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DLN: 93491042001126

OMB No 1545-0052

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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 instructions is at <u>www.irs.gov/form990pf</u>.

For calendar year 2014, or tax year beginning 10-01-2014 , and ending 09-30-2015

Nam	e of for	undation				A Employer id	entification numbe	er			
		AMILY FUND				88-0379711		-			
				· I =			mber (see instructioi				
		l street (or P O box number if mail is r F WILLIAM STREET NO 204	not delivered to street address	s) Room/suite				13)			
						(702) 841-0644	•				
		n, state or province, country, and ZIP o TY, NV 89701	r foreign postal code			C If exemption application is pending, check here					
G Ch	neck a	Il that apply Initial return	Initial return of a	former public charity	у	D 1. Foreign or	ganizations, check h	ere 🕨 🖵			
		Final return	A mended return				ganızatıons meeting				
			ge Name change			•	k here and attach co Indation status was t	mputation '			
		ype of organization 🔽 Sectior n 4947(a)(1) nonexempt charita			,		n 507(b)(1)(A), chec				
		ket value of all assets at end	J Accounting method			F If the founds	ation is in a 60-mont	h termination			
of y	ear (t	from Part II, col. (c),	Other (specify)				n 507(b)(1)(B), chec	. —			
		\$ 9,791,731	(Part I, column (d) mus	t be on cash basıs.)				<u> </u>			
Part I Analysis of Revenue ar total of amounts in columns (b), (c), necessanly equal the amounts in colu instructions))		necessarily equal the amounts in c	c), and (d) may not	(a) Revenue and expenses per books	(b) N	et investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)			
	1	Contributions, gifts, grants, etc	c , received (attach								
		schedule)		100,909							
	2	Check ► ┌ If the foundation is	not required to attach								
		Sch B									
	3	Interest on savings and tempo									
	4	Dividends and interest from se	curities	378,627		378,627					
	5a .	Gross rents									
ф	b	Net rental income or (loss) Net gain or (loss) from sale of a	assets not on line 10	227,911							
Ē	6a b										
Revenue		Gross sales price for all assets 10,838,041	S OII IIIIe O d								
	7	Capital gain net income (from I				388,108					
	8	Net short-term capital gain .									
	9	Income modifications									
	10a	Gross sales less returns and allowances									
	ь	Less Cost of goods sold									
	c	Gross profit or (loss) (attach s	chedule)								
	11	Other income (attach schedule	e)								
	12	Total. Add lines 1 through 11		707,447		766,735					
	13	Compensation of officers, direc	·	0		0		0			
ωħ	14	Other employee salaries and w									
<u>Ş</u>	15	Pension plans, employee bene		6 400				400			
Expenses	16a	Legal fees (attach schedule). Accounting fees (attach sched		% 466 % 16,508		0		466 8,254			
	C	Other professional fees (attach	•	10,500		0		0,234			
₽	17	Interest									
Administrative	18	Taxes (attach schedule) (see i	instructions)	% 8,301		669		0			
12	19	Depreciation (attach schedule	•	·							
<u>Ē</u>	20	Occupancy									
Α	21	Travel, conferences, and meet	ıngs	38,252		0		38,252			
and	22	Printing and publications									
Ē	23	Other expenses (attach sched		55,844		55,505		339			
atii	24	Total operating and administra									
Operating and		Add lines 13 through 23		119,371		56,174		47,311			
0	25	Contributions, gifts, grants pai		788,100				788,100			
	26	Total expenses and disburseme	ents. Add lines 24 and	907,471		56,174		835,411			
	27	Subtract line 26 from line 12									
	a	Excess of revenue over expens		-200,024							
	Ь	Net investment income (if nega				710,561					
	_ c	Adjusted net income (If negative			<u> </u>			000 PE (2014)			

