EXTENDED TO NOVEMBER 16, 20 Return of Private Foundation 2020

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

Department of the	Treasur
Jaka 100	

Internal Revenue Serv

Do not enter social security numbers on this form as it may be made public. ► Go to www.irs gov/Form990PF for instructions and the latest information.

	OMB No 1545-0047
1912	2019 Open to Public Inspection

	Fore	aler	idar year 2019 or tax year beginning		, and en	ding		
	Nar	ne of	foundation				A Employer identificatio	n number
			MORNINGSIDE FOUNDATION	04-333957	2			
			and street (or P O box number if mail is not delivered to street	B Telephone number				
			8 CENTRE STREET	617-244-2	800			
			own, state or province, country, and ZIP or foreign p TON CENTRE, MA 02459		C If exemption application is	pending, check here		
			call that apply. Initial return	Initial return of a fo	ormer public of	narity	D 1 Foreign organization	os check here
	u	IIÇUR	Final return	Amended return	Jimoi public oi	idility	D 1 Toreign organization	is, check here
			Address change	Name change			2 Foreign organizations m check here and attach of	neeting the 85% test,
	H (heck	type of organization: X Section 501(c)(3) ex			(,
	Ϊ-	_	· —	Other taxable private foundation	ation	Od	E If private foundation st under section 507(b)(1	
	<u>⊸</u> L Fa		arket value of all assets at end of year J Account		Accru	ıal		
			·) —	ther (specify)	,,,,,,,,,,		F If the foundation is in a under section 507(b)(1	
	\		53,792,708. (Part I, colur		sis.)			T)(D), CHOOK HOLE
		rt l		(a) Revenue and	(b) Net inv	ectment	(c) Adjusted net	(d) Disbursements
			The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	inco		income	for charitable purposes (cash basis only)
		1	Contributions, gifts, grants, etc , received	77,134,951.			N/A	
		2	Check If the foundation is not required to attach Sch. B.	ļ				
		3	cash investments	4.		4.		STATEMENT 1
1 -		4	Dividends and interest from securities					<u> </u>
X		5a	Gross rents	1,754,558.	1,75	<u>4,558.</u>		STATEMENT 2
'Y		b	Net rental income or (loss) 298,989.					STATEMENT 3
•	ē	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all					
	Revenue	_ b	assets on line 6a					
	Re	7	Capital gain net income (from Part IV, line 2)	. Aury 133		0.		
		8 Net short-term capital gain Bacaived IIS I inn						
202		9	Income modifications Gross sales less returns					
20		10a	WI 117 -1 P	2020			·—	
œ			1044 V 1 1	. 2020				
8			Gross profit or (loss) Other income					
JAN		12	Total Add lines 1 through 11	7-7-81, 889, 513.	1 75	4,562.		
\rightarrow		13	Compensation of officers, directors, trustees, etc		1113	0.	· · · · · · · · · · · · · · · · · · ·	0.
8		14	Other employee salaries and wages				 -	
吳			Pension plans, employee benefits			-	·	
Z	es		Legal fees STMT 4	24,404.	24	4,404.		0.
	ens	b	Accounting fees STMT 5	25,000.		5,000.		0.
SCA	Expense		Other professional fees					
_		17						
	Administrative	18	Taxes STMT 6	3,869.		3,869.		0.
	list	19	Depreciation and depletion	490,205.	490	0,903.		
	Ē	20	Occupancy					
	Ad	21	Travel, conferences, and meetings					
	and	22	Printing and publications		<u> </u>			
	0	23	Other expenses STMT 7	958,169.	958	<u>3,169.</u>		0.
	aţi	24	Total operating and administrative					
	Operatin		expenses Add lines 13 through 23	1,501,647.	1,50	<u>2,345.</u>		0.
}	0	25	Contributions, gifts, grants paid	77,939,711.				77,939,711.
		26	Total expenses and disbursements	<u></u>				
40			Add lines 24 and 25	79,441,358.	1,50	<u>2,345.</u>		77,939,711.
5		27	Subtract line 26 from line 12					
		а	Excess of revenue over expenses and disbursements	<551,845.				
Ġ			Net investment income (if negative, enter -0-)		252	2,217.		
_		C	Adjusted net income (if negative, enter -0-)	1			N/A	

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

923511 12-17-19

Add lines 1, 2, and 3

4

55,853,299.

