </u>					_	
<del></del>									
		<del>.</del>							
				<u> </u>	<del></del>				
					<u> </u>	<del>-</del>			
	indation directly or indirectly affiliated with, or			mpt organi	zations described				
	501(c) of the Code (other than section 501(c	)(3)) or in secti	on 527?				L Yes	X	No
b IT Yes, C	omplete the following schedule (a) Name of organization		(h) Tupo of ore	annization.		(a) Decorption of rel	letionehin		
	N/A		(b) Type of org	garrization		(c) Description of rel	iationship		
	N/A		<del></del>				······································		
			<del></del> -						
	-				<u> </u>	<del></del>			
Unde	r penalties of perjury, I declare that I have examined the	s retum, including	g accompanying so	hedules and	statements, and to th	e best of my knowledge	May the IDD		
Sign and b	elief it is true, correct, and complete Declaration of pr	eparer (other than		1	nation of which prepar	er has any knowledge	May the IRS return with the	e prepar	er
Here	Tofanna . 1100	far	/   <b>5</b> /1	0/15	TRUST	EE	shown below X Yes		]″No
Sigi	nature of officer or trustee	<del>/</del>	Date	<del></del>	Title				
	Print/Type preparer's name	Preparer's sig	gnature		Date	Check if	PTIN		<del></del>
	HOWARD M. COX, CPA,		, .		1.4	self- employed			
Paid	CMA, CIA	Howan	1 m. C	σχ	5/6/15		P01703		
Preparer	Firm's name SOMERSET CPA	S PC		•	•	Firm's EIN ► 20	0-17176	81	
Use Only		<del></del>							
	Firm's address ► 3925 RIVER			STE	300				
	INDIANAPOLI	S, IN	46240			Phone no 317	7-472-2		
							Form <b>99</b> 0	D-PF	(2014)

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

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

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

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>

OMB No 1545-0047

2014

Name of the organization

Employer identification number

1	MORGAN FAMILY FOUNDATION	35-2124850
Organization type (check	k one):	
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 charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
, ,	n is covered by the <b>General Rule</b> or a <b>Special Rule.</b> (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special F	tule See instructions.
General Rule		
•	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor.	, ,
Special Rules		
sections 509(a)( any one contribi	tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% suppo (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16: utor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amo EZ, line 1. Complete Parts I and II.	a, or 16b, and that received from
year, total contri	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from ibutions of more than \$1,000 <i>exclusively</i> for religious, charitable, scientific, literary, or eduly for cruelty to children or animals. Complete Parts I, II, and III.	•
year, contributio is checked, ente purpose. Do not	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from sons exclusively for religious, charitable, etc., purposes, but no such contributions totaled it er here the total contributions that were received during the year for an exclusively religious complete any of the parts unless the <b>General Rule</b> applies to this organization because able, etc., contributions totaling \$5,000 or more during the year	more than \$1,000. If this box us, charitable, etc.,
but it must answer "No"	n that is not covered by the General Rule and/or the Special Rules does not file Schedule on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its set the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	· · · · · · · · · · · · · · · · · · ·

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Employer identification number

#### MORGAN FAMILY FOUNDATION

35-2124850

Part I	Contributors (see instructions). Use duplicate copies of Part I	If additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CHUCK AND ROXANNA MORGAN  11250 N GRAY ROAD  CARMEL, IN 46033	\$\$.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll

Name of organization

Employer identification number

#### MORGAN FAMILY FOUNDATION

35-2124850

Part II	Noncash Property (see instructions). Use duplicate copies of Part II	If additional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	9100 SHS MUNDER VERACITY SMALL CAP VALUE	_	
		301,028.	07/08/14
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		  \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	
		_	

Name of organization Employer identification number MORGAN FAMILY FOUNDATION 35-2124850 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for Part III the year from any one contributor. Complete columns (a) through (e) and the following line entry For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this Info once) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (c) Use of gift (b) Purpose of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift from (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CASH	INVESTMENTS	STATEMENT 1	
SOURCE	(A REVE PER B	NUE NET	(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME	
FIRST MERCHANTS BANK NATIONAL FINANCIAL SERVICES, LLC		6.	6.		
TOTAL TO PART I, LINE 3		20.	20.		
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 2	
DESCRIPTION	(A) EXPENSES PER BOOKS		<ul> <li>ADJUSTED</li> </ul>	CHARITABLE	
ACCOUNTING FEES	827.	41	4.	413.	
TO FORM 990-PF, PG 1, LN 16B	827.	41	4.	413.	
FORM 990-PF	OTHER E	XPENSES		STATEMENT 3	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM	<ul> <li>ADJUSTED</li> </ul>	CHARITABLE	
BANK CHARGES	20.	2	0.	0.	
TO FORM 990-PF, PG 1, LN 23	20.	2	0.	0.	
FORM 990-PF OTHER DECREASE	ES IN NET AS	SETS OR FUN	D BALANCES	STATEMENT 4	
DESCRIPTION				AMOUNT	
DIFFERENCE BETWEEN FMV OF CONTRIBUTION AND BOOK VALUE				125,653.	
TOTAL TO FORM 990-PF, PART III, LINE 5				125,653.	

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT	5
NAME OF CONTRIBUTOR	ADDRESS		
CHARLES P. MORGAN	11250 NORTH GRAY ROAD CARMEL, IN 46033		
ROXANNA L. MORGAN	11250 NORTH GRAY ROAD CARMEL, IN 46033		
FORM 990-PF	PART XV - LINE 1A LIST OF FOUNDATION MANAGERS	STATEMENT	6

NAME OF MANAGER

CHARLES P. MORGAN ROXANNA L. MORGAN

# The Morgan Family Foundation, Inc. List of Charitable Contributions Tax Year 2014

Campus Crusade for Christ 8383 Craig Street, Suite 200 Indianapolis, IN 46250	1,000.00
Friends of the Good Samaritans P.O. Box 328 Stanford, KY 40484	1,000.00
Dallas Theological Seminary 3909 Swiss Avenue Dallas, TX 75204	2,000.00
Intervarsity Christian Fellowship 802 Mulberry Street Noblesville, IN 46060	9,000 00
Christian Foundation of Indiana 8445 Keystone Crossing Blvd, Suite 200 Indianapolis, IN 46240	5,000.00
CMF International 5525 E 82nd Street Indianapolis, IN 46250	3,000.00
Youth for Christ 6081 E 82nd Street, Suite 120 Indianapolis, IN 46250	5,000.00
Wheeler Mission 3208 E. Michigan Street Indianapolis, IN 46201	1,089.43
Verve 7850 Dean Martin Drive, Suite 503 Las Vegas, NV 89139	2,000.00
Young Lives Indianapolis P.O Box 520 Colorado Springs, CO 80901	1,000.00
Total contributions	30,089.43