1 Cesh-mon interest-bearing	Рa	rt II	Ralance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	
2 Savings and temporary cash investments 3 Accounts receivable ▶ 56,832 55,832			Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
A Accounts receivable ► \$6,822 Less allowence for doubtful accounts ► \$6,822 Less allowence for doubtful accounts ► \$6,823 A Pledges receivable ■ \$6,823 B Grants receivable \$6 Receivable due from officers, directors, trustees, and other disquelinde persons (cathes schedule) \$6 Receivable due from officers, directors, trustees, and other disquelinde persons (cathes schedule) \$6 Receivable due from officers, directors, trustees, and other disquelinde persons (cathes schedule) \$6 Perpand expenses and deferred charges \$10 Investments—Organized stock (patch schedule) \$170,300 \$1 142,690 \$1,203,600 \$1 142,690			-	829,087	437,752	437,752
Less allowance for doubtful accounts ▶			•			
Pledges receivable		3				
Less allowance for doubtful accounts 5				56,832	56,832	
S Grants receivable Receivables due from officers, directors, trustees, and other disqualided persons (attach schedule) 100		4				
6 Receivables due from officers, directors, trustees, and other disqualified persons (statch schedule) See instructions)			Less allowance for doubtful accounts 🟲			
7 Other notes and loans receivable (ettech schedule)		5				
7 Other notes and loans receivable (attach schedule)		6	Receivables due from officers, directors, trustees, and other			
Less allowance for doubtful accounts			disqualified persons (attach schedule) (see instructions)			
1		7	Other notes and loans receivable (attach schedule) 🟲			
Prepaid expenses and deferred charges			Less allowance for doubtful accounts 🟲			
17.3.20	2	8	Inventories for sale or use			
b Investments—corporate stock (attach schedule). 4,553,330	ŞΦ	9	Prepaid expenses and deferred charges			
1 Investments—corporate bonds (attach schedule) 629,190 1,203,626 1	4	10a	Investments—U S and state government obligations (attach schedule)	173,320	142,696	142,696
11 Investments—land, buildings, and equipment basis		b	Investments—corporate stock (attach schedule)	4,553,330	2,418,604	2,418,604
Less accumulated depreciation (attach schedule) 12 Investments—other (attach schedule) 13 Investments—other (attach schedule) 14 Land, buildings, and equipment basis Less accumulated depreciation (attach schedule) 15 Other assets (describe 16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item 1) 17 Accounts payable and accrued expenses 18 Grants payable and accrued expenses 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe 23 Total liabilities (add lines 17 through 22) 24 Unrestricted 25 Foundations that follow SFAS 117, check here 26 Foundations that do not follow SFAS 117, check here 27 Foundations that do not follow SFAS 117, check here 28 Permanently restricted 29 Permanently restricted 20 Foundations that do not follow SFAS 117, check here 21 Foundations that do not follow SFAS 117, check here 22 Total liabilities and et assets or fund balances (see instructions) 28 Parl-in or capital surplus, or land, bildy, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 20 Total inet assets or fund balances (see instructions) 21 Total liabilities and net assets/fund balances (see instructions) 22 Total liabilities and net assets/fund balances (see instructions) 20 Total inet assets or fund balances (see instructions) 21 Total inet assets or fund balances (see instructions) 22 Total liabilities and net assets or fund balances (see instructions) 23 Total liabilities and net assets or fund balances (see instructions) 24 Add Innes 1,2, and 3 25 Enter amount from Part I, line 27a 26 10,942,333 27 Capital substructions 28 10,942,333 29 20,00,244 29 20 20,00,244 20 21 20,00,244 21 21 20,00,244 22 20 20,00,244 23 20 20,00,244 24 25 30 30 50 50 50,628		С	Investments—corporate bonds (attach schedule)	629,190	1,203,626	1,203,626
12 Investments—orthor (attach schedule) 13 Investments—other (attach schedule) 14 Land, buildings, and equipment basis Less accumulated depreciation (attach schedule) 15 Other assets (describe Less accumulated depreciation (attach schedule) 16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item 1 10,942,383 9,791,731 9,791,731 17 Accounts payable and accrued expenses 19 Deferred revenue 19 Deferred revenue 19 Deferred revenue 10 Deferred reven		11	Investments—land, buildings, and equipment basis ▶			
13 Investments—other (attach schedule)			Less accumulated depreciation (attach schedule) ▶			
Less accumulated depreciation (attach schedule) Less accumulated depreciation (attach schedule) 15 Other assets (describe Instructions Also, see page 1, item I) 10,942,383 9,791,731 9,791,731 17 Accounts payable and accrued expenses		12	Investments—mortgage loans			
Less accumulated depreciation (attach schedule) 15		13	Investments—other (attach schedule)	4,757,456	5,532,221	5,532,221
15		14	Land, buildings, and equipment basis 🟲			
Total assets (to be completed by all filers—see the instructions Also, see page 1, item I) 17 Accounts payable and accrued expenses			Less accumulated depreciation (attach schedule)			
Total assets (to be completed by all filers—see the instructions Also, see page 1, item I) 17 Accounts payable and accrued expenses		15	Other assets (describe 🕨)			
17 Accounts payable and accrued expenses			· · · · · · · · · · · · · · · · · · ·			
18 Grants payable 19 Deferred revenue 19 Deferred revenue 10 Loans from officers, directors, trustees, and other disqualified persons 10 Loans from officers, directors, trustees, and other disqualified persons 10 Loans from officers, directors, trustees, and other disqualified persons 10 Loans from officers, directors, trustees, and other disqualified persons 10 Loans from officers, directors, trustees, and other disqualified persons 10 Loans from officers, directors, trustees, and other disqualified persons 10 Loans from officers, directors, trustees, and other disqualified persons 10 Loans from officers, directors 10 Loans from officers 10 Loans 1			instructions Also, see page 1, item I)	10,942,383	9,791,731	9,791,731
19 Deferred revenue		17	Accounts payable and accrued expenses			
Total liabilities (add lines 17 through 22)		18	Grants payable			
Total liabilities (add lines 17 through 22)	φ	19	Deferred revenue			
Total liabilities (add lines 17 through 22)	₽	20	•			
22 Other liabilities (describe	ap	21				
Total liabilities (add lines 17 through 22)			•			
Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted			·	0	0	
and complete lines 24 through 26 and lines 30 and 31. Unrestricted						
Capital stock, trust principal, or current funds	es		·			
Capital stock, trust principal, or current funds	ınc	24	·	10,942,383	9,791,731	
Capital stock, trust principal, or current funds	39 E		•			
Capital stock, trust principal, or current funds	S		· · · ·			
Capital stock, trust principal, or current funds	nn		·			
Capital stock, trust principal, or current funds	ī.		·			
Total net assets or fund balances (see instructions)		27	·			
Total net assets or fund balances (see instructions)	set		•			
Total net assets or fund balances (see instructions)	ΑS					
Total liabilities and net assets/fund balances (see instructions)	¥		•	10,942,383	9,791,731	
Part IIIAnalysis of Changes in Net Assets or Fund Balances1Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)110,942,3832Enter amount from Part I, line 27a2-200,0243Other increases not included in line 2 (itemize)304Add lines 1, 2, and 3410,742,3595Decreases not included in line 2 (itemize)5950,628	Z		` ,		, ,	
Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	Dа			,,-	-,,	
with end-of-year figure reported on prior year's return)			, ,	(a) line 30 (must a	aree	
2 Enter amount from Part I, line 27a	-					10.942 383
3 Other increases not included in line 2 (itemize) ►	2					
4 Add lines 1, 2, and 3						
5 Decreases not included in line 2 (itemize) 5 950,628			· · · · · · · · · · · · · · · · · · ·			
					_ —	
v rotarnet assets or runu parances at enu oryear (inie 4 ininus inie 3)—rait 11, Columni (D). Ime 30 - 1 0 1 9./91./31	6		Total net assets or fund balances at end of year (line 4 minus line 5)—F			9,791,731

