Form <b>990-PF</b>		Return of Private		0	OMB No 1545-0047
Department of the Treasury	Do not en	Section 4947(a)(1) Trust Treater social security numbers or ww.irs.gov/Form990PF for inst	n this form as it may be ma	ade public.	2019 Open to Public Inspecti
nternal Revenue Service or calendar year 2019 (		UN 1, 2019	, and ending	MAY 31, 2020	1 Open to Fubile mapees
Name of foundation	At the last saferrens	011 27	, mr	A Employer identification	number
_MORRISON F	OUNDATION TRUST	י		48-6268660	
•	ox number if mail is not delivered to str	·	Room/suite	B Telephone number	
P.O. BOX 7			Revenue Benina	(785) 827=	9331
SALINA, KS	ovince, country, and ZIP or foreig		ed US Bank • USB and	C If exemption application is pe	-
G Check all that apply:	Initial return Final return	Amended return	former public charity T 1 9 2020	D 1. Foreign organizations  2. Foreign organizations me	
	Address change	Name change	~	Foreign organizations me check here and attach con	mputation
H Check type of organiz		3) exempt private foundation	ggden, oT /)2	E If private foundation sta	. [
Section 4947(a)(1   Fair market value of all	) nonexempt charitable trust	Other taxable private found unting method: X Cash	Accrual	under section 507(b)(1)	• • •
(from Part II, col. (c), I	· · · -	Other (specify)	Accider	F If the foundation is in a under section 507(b)(1)	
	4,110,325. (Part I, c		sis.)	(-)(-)	
(The total of amo	evenue and Expenses ounts in columns (b), (c), and (d) may no al the amounts in column (a) )	t (a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions,	gifts, grants, etc., received	434,647.			
Interest on saving	if the foundation is not required to attach Sch. B is and temporary		17,367.	17,367.	STATEMENT
3 cash investments	•	17,367. 53,831.	53,831.	53,831.	STATEMENT
5a Gross rents	interest from securities	19,234.	5,901.	19,234.	STATEMENT
b Net rental income	or (loss) 19,234		-,		
68 Net gain or (loss):	from sale of assets not on line 10	<466,021.>			
b Gross sales price assets on line 6a	for all 672,415	•			
7 Capital gain net in	come (from Part IV, line 2)		0.	-	
8 Net short-term	. •		<u> </u>	0.	
9 Income modific		•			
10a and allowances  b Less Cost of goo	ds sold	+			
c Gross profit or					
11 Other income		360,167.	62,316.		STATEMENT
12 Total. Add line	s 1 through 11	419,225.	139,415.	450,599.	
1	officers, directors, trustees, etc	0.	0.	0.	
1	e salaries and wages		<del></del>	-	
15 Pension plans,	employee benefits			-	
16a Legal fees  b Accounting fee	s STMT 5	10,065.	10,065.	10,065.	
b Accounting fee c Other profession	·		20,636.	20,636.	
e 17 Interest					
18 Taxes	STMT 7	23,906.	1,469.	7,549.	
19 Depreciation ai	nd depletion				
19 Depreciation as					-
21 Travel, confere	nces, and meetings			<del>                                     </del>	
@ 00 Other everence	^	142.	0.	0.	
	g and administrative				
221	l lines 13 through 23	54,749.	32,170.	38,250.	
O 25 Contributions,		127,350.			127,35
	s and disbursements.	400.000	20.450	20.050	105.55
Add lines 24 ar		182,099.	32,170.	38,250.	127,35
27 Subtract line 2		237,126.			
	over expenses and disbursements	231,120.	107,245.	<del>                                     </del>	
	t income (if negative enter -0-)		101,243.	412,349.	<del> </del>

1

923501 12-17-19 LHA For Paperwork Reduction Act Notice, see instructions.