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3 Other increases not included in line 2 (itemize)

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29

Decreases not included in line 2 (itemize)

	and Losses for Tax the kind(s) of property sold			(b) F	low acqui	red () Date a	cquired	(d) Date sold
2-story brick warehouse; or common stock, 200 shs. MLC Co.)					- Purchasi - Donation	e '`	(mo., da		(mo., day, yr.)
1a NON	TP								
•	JE			-		 			
4									
<u>e</u>			· · · · · · · · · · · · · · · · · · ·	<u> </u>					
(e) Gross sales price	(f) Depreciation allower (or allowable)		st or other basis expense of sale			(in or (loss (f) minus (
<u>a</u> b									
			<u>. </u>						
4									
e			10/01/00						
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (i) Adjusted basis (k) Excess of col. (i)							ıl. (h) gaın ot less thaı		
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		col. (j), if any					from col. (
a									
b									-
c d				-					
d e				\dashv					
	_	so enter in Part I, line	7	٦					**************************************
! Capital gain net income or (net cap		enter -0- in Part I, line		<i>}</i>	2				
Net short-term capital gain or (loss		22(5) and (6):		٦					
If gain, also enter in Part I, line 8, on the state of th	olumn (c).			}	,				
Part V Qualification Ur	nder Section 4940	e) for Reduced	Tax on Net	Inve	estmer	nt Inco	me		
section 4940(d)(2) applies, leave thi Vas the foundation liable for the secti "Yes," the foundation doesn't qualify Enter the appropriate amount in ea	on 4942 tax on the distribu under section 4940(e). Do	not complete this par	t						Yes X No
(a) Base period years		(b)		(c)		-		Dietrih	(d) ution ratio
Calendar year (or tax year beginnin	9 '''/ <u>'</u>	ying distributions	Net value of no					col. (b) div	ided by col. (c))
2018	5:	1,679,250.			,602,				.78776
<u>2017</u> 2016		3,348,729. 2,163,714.	<u></u>		,929, ,209,				$\frac{1.05264}{1.14674}$
2015		1,973,558.			$\frac{205}{352}$				1.19541
2014		2,609,847.			,952,				1.16047
2 Total of line 1, column (d)							2		5.34303
Average distribution ratio for the 5 the foundation has been in existen		ne total on line 2 by 5.	0, or by the numb	er of y	ears		3		1.06860
Enter the net value of noncharitable	e-use assets for 2019 from	Part X, line 5					4	5	4,698,681
6 Multiply line 4 by line 3							5		8,451,393
Enter 1% of net investment income	e (1% of Part I, line 27b)						6		2,522
' Add lines 5 and 6	. ,						7	5	8,453,915
B Enter qualifying distributions from	Part XII. line 4						8		7,939,711
If line 8 is equal to or greater than See the Part VI instructions.		t VI, line 1b, and comp	plete that part usin	g a 1%	% tax rate.				. , , , , , , , , , , , , , , , , , , ,
923521 12-17-19			 					F	orm 990-PF (201