	the kınd(s) of property sold (e g , re ouse, or common stock, 200 shs M	ear estate,	(b) How acquired P—Purchase D—Donation	P—Purchase (C) Date acquired (a) Date soid				
1 a PUBLICLY TRADED	SECURITIES		Р					
b PUBLICLY TRADED	SECURITIES		P					
c								
d								
e								
	(f) Depreciation allowed	d (a) Cost o	r other basis	(h) Gain	or (loss)			
(e) Gross sales price	(or allowable)	107	ense of sale) minus (g)			
a 4,6	25,807		4,739,628	3	-113,821			
b 6,2:	12,234		5,710,305	5	501,929			
С								
d								
<u>е</u>								
	showing gain in column (h) and owne	d by the foundation o	n 12/31/69	(I) Gains (Col	(h) gaın mınus			
(i) F M V as of 12/31/69	(j) A djusted basis as of 12/31/69	(k) Exces	ss of col (ı) (j), ıf any	col (k), but not	less than -0-) or om col (h))			
a					-113,821			
b					501,929			
С								
d								
e								
3 Net short-term capita	ر al gaın or (loss) as defined ın section Part I, line 8, column (c) (see ınstru		J	3	388,108			
	Jnder Section 4940(e) for R							
(For optional use by domestic p	private foundations subject to the se	ection 4940(a) tax or	n net investment	income)				
If section 4940(d)(2) applies, I	leave this part blank							
Was the foundation liable for th	e section 4942 tax on the distributa ot qualify under section 4940(e) Do			eriod?	┌ Yes ┌ No			
1 Enter the appropriate amo	unt ın each column for each year, se	ee instructions before	making any enti	ries				
(a)		I		(d)				
Base period years Calendar	(b) Adjusted qualifying distributions	(c) Net value of noncharita	ible-use assets	Distribution				
year (or tax year beginning in)				(col (b) divided				
2013	162,259 283,919		7,665,432 5,492,577		0 021168			
2012	272,629		5,492,577		0 051691			
2011	272,029		5,024,612		0 045578			
2009	133,429		4,551,629		0 029315			
	n (d)			2	0 199700			
	ratio for the 5-year base period—div the foundation has been in existence			3	0 039940			
	f noncharıtable-use assets for 2014			. 4 10,303,38				
5 Multiply line 4 by line	23			5	411,517			
	stment income (1% of Part I, line 2)			6	7,106			
			_	7	418,623			
	ibutions from Part XII, line 4			8	835,411			
	greater than line 7, check the box i			_				

	990-PF (2014)			age 4
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst	ructio	ns)	
1a	Exempt operating foundations described in section 4940(d)(2), check here Fand enter "N/A"			
	Date of ruling or determination letter (attach copy of letter if necessary–see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		-	7,106
	here 🟲 🔽 and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0
3	Add lines 1 and 2		•	7,106
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			7,106
6	Credits/Payments			
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a			
b	Exempt foreign organizations—tax withheld at source 6b			
c	Tax paid with application for extension of time to file (Form 8868)6c			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d			0
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached.			160
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9			7,266
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10			
11	Enter the amount of line 10 to be Credited to 2015 estimated tax Refunded 11			
Par	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No
	ıt partıcıpate or ıntervene ın any political campaign?	1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions			
	for definition)?	1b		No
	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.			
	Did the foundation file Form 1120-POL for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation \$\bigs\\$ 0 (2) On foundation managers \$\bigs\\$ 0			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
_	on foundation managers \$ 0	_		NI-
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		No
_	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		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		No
_	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	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c),			
•	and Part XV	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney			
	General (or designate) of each state as required by General Instruction G? If "No," attach explanation 🎜	8b		No
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)			_
	or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)?			
	If "Yes," complete Part XIV	9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			
	and addresses.	10		No

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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►HTTP //MORRISFAMILYFUND ORG			
14	The books are in care of ▶DR DONALD MORRIS Telephone no ▶(510)	1697-	0122	
		0 3 7 -	0122	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here			
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over		Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial			
	Accounts (FBAR) If "Yes", enter the name of the foreign country 🟲			
Pai	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 dısqualıfıed 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? Yes V No			
	(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) A gree to pay money or property to a government official? (Exception. Check "No"			
	ıf the foundatıon agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days) Yes 🔽 No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	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		No
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))			
а	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?			
	If "Yes," list the years 🕨 20			
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 statement—see instructions)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20, 20, 20			
За	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 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.).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	al-		.
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		No