ГБ	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	f year
드	ar t	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	797,127.	664,017.	664,017.
	3	Accounts receivable >	• -		<u> </u>
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable >			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable	····		
		Less; allowance for doubtful accounts ▶ 0.	43,811.	43,811.	12,500.
ŧ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ä	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock STMT 9	1,713,618.	2,320,310.	2,926,353.
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans		404 450	404 450
	13	Investments - other STMT 10	982,170.	481,459.	481,459.
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation	05 006	05.006	05.006
		Other assets (describe OVERRIDING ROYALTY )	25,996.	25,996.	25,996.
	16	Total assets (to be completed by all filers - see the	2 560 500	2 525 502	4 110 205
		instructions. Also, see page 1, item I)	3,562,722.	3,535,593.	4,110,325.
		Accounts payable and accrued expenses			<u> </u>
	18	Grants payable	-		
ēs	19	Deferred revenue			
Liabilities		Loans from officers, directors, trustees, and other disqualified persons			<del></del>
Ē	21	Mortgages and other notes payable  Other liabilities (describe			
	22	Other Habilities (describe			<del>-</del>
	22	Total liabilities (add lines 17 through 22)	0.	0.	
	20	Foundations that follow FASB ASC 958, check here			i
		and complete lines 24, 25, 29, and 30.			
alances	24	Net assets without donor restrictions			
<u>la</u>	25	Net assets with donor restrictions			
		Foundations that do not follow FASB ASC 958, check here ▶ X			
Net Assets or Fund B		and complete lines 26 through 30.			ĺ
F	26	Capital stock, trust principal, or current funds	1,838,396.	1,838,396.	
Ş.	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
SSe	28	Retained earnings, accumulated income, endowment, or other funds	1,724,326.	1,697,197.	1
¥.	29	Total net assets or fund balances	3,562,722.	3,535,593.	
ž					}
	30	Total liabilities and net assets/fund balances	3,562,722.	3,535,593.	i
P	art	Analysis of Changes in Net Assets or Fund Ba	lances		
_				1 1	
		net assets or fund balances at beginning of year - Part II, column (a), line 2	29		2 560 500
	•	at agree with end-of-year figure reported on prior year's return)		1	3,562,722.
		amount from Part I, line 27a		2	237,126.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3	אנהאנה אמוד האני הדמים	DIDITATION 6	3,799,848.
		eases not included in line 2 (itemize) THE GREENWAY FO			264,255. 3,535,593.
0	ıotal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	iumm (D), ime 29		Form <b>990-PF</b> (2019)
					101111 000 1 1 (2019)

	RISON FOUNDATIO		1			4	0200	8660	Page 3
[Part][V] Capital Gains a	ind Losses for Tax on	Investment	Income			,			
(a) List and describe t 2-story brick wa	the kınd(s) of property sold (for e rehouse; or common stock, 200 s	xample, real esta shs. MLC Co.)	ite,	( <b>b)</b>     D	How acquired - Purchase - Donation		acquired day, yr.)	( <b>d)</b> Dat (mo., d	
18 PUBLICLY TRADE	SECURITIES				P				
b CAPITAL GAIN DI	STRIBUTION				P	T			
c LTCG FROM HALEY					P				
d LTCG FROM HALEY	7 #2				P				
е									
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				lain or (loss) s (f) minus (		
a 659,644.			1,138,43	6.				<478,	792.>
b 11,563.								11	,563.
c 354.									354.
d 854.									854.
e			-						
Complete only for assets showing	g gain in column (h) and owned b	y the foundation	on 12/31/69.				Col. (h) gaın		
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i)		•		not less than (from col. (f		
a	•	· · · · · · · · · · · · · · · · · · ·						<478,	792.>
b									,563.
C									354.
d									854.
e		<u> </u>							
2 Capital gain net income or (net cap	pital loss) { If gain, also en	nter in Part I, line -0- in Part I, line	7 : 7	}	2			<466,0	021.>
3 Net short-term capital gain or (los if gain, also enter in Part I, line 8, if (loss), enter -0- in Part I, line 8	column (c).	.,		}	3				0.
Part Va Qualification Ur	nder Section 4940(e) fo	r Reduced	Tax on Net	nve	stment In	come			
(For optional use by domestic private									
(i or optional doe by democrac private	Touristic Caspot to the sound				•,				
If section 4940(d)(2) applies, leave th	is part blank.								
Was the foundation liable for the secti If "Yes," the foundation doesn't qualify			•	od?				Yes	X No
1 Enter the appropriate amount in e	• • • • • • • • • • • • • • • • • • • •			itries.					
(a)	(b)			(c)		Ĭ		(d) ution ratio	
Base periód years Calendar year (or tax year beginnin	Admeted analytings	distributions	Net value of no			ts	Distribi (col. (b) divi	ution ratio ided by col.	(c))
2018		17,060.		4	,595,41	<del></del>	1		25473
2017		74,085.		5	,128,13	4.			33947
2016		42,724.			,188,68				56589
2015	2	21,413.		1				.14	15611
2014	i	29,064.		1	,665,67	2.		.0	77485
	•								
2 Total of line 1, column (d)						2		. 43	39105
3 Average distribution ratio for the 5	-vear hase period - divide the tota	al on line 2 by 5 (	or by the number	er of v	ears.				
the foundation has been in existen			.,,	u.,		3		.08	37821
the loandation has been in existen	oo ii iooo tilan o youro								
4 Enter the net value of noncharitable	e-use assets for 2019 from Part )	K, line 5				4	4	4,237	,083.
5 Multiply line 4 by line 3						5		372	,105.
6 Enter 1% of net investment income	e (1% of Part I, line 27b)					6_		1,	072.
7 Add lines 5 and 6						7		373	<u>,177.</u>
8 Enter qualifying distributions from	Part XII, line 4					8_		127	350.
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Part VI, li	ne 1b, and comp	lete that part using	g a 19	% tax rate.				