Pa	rt VII-B	Statements Rega	rdii	ng Activities for	W	nich Form 4720	May	Be Required (cont	inue	d)		
5a		e year dıd the foundatıo		_				•				
	(1) Carry	on propaganda, or othe	rwise	attempt to influence	e leg	ııslatıon (section 49	45(e	:)) [?]	√ No			
	(2) Influe	nce the outcome of any	spec	:ific public election (see	section 4955), or to	car	ry				
	on, dı	rectly or indirectly, any	vote	r registration drive?.				\ Yes \	- No			
	(3) Provid	de a grant to an individu	al for	travel, study, or oth	ners	ımılar purposes?		┌ Yes ┌	- No			
	(4) Provid	de a grant to an organiza	ation	other than a charita	ble,	etc , organization de	scrib	oed				
	ın sec	ction 4945(d)(4)(A)? (s	ee in:	structions)				\ Yes \	- No			
				han religious, charitable, scientific, literary, or								
								Yes 🗟	- No			
ь								exceptions described in				
								instructions)?		. 5b		
								.≻ ſ				
c	=	wer is "Yes" to question		= =								
		·		· ·		 Yes	- No					
		nttach the statement requ						·				
6a		undation, during the yea					prei	miums on				
		al benefit contract?							- No			
ь	· ·							benefit contract?		6b		No
If "Yes" to 6b, file Form 8870.												
7a												
	•					·		the transaction?		7b		
	11, 700, 410							n Managers, Highly			love	<u> </u>
Pa	rt VIII	and Contractors		, 2	-, .						, .	,
1	List all off	icers, directors, trustee	s, fo	undation managers a	nd t	heir compensation (see i	instructions).				
	1 * *		Title, and average		c) Compensation		(d) Contributions to	(e) Expense accoun			ount.	
	(a) Na	me and address	4	hours per week evoted to position	(If not paid, enter -0-)		mployee benefit plans I deferred compensation	other allowances			
DR D	ONALD MORR	IS PHD	+	SIDENT		0	-	0				
106	24 S EAST	ERN AVE A201	5 00)								
HEN	DERSON,	NV 89052										
DR A	NJALI MORRIS	S MD MPH	-	DIRECTOR		0		0				0
		ERN AVE A201	10 (00								
		NV 89052	<u> </u>				_					
	NITA MORRIS		JDIR 5 00	ECTOR	0		0				U	
		ERN AVE A201 NV 89052		,								
	N MORRIS		DIR	ECTOR		0		0				0
106	24 S EAST	ERN AVE A201	1 00				· ·				Ū	
		NV 89052										
2	Compensat	tion of five highest-paid	l emp	oloyees (other than	thos	e included on line 1–	-see	instructions). If none, e	nter"	NONE.	"	
,				(b) Title, and aver	age			(d) Contributions to	١,,	_		
(a		l address of each emplo [.] nore than \$50,000	yee	hours per week		(c) Compensatio	n	employee benefit plans and deferred		Expens ther all		
	para	11010 (11011 \$ 50,000		devoted to positi	on			compensation		ciici aii	ovidire	
иои	۱E											
]								
				1								
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				-								
		<u> </u>		<u> </u>		1		<u> </u>	<u> </u>			
ıota	ıı number o	f other employees paid o	ver	\$50,000					1			0

Part VIII Information About Officers, Directors, Transcription and Contractors (continued)	Paid Employees,	
3 Five highest-paid independent contractors for professional serv	ices (see instructions). If none, enter "NONE".	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional servi	ces	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct chantable activities during the tax year. Inclu	do relevant statistical information such as the number of	
organizations and other beneficiaries served, conferences convened, research paper		Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investmen		
Describe the two largest program-related investments made by the foundation d	luring the tax year on lines 1 and 2	A mount
1		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations. see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc. 1 purposes 1a 8.504.335 1h 1.955.957 1c 1d 10.460.292 Reduction claimed for blockage or other factors reported on lines 1a and 1e 2 2 3 3 Subtract line 2 from line 1d. 10.460.292 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see 4 156.904 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4. 5 10.303.388 5 515,169 **Distributable Amount** (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and Part XT certain foreign organizations check here $\blacktriangleright \Gamma$ and do not complete this part.) 515.169 1 Tax on investment income for 2014 from Part VI, line 5. 7.106 2a Income tax for 2014 (This does not include the tax from Part VI). . . Add lines 2a and 2b. 7.106 2c 3 3 508.063 4 Λ 4 5 5 508.063 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . 7 508.063 7 Part XIII Oualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 1 Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. 1a 835.411 1b 0 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. 2 2 3 Amounts set aside for specific charitable projects that satisfy the За. 3b 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 835,411 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 7,106 828,305 Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

the section 4940(e) reduction of tax in those years

For	m 990-PF (2014)				Page 9
Р	art XIII Undistributed Income (see instri	uctions)			
		(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1	Distributable amount for 2014 from Part XI, line 7	Corpus	rears prior to 2013	2013	508,063
	Undistributed income, if any, as of the end of 2014				,
	Enter amount for 2013 only			0	
b			0		
3	Excess distributions carryover, if any, to 2014				
a					
b					
c	From 2011				
ď	From 2012				
e	From 2013				
	Total of lines 3a through e	0			
	Qualifying distributions for 2014 from Part				
7	XII, line 4 > \$ 835,411				
а	Applied to 2013, but not more than line 2a			0	
	Applied to undistributed income of prior years		0		
U	(Election required—see instructions)				
	Treated as distributions out of corpus (Election	0			
·	required—see instructions)				
d	Applied to 2014 distributable amount				508,063
	Remaining amount distributed out of corpus	327,348			
	Excess distributions carryover applied to 2014	0			0
•	(If an amount appears in column (d), the				
	same amount must be shown in column (a).)				
6	Enter the net total of each column as				
_	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	327,348			
Ь	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)		0		
	tax has been previously assessed Subtract line 6c from line 6b Taxable amount				
a	—see instructions		0		
_	Undistributed income for 2013 Subtract line				
_	4a from line 2a Taxable amount—see				
	ınstructions			0	
f	Undistributed income for 2014 Subtract				
	lines 4d and 5 from line 1 This amount must				0
	be distributed in 2015				U
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may				
	be required - see instructions)	0			
8	Excess distributions carryover from 2009 not				
_	applied on line 5 or line 7 (see instructions)	0			
9	Excess distributions carryover to 2015.				
	Subtract lines 7 and 8 from line 6a	327,348			
10	Analysis of line 9				
а	Excess from 2010				
b	Excess from 2011				
	Excess from 2012				
d	Excess from 2013				
е	Excess from 2014 327,348				

P	art XIV Private Operating Four	ndations (see ir	nstructions and P	art VII-A, questic	on 9)	
.a	If the foundation has received a ruling or d		•			
	foundation, and the ruling is effective for 2	•	-			
b	Check box to indicate whether the organiza	ation is a private o	perating foundation	described in section	n 4942(j)(3) c	or 4942(J)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each	(a) 2014	(b) 2013	(c) 2012	(d) 2011	()
	yearlisted					
	85% of line 2a					
С	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					
е	Qualifying distributions made directly for active conduct of exempt activities					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon					
а	"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					
2=	(4) Gross investment income rt XV Supplementary Information	n (Complete t	 his part only if	the organization	n had \$5 000 (or more in
	assets at any time during			the organization	311 Huu \$3,000 \	or more m
	Information Regarding Foundation Manage					
а	List any managers of the foundation who habefore the close of any tax year (but only in				•	dation
	before the close of any tax year (but only h	i they have contrib	uteu more than \$5,	(Jee section	307 (d)(2))	
	See Additional Data Table					
b	List any managers of the foundation who ov				ly large portion of t	he
	ownership of a partnership or other entity)	of which the found	atıon has a 10% or	greater interest		
	Information Regarding Contribution, Grant	, Gift, Loan, Schol	arship, etc., Prograi	ms:		
	Check here F if the foundation only mal	ces contributions t	o preselected char	ıtable organizations	and does not acce	pt
	unsolicited requests for funds If the found	atıon makes gıfts,	grants, etc (see in	structions) to indivi	duals or organization	ons under
	other conditions, complete items 2a, b, c,	and d				
а	The name, address, and telephone number	or e-mail address	of the person to w	hom applications sh	ould be addressed	
	DR DONALD MORRIS 10624 S EASTERN AVE A201					
	HENDERSON, NV 89052					
	(510) 525-0122					
b	The form in which applications should be s	ubmitted and infor	mation and materia	ils they should inclu	de	
	BY LETTER INDICATING PURPOSE, PLA	N, AND PARTICI	PANTS, COPY OF	IRS EXEMPTION L	ETTER	
c	Any submission deadlines					
	NONE					
d	Any restrictions or limitations on awards,	such as by geogra	phical areas, charit	able fields, kinds of	institutions, or oth	er
	factors					
	NONE					

Part XV Supplementary Inform	nation (continued)			Page 1
3 Grants and Contributions Paid		proved for F	uture Payment	1
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year See Additional Data Table				
				788,10
b Approved for future payment	· ·			
		1	line ou	

Form 990-F						Page 12
	-A Analysis of Income-Produci			<u> </u>	F12 F12 F14	(-)
_	s amounts unless otherwise indicated	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	(e) Related or exempt function income (See instructions)
b c d						instructions)
g Fees a 2 Membe 3 Interes	and contracts from government agencies rship dues and assessments					
4 Dividends and interest from securities 5 Net rental income or (loss) from real estate a Debt-financed property				14	378,627	
8 Gain or invento 9 Net inc	7 Other investment income 8 Gain or (loss) from sales of assets other than inventory			18	227,911	
b c d						
12 Subtota 13 Total. A	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify c			1	606,538 L 3	•
Part XVI	Explain below how each activity for which the accomplishment of the foundation's instructions)	h income is re	ported ın column (e) of Part XVI-A c	ontributed importa	

Form 990-PI	F (2014)										Pa	ge 13
Part XVI	Information R Noncharitable					actio	ns and I	Relationships	With			
	organization directly or 1501(c) of the Code (oth	ndırectly e	ngage	ın any of	the following wit						Yes	No
organizat												
	s from the reporting fou											l
	h									1a(1)		No
	erassets		• •							1a(2)		No
b Other tra					_					41.74		
	es of assets to a noncha											No
	chases of assets from a											No No
	tal of facilities, equipme									1b(3)		No
	nbursement arrangeme ns or loan guarantees.									1b(5)		No
	ormance of services or r									1b(6)		No
	of facilities, equipment,									─		No
	swer to any of the above										luo	140
	ods, other assets, or se ansaction or sharing ari (b) Amount involved	angement,	show	ın column		the go	ods, other		es receive	ed		nts
	undation directly or ind d in section 501(c) of t	•			· ·		•	=		.Г _Ү е	s F	
b If "Yes,"	complete the following											
	(a) Name of organization	n		(1) Type of organiza	tion		(c) Descrip	tion of relati	onship		
the	der penalties of perjury best of my knowledge ormation of which prepa	and belief,	ıt ıs tr	ue, correc					n taxpaye	r) is bas	sed on	all
Here L	****				2016-02-10	, k	*****		return	IRS disc		
	Signature of officer or t	rustee			Date	_ ,	Title		below	tr)? 🔽 🕻		
	Print/Type preparer's WALTER TCHIRKII		Prepa	arer's Sıgn	ature	Date		Check if self- employed ▶	PTIN P	001740)14	
Paid Preparer	Firm's name ► RINA ACCOUNTANG	CY CORPO	RATIO	O N				Firm's EIN ► 94	 -315885	7		
Use Only	Firm's address 🕨											
Only	475 14TH STREET S 94612	UITE 120	0 OA	KLAND, C	CA			Phone no (510)893-690	08		