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	990-PF (2019) MORRISON FOUNDATION TRUST	<u>48-6</u>	<u> 268660</u>	)	Page 4	
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	<u> 1948 - s</u>	ee instru	ction	s)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	1 1				
	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 here and enter 1%	1		2,1	45.	
_	of Part I, line 27b					
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)				ļ	
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	2			0.	
3	Add lines 1 and 2	3		2,1	45.	
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-	5		2,1	45.	
6	Credits/Payments:					
-	2019 estimated tax payments and 2018 overpayment credited to 2019  6a 1,400				1	
	Exempt foreign organizations - tax withheld at source 6b 0				1	
	Compression of gameatons	<b>—</b> I			- 1	
					- 1	
				1,4	70	
	Total credits and payments. Add lines 6a through 6d	7		<u>+, =</u>	00.	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8		7	$\frac{0.}{45.}$	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			<del>1</del> ],	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
	Enter the amount of line 10 to be: Credited to 2020 estimated tax Refunded rt VII-A Statements Regarding Activities	11				
				TVes	No	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interve	ie in	<u> </u>	163	-	
	any political campaign?	_	18	+	X	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the def	inition	1 <u>b</u>	+	X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			1		
	distributed by the foundation in connection with the activities.			-		
	Did the foundation file Form 1120-POL for this year?		1c	+	X	
d	Enter the amount (If any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$ 0	<u>•</u>				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ► \$O.			-		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	┿	X	
	If "Yes," attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	or		-		
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3_	<del> </del>	X	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a_	X	<del> </del>	
	If "Yes," has it filed a tax return on Form 990-T for this year?		4b	X	<del> </del>	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	+	X	
	If "Yes," attach the statement required by General Instruction T			1		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			1		
	By language in the governing instrument, or				1	
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	te law		_	اـــا	
	remain in the governing instrument?		6	X	<u> </u>	
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	X	<u> </u>	
			ľ			
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.   NONE		<del></del> }			
h	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  SEE STATE	MENT	12 8b		X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for ca	lendar		T		
3	year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV	<del></del>	9	X		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10	T	X	,
	wind this personne deserting deserting out the territory and the territory attention of the territory and the territory		Form 99	0-PF		