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

DR DONALD MORRIS PHD
DR ANJALI MORRIS MD MPH
DR ANITA MORRIS PHD
AADON MODDIS

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
ACLU FOUNDATION 125 BROAD STREET 18TH FLOOR NEW YORK,NY 10004	N/A	PC	GENERAL SUPPORT	5,000
BAY AREA RESCUE MISSION 2114 MACDONALD AVENUE RICHMOND,CA 94801	N/A	PC	GENERAL SUPPORT	500
BERKELEY COMMUNITY FUND 2320 SHATTUCK AVE BERKELEY,CA 94802	N/A	PC	GENERAL SUPPORT	4,000
BERKELEY EMERGENCY AND HOUSING PROJECT 2140 DWIGHT WAY BERKELEY,CA 94704	N/A	PC	FOOD	500
BERKELEY HILLEL 2736 BANCROFT WAY BERKELEY,CA 94704	N/A	PC	GENERAL SUPPORT	10,000
BIG BROTHERS & BIG SISTERS OF SFEASTBAY 7700 EDGEWATER DRIVE OAKLAND,CA 94621	N/A	PC	GENERAL SUPPORT	500
BRADY CENTER TO PREVENT GUN VIOLENCE 1225 EYE ST NW 1100 WASHINGTON, DC 20005	N/A	PC	GENERAL SUPPORT	1,000
DIRECT RELIEF 27 S LA PATERNA LANE SANTA BARBARA,CA 93117	N/A	PC	AUTISM DIAGNOSTIC CENTER PROJECT, DMHRC, PUNE, INDIA	265,000
DOCTORS WITHOUT A BORDER 333 7TH AVENUE 2ND FLOOR NEW YORK,NY 20001	N/A	PC	GENERAL SUPPORT	5,000
FAMILIES FOR CHILDREN INDIA 107 VELLALORE RD PODANUR, COILBATORE, CHENN 23 IN	N/A	FOREIGN CHARITY	GENERAL SUPPORT, EXTRA SP CARE PRESCHOOL	12,000
FOOD BANK OF ALAMEDA COUNTY PO BOX 24590 OAKLAND,CA 94623	N/A	PC	GENERAL SUPPORT	500
FOOD BANK OF CONTRA COSTA & SOLANO COUNTIES PO BOX 6324 CONCORD, CA 94524	N/A	PC	GENERAL SUPPORT	500
FRIENDS OF CHILDREN FUND (AMERICAN ACADEMY OF PEDIATRICS) 141 NORTHWEST POINT BLVD ELK GROVE VILLAGE,IL 60007	N/A	PC	GENERAL SUPPORT	500
FRIENDS WITHOUT A BORDER 1123 BROADWAY SUITE 1210 NEW YORK,NY 10010	N/A	PC	GENERAL SUPPORT	70,000
GIVE 2 ASIA FOUNDATION 340 PINE STREET SUITE 501 SAN FRANCISCO,CA 94104	N/A	PC	ADMIN EXPENSES, BOLD PROJECT	313,000
Total				788,100