orm 990-PF (2019 <b>Part VII-A</b>	MORRISON FOUNDATION TRUST  Statements Regarding Activities (continued)			_	
				Yes	No
11 At any time of	uring the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of				
-	o)(13)? If "Yes," attach schedule. See instructions		_11		X
	lation make a distribution to a donor advised fund over which the foundation or a disqualified person ha	d advisory privileges?			
	h statement. See instructions		12		X
13 Did the found	lation comply with the public inspection requirements for its annual returns and exemption application?		13	X	
	ess ► N/A				
		lephone no.▶ <u>(785)</u>	327-	933:	1
	1700 E. IRON, SALINA, KS	ZIP+4 ▶ <u>6</u>	740 <u>2</u>	-07	37
	(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			· / ¬ ▶	· []
	amount of tax-exempt interest received or accrued during the year	<b>▶</b> 15	N	/A	- N-
16 At any time of	uring calendar year 2019, did the foundation have an interest in or a signature or other authority over a	bank,		Yes	
-	other financial account in a foreign country?		16		Х
	uctions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the				
foreign coun	ry ▶ Statements Regarding Activities for Which Form 4720 May Be Require	ed		<u> </u>	
	720 if any item is checked in the "Yes" column, unless an exception applies.		1	Yes	No
	ear, did the foundation (either directly or indirectly).				
• •	n the sale or exchange, or leasing of property with a disqualified person?	Yes X No			
	money from, lend money to, or otherwise extend credit to (or accept it from)				
	hirled person?	Yes X No			
•	goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No			
	pensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No			
	any income or assets to a disqualified person (or make any of either available	<del></del>			
	enefit or use of a disqualified person)?	Yes X No			
	pay money or property to a government official? (Exception. Check "No"				
	indation agreed to make a grant to or to employ the official for a period after		İ		
terminat	ion of government service, if terminating within 90 days.)	Yes X No	ŀ		
b If any answe	is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations				
section 53.49	941(d)-3 or in a current notice regarding disaster assistance? See instructions	N/A	<u>1b</u>		
Organization	s relying on a current notice regarding disaster assistance, check here	▶□	1		
c Did the found	lation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not c	orrected	<b> </b>		
	st day of the tax year beginning in 2019?		10		Х
2 Taxes on fail	re to distribute income (section 4942) (does not apply for years the foundation was a private operating	foundation	1		
	ction 4942(j)(3) or 4942(j)(5)):		1		
	tax year 2019, did the foundation have any undistributed income (Part XIII, lines		'		
6d and 6e) fo	r tax year(s) beginning before 2019?	Yes X No			
If "Yes," list t					
-	years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating				
valuation of a	issets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "N		<del></del>		
	ee instructions.)	N/A	2b	$\vdash$	
c If the provisi	ons of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
3a Did the found	dation hold more than a 2% direct or indirect interest in any business enterprise at any time	_			
during the ye		X Yes No			
	have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified				
	e; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 494)				
	cquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use F				
	to determine if the foundation had excess business holdings in 2019.)	··	3b		X
	lation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X
	lation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charit	able purpose that	<u> </u>		
Dia the least	removed from jeopardy before the first day of the tax year beginning in 2019?				x

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0

Total number of other employees paid over \$50,000

Part VIII Information About Officers, Directors, Trustees, Foundation	on Managers, Highly	6866U Page 7
Paid Employees, and Contractors (continued)  3 Five highest-paid independent contractors for professional services. If none, enter "	NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
	(B) Type of Service	(c) compensation
NONE	-	
<del></del>	<del> </del>	_ <del></del>
<del></del>	-	
<u></u>	<del> </del>	
	_	1
	4	
<u></u>		
<u></u>		
Total number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities		<b>▶</b> 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic	eal information such as the	
number of organizations and other beneficiaries served, conferences convened, research papers produc	ed, etc.	Expenses
1 N/A		<u></u>
2		
*		
3	-	<del></del>
×		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lin	ies 1 and 2.	Amount
1N/A		
2		
		<del></del>
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	<b>•</b>	0.
		Form <b>990-PF</b> (2019)

Page 8

Pa	IT X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
	Average monthly fair market value of securities	1a	3,590,970.
	Average of monthly cash balances	1b	684,641.
	Fair market value of all other assets	10	25,996.
-	Total (add lines 1a, b, and c)	1d	4,301,607.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
	Acquisition indebtedness applicable to line 1 assets	2	0.
	Subtract line 2 from line 1d	3	4,301,607.
-	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	64,524.
	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,237,083.
	Minimum investment return. Enter 5% of line 5	6	211,854
	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations at	nd certain	
	foreign organizations, check here 🕨 🗶 and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1_	
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c_from-line=1	3	
4	Recoveries of amounts treated as qualifying-distributions	4	
5	Add lines 3 and 4	5	<u> </u>
6	Deduction from-distributable amount (see instructions)	6	
<u></u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	<u> </u>
Pa	rt XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
8	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	127,350.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	<u> </u>
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
Ь	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	127,350.
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	127,350.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (4940(e) reduction of tax in those years.	qualifies fo	r the section

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**b** Excess from 2016 c Excess from 2017 d Excess from 2018 e Excess from 2019

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Form **990-PF** (2019)

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

ORGANIZATIONS APPLYING FOR GRANTS MUST BE 501(C)(3) ORGANIZATIONS.