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Name and address (home or business) any fo	ient is an individual, any relationship to undation manager stantial contributor	Foundation status of recipient	Purpose of grant or contribution	A mount
a Paid during the year GLIDE MEMORIAL CHURCH 330 ELLIS STREET SAN FRANCISCO, CA 94102 INTERNATIONAL DYSLEXIA ASSOCIATION 40 YORK RD 4TH FLOOR BALTIMORE, MD 21204 LAS LOMITAS EDUCATION FOUNDATION PO BOX 7282 MENLO PARK, CA 94026 MAHARASHTRA FOUNDATION PO BOX 2287 CHURCH STREET STATION NEW YORK, NY 10008 MEALS ON WHEELS ALAMEDA COUNTY PO BOX 2707 BERKELEY, CA 94702 MEALS ON WHEELS CONTRA COSTA COUNTY PO BOX 3195 MARTINEZ, CA 94553 NEW ISREAL FUND 1101 14TH ST N/A NW 6TH FLOR WASHINGTON, DC 20005 ORANGUTAN FOUNDATION 824 WELLESLEY AVE		ı recipient	i l	
GLIDE MEMORIAL CHURCH 330 ELLIS STREET SAN FRANCISCO, CA 94102 INTERNATIONAL DYSLEXIA ASSOCIATION 40 YORK RD 4TH FLOOR BALTIMORE, MD 21204 LAS LOMITAS EDUCATION FOUNDATION PO BOX 7282 MENLO PARK, CA 94026 MAHARASHTRA FOUNDATION PO BOX 2287 CHURCH STREET STATION NEW YORK, NY 10008 MEALS ON WHEELS ALAMEDA COUNTY PO BOX 2707 BERKELEY, CA 94702 MEALS ON WHEELS CONTRA COSTA COUNTY PO BOX 3195 MARTINEZ, CA 94553 NEW ISREAL FUND 1101 14TH ST N/A NW 6TH FLOR WASHINGTON, DC 20005 ORANGUTAN FOUNDATION 824 WELLESLEY AVE		·		
ELLIS STREET SAN FRANCISCO, CA 94102 INTERNATIONAL DYSLEXIA ASSOCIATION 40 YORK RD 4TH FLOOR BALTIMORE, MD 21204 LAS LOMITAS EDUCATION FOUNDATION PO BOX 7282 MENLO PARK, CA 94026 MAHARASHTRA FOUNDATION PO BOX 2287 CHURCH STREET STATION NEW YORK, NY 10008 MEALS ON WHEELS ALAMEDA COUNTY PO BOX 2707 BERKELEY, CA 94702 MEALS ON WHEELS CONTRA COSTA COUNTY PO BOX 3195 MARTINEZ, CA 94553 NEW ISREAL FUND 1101 14TH ST N/A NW 6TH FLOR WASHINGTON, DC 20005 ORANGUTAN FOUNDATION 824 WELLESLEY AVE				
ASSOCIATION 40 YORK RD 4TH FLOOR BALTIMORE, MD 21204 LAS LOMITAS EDUCATION FOUNDATION PO BOX 7282 MENLO PARK, CA 94026 MAHARASHTRA FOUNDATION PO BOX 2287 CHURCH STREET STATION NEW YORK, NY 10008 MEALS ON WHEELS ALAMEDA COUNTY PO BOX 2707 BERKELEY, CA 94702 MEALS ON WHEELS CONTRA COSTA COUNTY PO BOX 3195 MARTINEZ, CA 94553 NEW ISREAL FUND 1101 14TH ST NW 6TH FLOR WASHINGTON, DC 20005 ORANGUTAN FOUNDATION 824 WELLESLEY AVE		PC	GENERAL SUPPORT	1,000
FOUNDATION PO BOX 7282 MENLO PARK, CA 94026 MAHARASHTRA FOUNDATION PO BOX 2287 CHURCH STREET STATION NEW YORK, NY 10008 MEALS ON WHEELS ALAMEDA COUNTY PO BOX 2707 BERKELEY, CA 94702 MEALS ON WHEELS CONTRA COSTA COUNTY PO BOX 3195 MARTINEZ, CA 94553 NEW ISREAL FUND 1101 14TH ST NW 6TH FLOR WASHINGTON, DC 20005 ORANGUTAN FOUNDATION 824 WELLESLEY AVE		PC	GENERAL SUPPORT	1,600
BOX 2287 CHURCH STREET STATION NEW YORK, NY 10008 MEALS ON WHEELS ALAMEDA COUNTY PO BOX 2707 BERKELEY, CA 94702 MEALS ON WHEELS CONTRA COSTA COUNTY PO BOX 3195 MARTINEZ, CA 94553 NEW ISREAL FUND 1101 14TH ST NW 6TH FLOR WASHINGTON, DC 20005 ORANGUTAN FOUNDATION 824 WELLESLEY AVE		PC	GENERAL SUPPORT	1,000
COUNTY PO BOX 2707 BERKELEY, CA 94702 MEALS ON WHEELS CONTRA COSTA COUNTY PO BOX 3195 MARTINEZ, CA 94553 NEWISREAL FUND 1101 14TH ST NW 6TH FLOR WASHINGTON, DC 20005 ORANGUTAN FOUNDATION 824 WELLESLEY AVE		PC	DR A MORRIS FOUNDTION, FAMILY PLAN ASSOC OF INDIA, AND VANCHIT VIKAS	73,000
COSTA COUNTY PO BOX 3195 MARTINEZ, CA 94553 NEW ISREAL FUND 1101 14TH ST N/A NW 6TH FLOR WASHINGTON, DC 20005 ORANGUTAN FOUNDATION 824 N/A WELLESLEY AVE		PC	GENERAL SUPPORT	500
NW 6TH FLOR WASHINGTON, DC 20005 ORANGUTAN FOUNDATION 824 WELLESLEY AVE		PC	GENERAL SUPPORT	500
WELLESLEY AVE		PC	GENERAL SUPPORT	5,000
		PC	GENERAL SUPPORT	5,000
PARENTS CIRCLE AMERICAN FRIENDS OF 27 BAY STREET CAMBRIDGE, MA 02139		PC	GENERAL SUPPORT	500
PARTNERS FOR PROGRESSIVE N/A ISRAEL 114 W 26TH STREET NEW YORK,NY 10001		PC	GENERAL SUPPORT	5,000
RICHMOND EMERGENCY FOOD N/A PANTRY PO BOX 2598 EL CERRITO, CA 94530		PC	FOOD	500
SAVE THE CHILDREN 54 WILTON N/A RD WESTPORT,CT 06825		PC	GENERAL SUPPORT	500
SOUTHERN POVERTY LAW CENTER N/A 400 WASHINGTON AVE MONTGOMEREY, AL 36177		PC	GENERAL SUPPORT	1,000
THAT MAN MAY SEE 10 KORAT N/A WAY SAN FRANCISCO, CA 94143		PC	UCSFOPHTHAMOLOGY	1,000
TIDES CENTER PO BOX 10102 N/A OAKLAND, CA 94610		PC	SHALOM BAYIT DOMESTIC VIOLENCE AGENCY	3,000
Total				788,100

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

			• •	•
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
WOODSIDE PRIORY SCHOOL 302 PORTOLA ROAD PORTOAL VALLEY, CA 94028	N/A	PC	GENERAL SUPPORT	1,000
Total				788,100