c Any submission deadlines:

NO SUBMISSION DEADLINES

3 Grants and Contributions Paid During the Ye	ear or Approved for Future	Payment		
Recipient	If recipient is an individual.		Durance of great ar	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
AMERICAN CANCER SOCIETY	NONE	PUBLIC	FOR USE IN CHARITABLE	
WICHITA, KS 67202				400.
CENTRAL KANSAS FOUNDATION SALINA, KS 67401	NONE	PUBLIC	FOR USE IN CHARITABLE ACTIVITIES	500.
CHILD ADVOCACY & PARENTING SERVICES SALINA, KS 67401	NONE	PUBLIC	FOR USE IN CHARITABLE ACTIVITIES	500.
DELTA UPSILON EDUCATIONAL FOUNDATION INDIANAPOLIS, IN 46268	NONE	PUBLIC	FOR USE IN CHARITABLE	500.
DOMESTIC VIOLENCE ASSOCIATION OF CENTRAL KANSAS	NONE	PUBLIC	FOR USE IN CHARITABLE	
SALINA, KS 67401	<u></u>			500.
Total SEE CON	TINUATION SHEE	<u>T(\$)</u>	<b>▶</b> 3a	127,350.
<b>b</b> Approved for future payment				
NONE				
	-			
Total			<b>&gt;</b> 3b	0.
			F	orm <b>990-PF</b> (2019)

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated t	ousiness income		ed by section 512, 513, or 514	(e)
Elitor gross amounts amous strict most markets.	(a) Business	(b)	(c)	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a					
b					
С					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	17,367. 53,831.	
4 Dividends and interest from securities			14	53,831.	
5 Net rental income or (loss) from real estate:			$\longmapsto$		
a Debt-financed property					
b Not debt-financed property	531120	13,333.	01	5,901.	<del> </del>
6 Net rental income or (loss) from personal					
property					
7 Other investment income	531120	233,773.	01	62,316.	·
8 Gain or (loss) from sales of assets other			امدا	466 001	
than inventory	-		18	<466,021.>	<del></del>
9 Net income or (loss) from special events	ļ				<del></del>
10 Gross profit or (loss) from sales of inventory			$\vdash$		<del></del>
11 Other revenue:			01	64,078.	
8 FEDERAL TAX REFUND		-	1 0 1	04,070.	<u>.</u>
b			$\vdash$		<del> </del>
<u> </u>			$\vdash$		
d	•	<del></del>	$\vdash$		
e		247,106.	$\vdash$	<262,528.>	0.
13 Total. Add line 12, columns (b), (d), and (e)	LI	241,100.		13_	0. <15,422.>
(See worksheet in line 13 instructions to verify calculations.)				10	
					<del></del>
Part XVI-B Relationship of Activities	to tne Accom	plishment of Exe	empt	Purposes	
Line No. Explain below how each activity for which inc	ome is reported in c	column (e) of Part XVI-A	contribu	ited importantly to the accomp	lishment of
the foundation's exempt purposes (other than				. , ,	
		. <u>.</u> .			
					<del></del>
					<del></del>
	<u></u>				
		·			

923621 12-17-19

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c)

Yes No

#### Information Regarding Transfers to and Transactions and Relationships With Noncharitable |Part/XVII **Exempt Organizations**

(ot	her thai	n section 501(c)(3) organ	nizations) or in section 527, relati	ng to political organizations?				
a Tra	ansfers	from the reporting founda	ation to a noncharitable exempt o	organization of:				
(1)	Cash						1a(1)	X
(2)	Other	assets					1a(2)	X
b Otl	her tran	sactions:						37.59
(1)	Sales	of assets to a noncharital	ble exempt organization				1b(1)	X
(2)	Purch	nases of assets from a nor	ncharitable exempt organization				1b(2)	X
(3)	Renta	il of facilities, equipment,	or other assets				1b(3)	X
(4)	Reiml	bursement arrangements					1b(4)	X
(5)	Loans	s or loan guarantees					1b(5)	X
(6)	Perfo	rmance of services or me	embership or fundraising solicitat	tions			1b(6)	X
c Sh	aring of	f facilities, equipment, mai	uling lists, other assets, or paid e	mployees			1c	X
			"Yes," complete the following sci					
or	services	s given by the reporting fo	oundation. If the foundation recei	ived less than fair market value	in any transaction	or sharing arrangement,	show in	
col	<del></del>		other assets, or services received					
(a) Line n	10	(b) Amount involved	(c) Name of noncharitat		(d) Description	of transfers, transactions, and	sharing arrangemen	nts
	_		N/A		ļ			
					<u> </u>			
_					<del>-</del>			
					<u> </u>			
			ļ					
	_							
				<del>.</del>	<b>.</b>			
					ļ			
	_			······································	ļ			
					<del> </del>			
					<u> </u>			
	<u> </u>		<u> </u>					
		-	tly affiliated with, or related to, or	ne or more tax-exempt organiza	ations described	r		٦
			in 501(c)(3)) or in section 527?			l	Yes X	No
b If"	Yes," co	omplete the following sche		10.7			-i	
		(a) Name of org	janization	(b) Type of organization		(c) Description of relation	snip	
	_	N/A				<del> </del>	<del></del>	
					<del></del>	<del></del>	<del></del>	
				<del> </del>				
				<del>                                     </del>				
	Linda-	nenalties of persiant I dealers to	that I have examined this return, including	ng accompanying schedules and stat	ements, and to the hee	st of my knowledge —		
Sign	1 4		nplete Declaration of preparer (other the			s any knowledge	ay the IRS discuss t turn with the prepar	er
Here		Pet 1 /1-		10 113 000	Traste		nown below? See in:	- I
		The state of the s	uson	Oct / 3,2020	Title	<u></u>	X Yes	_ No
	Sign	nature of officer or trustee		Date '	Date	Check If PTIN		
		Print/Type preparer's na 	ame Preparer's	) IAC	Date	self- employed		
Paid		LODEN T 32	OTING POPEN	A JUNION I	10/09/20	` -	0005242	
Prep	arer	LOREN J. Y		ZV. ZOUNG / 1	10/09/20	Firm's EIN ▶ 48-0		
Use (		Firm's name ► KCO	E ISOM, LLP	- 0		rim s EIN F 40~U	501103	
J3E (	Jilly	Firm's address N 2 0	20 CODMI AND			<del></del>		
			30 CORTLAND LINA, KS 67402-	_1100		Dhoma = 1795 \	825-156	1
-		I SA	TINA, VP 0/407.	-1100			625-156 Form <b>990-PF</b>	
							FUIII 330-F1	(2019)

## 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.

➤ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

**2019** 

Employer identification number Name of the organization 48-6268660 MORRISON FOUNDATION TRUST Organization type (check one) Filers of: Sections 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** [X] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 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 received from 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, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't 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 990-PF, Part I, line 2, to

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Name of organization

Employer identification number

MORRI	SON FOUNDATION TRUST	48	-6268660
Part I	Contributors (see instructions). Use duplicate copies of Part I if addit	tional space is needed	· · ·
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	REBECCA MORRISON TRUST #1  P.O. BOX 737  SALINA, KS 67402-0737	\$434,647. 	Person X 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 Omnicash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
···			Person Payroll Oncash 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 Noncash (Complete Part II for noncash contributions)

- Name of organization

Employer identification number

ORRIS	SON FOUNDATION TRUST	48	-6268660
Part II	Noncash Property (see instructions) Use duplicate copies of Pa	rt 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
(a) No. rom	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
			<del></del>
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		<b>\$</b>	·
(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
_		*	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received

Part XV Supplementary Informatian Grants and Contributions Paid During the		<del></del>	<del></del>	
Recipient	If recipient is an individual,	Τ.		
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
FELLOW MAN INTERNATIONAL	NONE	PUBLIC	FOR USE IN CHARITABLE	6 000
SALINA, KS 67401				6,00
FIRST PREBYTERIAN CHURCH	NONE	PUBLIC	FOR USE IN CHARITABLE	
SALINA, KS 67401		+		52,000
IU FOUNDATION BLOOMINGTON, IN 47402	none	PUBLIC	FOR USE IN CHARITABLE ACTIVITIES	5,000
KANSAS DU EDUCATIONAL FOUNDATION INDIANAPOLIS IN 46268	NONE	PUBLIC	FOR USE IN CHARITABLE	1,000
KANSAS WESLEYAN UNIVERSITY SALINA, KS 67401	NONE	PUBLIC	ARTIST IN RESIDENCE	500
SALINA, NO 07401				300
KPTS WICHITA, KS 67203	NONE	PUBLIC	FOR USE IN CHARITABLE	25(
				<del></del>
MCPHERSON COLLEGE	NONE	PUBLIC	FOR USE IN CHARITABLE	50/
MCPHERSON, KS 67450		<del> </del>		500
RADIO KANSAS	NONE	PUBLIC	FOR USE IN CHARITABLE	
SALINA, KS 67401		<u></u>		500
ROLLING HILLS 200 SALINA, KS 67401	NONE	PUBLIC	FOR USE IN CHARITABLE ACTIVITIES	500
ROTARY INTERNATIONAL	NONE	PUBLIC	FOR USE IN CHARITABLE	
BUNKER HILL, KS 67626		J	1	500
Total from continuation sheets			i_	124,95