TY 2014 Accounting Fees Schedule

Name: MORRIS FAMILY FUND

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	16,508	0		8,254

TY 2014 Explanation of Non-Filing with Attorney General Statement

Name: MORRIS FAMILY FUND

EIN: 88-0379711

Statement: NO REGISTRATION REQUIRED IN NEVADA

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491042001126

TY 2014 Investments Corporate Bonds Schedule

Name: MORRIS FAMILY FUND

Name of Bond	End of Year Book Value	End of Year Fair Market Value
WELLS FARGO CONSOLIDATED ACCOUNT	0	0
CYPRESS WEALTH ADVISORS	721,617	721,617
ATLANTIC TRUST INVESTMENT ADVISORS	482,009	482,009

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491042001126

TY 2014 Investments Corporate Stock Schedule

Name: MORRIS FAMILY FUND

Name of Stock	End of Year Book Value	End of Year Fair Market Value
WELLS FARGO CONSOLIDATED ACCOUNT	0	0
ATLANTIC TRUST INVESTMENT ADVISORS	2,418,604	2,418,604

DLN: 93491042001126 efile GRAPHIC print - DO NOT PROCESS As Filed Data -

0

TY 2014 Investments Government Obligations Schedule

Name: MORRIS FAMILY FUND

EIN: 88-0379711

US Government Securities - End of

Year Book Value: 142,696

US Government Securities - End of

Year Fair Market Value: 142,696

State & Local Government

Securities - End of Year Book

Value:

State & Local Government Securities - End of Year Fair

Market Value: 0

TY 2014 Investments - Other Schedule

Name: MORRIS FAMILY FUND

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
WELLS FARGO CONSOLIDATED ACCOUNT	FMV	0	0
MORGAN STANLEY LEVERAGED FUND II	FMV	285,245	285,245
CYPRESS WEALTH ADVISORS	FMV	3,030,403	3,030,403
ATLANTIC TRUST INVESTMENT ADVISORS	FMV	1,479,125	1,479,125
CYPRESS INTL EQUITY FUND LOW VOLUME II LP	FMV	496,467	496,467
CYPRESS INV FUNDS, LP HEALTHCARE	FMV	117,317	117,317
CYPRESS INV FUNDS, LP PIVOT POINT CAP	FMV	123,664	123,664

TY 2014 Legal Fees Schedule

Name: MORRIS FAMILY FUND

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	466	0		466

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TY 2014 Other Decreases Schedule

Name: MORRIS FAMILY FUND

Description	Amount
UNREALIZED GAIN / LOSSES	950,628

TY 2014 Other Expenses Schedule

Name: MORRIS FAMILY FUND

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEES	55,337	55,337		0
BANK FEES	140	0		140
FILING FEES	199	0		199
DEDUCTIONS FROM PASSTHROUGH	168	168		0

TY 2014 Taxes Schedule

Name: MORRIS FAMILY FUND

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES	669	669		0
FEDERAL EXCISE TAXES	7,632	0		0

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491042001126

OMB No 1545-0047

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

MORRIS FAMILY FUND

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

2014

Employer identification number

	88-0379711					
Organization type	(check one)					
Filers of:	Section:					
Form 990 or 990-E2	∑ 501(c)() (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
	anization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or erty) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
under secti received fr	anization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ /3% support test of the regulations ons 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that om any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990 e 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II					
during the y	anization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or yention of cruelty to children or animals. Complete Parts I, II, and III					
during the y this box is o purpose D	anization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 if checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., o not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively maritable, etc., contributions totaling \$5,000 or more during the year					

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization MORRIS FAMILY FUND **Employer identification number** 88-0379711

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed	<u> </u>	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PATRICK MONICA RHODES 10624 S EASTERN AVE A201 HENDERSON, NV 89052	\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	ANJALI MORRIS MD 10624 S EASTERN AVE A370 HENDERSON, NV 89052	\$10,000	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	ATRAYE AND SUBHRA BANERJEE 10624 S EASTERN AVE A201 HENDERSON, NV 89052	\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Name of organization **Employer identification number** MORRIS FAMILY FUND 88-0379711 Noncash Property (see instructions) Use duplicate copies of Part II if additional space is Part II (a) No. (c) (b) (d) from FMV (or estimate) Date received Description of noncash property given Part I (see instructions) \$ 70,909 282 SHARES OF TESLA MOTORS 2015-05-28 (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) \$ (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) \$ (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions)

Schedule	B (Form 990, 990-EZ, or 990-PF) (2014)			Page	
	organization			Employer identification number	
IORRISI	FAMILY FUND			88-0379711	
Part III		r from any one enter the total of instructions)►	e contributor. Complete f exclusively religious, ch	•	
(a) No. from Part I	(b) Purpose of gift		c) Use of gift	(d) Description of how gift is held	
	Transferee's name, address, ar	•) Transfer of gift Relation	nship of transferor to transferee	
(-) 5:					
(a) No. from Part I	(b) Purpose of gift	(0	c) Use of gift	(d) Description of how gift is held	
) Transfer of gift		
-	Transferee's name, address, and ZIP 4		· —	nship of transferor to transferee	
(a) No.	(b) Purpose of gift	((c) Use of gift	(d) Description of how gift is held	
Part I					
	Transferee's name, address, ar	•	e) Transfer of gift Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(4	c) Use of gift	(d) Description of how gift is held	
	Transferee's name, address, and ZIP 4) Transfer of gift Relation	nship of transferor to transferee	