MORRISON FOUNDATION TRUST

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	
SALINA AREA UNITED WAY	NONE	PUBLIC	FOR USE IN CHARITABLE ACTIVITIES	
ALINA, KS 67401				6,50
SALINA CHILD CARE ASSOCIATION, INC.	NONE	PUBLIC	FOR USE IN CHARITABLE ACTIVITES	
ALINA, KS 67401				, 50
SALINA EDUCATION FOUNDATION SALINA, KS 67401	NONE	PUBLIC	FOR USE IN CHARITABLE	50
SALINA SYMPHONY	NONE	PUBLIC	FOR USE IN CHARITABLE ACTIVITIES	1 0/
SALINA, KS 67401				1,00
SALINE COUNTY COMMISSION ON AGING	NONE	PUBLIC	FOR USE IN CHARITABLE	24
SALINA, KS 67401				
SMOKY HILL MUSEUM	NONE	PUBLIC	FOR USE IN CHARITABLE	
SALINA, KS 67401				20
SMOKY HILL PUBLIC TELEVISION	NONE	PUBLIC	FOR USE IN CHARITABLE	
SALINA, KS 67401				20
STIEFEL THEATRE	NONE	PUBLIC	FOR USE IN CHARITABLE	
SALINA, KS 67401				3,00
SUNFLOWER ADULT DAY SERVICES SALINA, KS 67401	NONE	PUBLIC	FOR USE IN CHARITABLE ACTIVITIES	5(
PEEN TOWN, INC.	NONE	PUBLIC	FOR USE IN CHARITABLE	
SALINA, KS 67401			ACTIVITIES	5(
Total from continuation sheets				

MORRISON FOUNDATION TRUST

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Contribution	
CORONADO AREA COUNCIL	NONE	PUBLIC	FOR USE IN CHARITABLE	
BALINA, KS 67401				50
KU SCHOOL OF MEDICINE	NONE	PUBLIC	FOR USE IN CHARITABLE	
KANSAS CITY, KS 66160				25,00
THE TEMPLE	NONE	PUBLIC	FOR USE IN CHARITABLE	5 10
BALINA, KS 67401				5,10
SALVATION ARMY	NONE	PUBLIC	FOR USE IN CHARITABLE	5.0
SALINA, KS 67401		=		
KANSAS FOR HIGHER EDUCATION PAC	NONE	PUBLIC	FOR USE IN CHARITABLE	
KANSAS CITY, KS 66103				1,00
SALINA ART CENTER	NONE	PUBLIC	FOR USE IN CHARITABLE	
SALINA, KS 67401				7,50
WP4KU	NONE	PUBLIC	FOR USE IN CHARITABLE ACTIVITIES	
LAWRENCE, KS 66047				1,00
KU ENDOWMENT	NONE	PUBLIC	FOR USE IN CHARITABLE	
AWRENCE, KS 66047				50
TIEFEL THEATRE ENDOWMENT	NONE	PUBLIC	FOR USE IN CHARITABLE	
ALINA, KS 67401				4,00
Total from continuation sheets				

FORM 990-PF INTERE	ST ON SAVING	S AND TEMPOR	ARY CASH	INVESTMENTS	STATEMENT 1
SOURCE		(A) REVENUE PER BOOK		(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME
BENNINGTON STATE BA		17,3	49.	17,349.	17,349.
HALEY ASSOCIATES LT PARTNERSHIP			3.	3.	3.
HALEY ASSOCIATES LT PARTNERSHIP	dי		7.	7.	7.
HALEY COMMUNITIES L PARTNERSHIP	TD		8.	8.	8.
TOTAL TO PART I, LI	NE 3	17,3	67.	17,367.	17,367.
FORM 990-PF	DIVIDENDS .	AND INTEREST	FROM SEC	CURITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUI PER BOOI		
MIDWEST TRUST	53,831.	0.	53,8	53,8	31. 53,831.
TO PART I, LINE 4	53,831.	0.	53,83	53,8	53,831.
FORM 990-PF		RENTAL INCOM	E		STATEMENT 3
KIND AND LOCATION O	F PROPERTY			ACTIVITY NUMBER	
KIND AND LOCATION OF FROM K-1 HALEY ASSOFROM K-1 HALEY COMM	CIATES LTD P.		-1	<del>-</del>	

FORM 990-PF	OTHER I	NCOME	S	TATEMENT 4
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
ROYALTY PAYMENTS		9,012.	9,012.	9,012.
SECT 1231 GAIN FROM HALEY ASSOCIATES LTD PARTNERSHIP K-		58,375.	<17.>	58,375.
ORDINARY BUSINESS INCOME FROM ASSOCIATES LTD PARTNERSHIP K-1		<623.>	<623.>	<623.
SECT 1231 LOSS FROM HALEY COMMUNITIES K-1		228,623.	53,242.	228,623.
ORDINARY BUSINESS INCOME FROM COMMUNITIES K-1		1,089.	1,089.	1,089.
OTHER INCOME FROM HALEY COMMUNIK-1 FEDERAL TAX REFUND	NITIES	<387.> 64,078.	<387.> 0.	<387.> 64,078.
TOTAL TO FORM 990-PF, PART I,	LINE 11	360,167.	62,316.	360,167.
FORM 990-PF	ACCOUNTI	NG FEES	S	TATEMENT 5
				TATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING AND LEGAL	10,065.	10,065.	10,065.	0.
TO FORM 990-PF, PG 1, LN 16B	10,065.	10,065.	10,065.	0.
FORM 990-PF 07	THER PROFES	SIONAL FEES	S	TATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT FEES	20,636.	20,636.	20,636.	0.
TO FORM 990-PF, PG 1, LN 16C	20,636.	20,636.	20,636.	0.
<del></del>				

FORM 990-PF	TAX	ES	STATEMENT 7		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
PROPERTY TAXES FOREIGN TAXES OTHER TAXES FEDERAL TAXES	1,447. 22. 6,080. 16,357.	1,447. 22. 0. 0.	1,447. 22. 6,080. 0.	0. 0. 0.	
			<del></del>		
TO FORM 990-PF, PG 1, LN 18	23,906.	1,469.	7,549.	0.	
TO FORM 990-PF, PG 1, LN 18 =	23,906. OTHER E			0. PATEMENT 8	
=					
FORM 990-PF	OTHER E	XPENSES  (B)  NET INVEST-	(C) ADJUSTED	TATEMENT 8  (D)  CHARITABLE	

FORM 990-PF	CORPORATE STOCK		STATEMENT 9
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
CORPORATE STOCKS		2,320,310.	2,926,353
TOTAL TO FORM 990-PF, PART I	I, LINE 10B	2,320,310.	2,926,353.
FORM 990-PF	OTHER INVESTMENTS		STATEMENT 10
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
LIMITED PARTNERSHIPS	COST	481,459.	481,459.
TOTAL TO FORM 990-PF, PART I	T. LINE 13	481,459.	481,459

### MORRISON FOUNDATION TRUST

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FORM 990-PF	OTHER ASSETS		STATEMENT 11
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
OVERRIDING ROYALTY INTEREST	25,996.	25,996.	25,996.
TO FORM 990-PF, PART II, LINE 15	25,996.	25,996.	25,996.

FORM 990-PF E	EXPLANATION	CONCERNING	PART	VII-A,	LINE 8B	STATEMENT 12	2
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**EXPLANATION** 

NOT REQUIRED IN KANSAS

FORM 990-PF	PART XV - LINE 1A	STATEMENT 13
FORM 990-FF	LIST OF FOUNDATION MANAGERS	DIMIDMUT 13

NAME OF MANAGER

RICHARD MORRISON JEFFREY MORRISON MINDY MORRISON