Form 990-PF (2019) THE MORNINGSIDE FOUNDAT Part VI Excise Tax Based on Investment Income (Se	04-3339572 Pa	ge 4
1a Exempt operating foundations described in section 4940(d)(2), check here)	" —
Date of ruling or determination letter: (attach copy		
b Domestic foundations that meet the section 4940(e) requirements in Part V, or	1 2,52	2
of Part I, line 27b	1 2,52	<u>4 •</u>
c All other domestic foundations enter 2% of line 27b. Exempt foreign organiza	,]	
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable found		0.
3 Add lines 1 and 2	3 2,52	<u></u>
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable found		0.
5 Tax based on investment income Subtract line 4 from line 3. If zero or less,	5 2,52	
6 Credits/Payments:	<u> </u>	<u></u>
a 2019 estimated tax payments and 2018 overpayment credited to 2019	,500.	
b Exempt foreign organizations - tax withheld at source	0.	
c Tax paid with application for extension of time to file (Form 8868)	0.	
d Backup withholding erroneously withheld	0.	
7 Total credits and payments. Add lines 6a through 6d	7 2,50	Λ.
8 Enter any penalty for underpayment of estimated tax. Check here if For		0.
		2.
	10	<u> </u>
	funded 11	
Part VII-A Statements Regarding Activities	unueu - 11	
1a During the tax year, did the foundation attempt to influence any national, stati	or intervene in Yes N	No
any political campaign?) 	X
b Did it spend more than \$100 during the year (either directly or indirectly) for		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities		
distributed by the foundation in connection with the activities.		
c Did the foundation file Form 1120-POL for this year?	1c 1	X
d Enter the amount (if any) of tax on political expenditures (section 4955) impo		
(1) On the foundation. > \$ 0 • (2) On foundation.	0.	
e Enter the reimbursement (if any) paid by the foundation during the year for p		
managers > \$ 0.		
2 Has the foundation engaged in any activities that have not previously been re		X
If "Yes," attach a detailed description of the activities.		
3 Has the foundation made any changes, not previously reported to the IRS, in	prporation, or	
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the		Х
4a Did the foundation have unrelated business gross income of \$1,000 or more	4a X	
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b X	
5 Was there a liquidation, termination, dissolution, or substantial contraction d		X
If "Yes," attach the statement required by General Instruction T		
6 Are the requirements of section 508(e) (relating to sections 4941 through 49		
By language in the governing instrument, or		
By state legislation that effectively amends the governing instrument so that	vith the state law	
remain in the governing instrument?		X
7 Did the foundation have at least \$5,000 in assets at any time during the year?		
8a Enter the states to which the foundation reports or with which it is registered	•	
DE, MA, CA		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 9	nate)	
of each state as required by General Instruction G? If "No," attach explanat	8b X	
9 Is the foundation claiming status as a private operating foundation within the		
year 2019 or the tax year beginning in 2019? See the instructions for Part XI	9	X_ (
10 Did any persons become substantial contributors during the tax year? If "Yes,	resses 10	X
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Part VII-B Statements Regarding Activities for which r	orm 4/20 May be F	tequirea (contini	uea)					
5a During the year, did the foundation pay or incur any amount to:)	es	No		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			s X No			•		
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,								
any voter registration drive?								
(3) Provide a grant to an individual for travel, study, or other similar purposes?		Ye	s X No	İ		•		
(4) Provide a grant to an organization other than a charitable, etc., organization	described in section							
4945(d)(4)(A)? See instructions			s X No					
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f							
the prevention of cruelty to children or animals?			s X No					
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		n Regulations	27 / 2		-			
section 53.4945 or in a current notice regarding disaster assistance? See instru			N/A	5b				
Organizations relying on a current notice regarding disaster assistance, check h								
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		. —						
expenditure responsibility for the grant?	N	I∕A ∐ Ye	s L No					
If "Yes," attach the statement required by Regulations section 53.4945-5(d)						ì		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on	 ,	l			•		
a personal benefit contract?		Ye	s X No			37		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a property of the property o	ersonal benefit contract?		-	6b		<u>X</u>		
If "Yes" to 6b, file Form 8870.			s X No					
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y6	—	75	-+			
b If "Yes," did the foundation receive any proceeds or have any net income attribu		_	N/A	7b				
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	1,000,000 in remuneration of		es X No					
excess parachute payment(s) during the year? Part VIII Information About Officers, Directors, Truste	sas Foundation Ma	Ye						
Paid Employees, and Contractors	· · · · · · · · · · · · · · · · · · ·	magers, riigilij						
1 List all officers, directors, trustees, and foundation managers and the		1	(al) a	1				
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans	(e	Expe	ense other		
, , , , , , , , , , , , , , , , , , , ,	to position	(If not paid, enter -0-)	and deferred compensation	a	llowan	ces		
	DIRECTOR							
C/O MCCARTHY LGL SVCS, 1188 CENTRE ST			_					
NEWTON CENTRE, MA 02459	0.00	0.	0.			0.		
	VICE-PRESIDEN	\mathbf{r}						
C/O MCCARTHY LGL SVCS, 1188 CENTRE ST						_		
NEWTON CENTRE, MA 02459	0.00	0.	0.	<u> </u>		0.		
	DIRECTOR							
C/O MCCARTHY LGL SVCS, 1188 CENTRE ST			_					
NEWTON CENTRE, MA 02459	0.00	0.	0.			0.		
2 Compensation of five highest-paid employees (other than those inc	luded on line 1\ If none	enter "NONE "						
2 Compensation of tive mignest-paid employees (other trial those me	(b) Title, and average	The state of the s	(d) Contributions to	(e) Expe	ense		
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deterred compensation	acc) Expe ount, llowan	other		
NONE	devoted to position		Compensation	 "	iowan			
NONE								
				 				
				T				
		•						
	<u> </u>			 	•			
	,		-	† -				
]						
Total number of other employees paid over \$50,000					•	0		
The state of the s			Form	990-	·PF (

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Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, en	ter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
MCCARTHY LEGAL SERVICES, LLC	PROPERTY MGMT, LEGAL	
1188 CENTRE STREET, NEWTON CENTRE, MA 02459	& ACCOUNTING	73,743.
Total number of others receiving over \$50,000 for professional services	_	0
Part IX-A Summary of Direct Charitable Activities	····	
List the foundation's four largest direct charitable activities during the tax year. Include relevant sta	tistical information such as the	Expenses
number of organizations and other beneficiaries served, conferences convened, research papers pr	oouced, etc.	
1 <u>N/A</u>		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2.	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.		
3		

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Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations mu	ist complete this part	Foreign four	idations,	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	, pp		1a	6,685,000.
	Average of monthly cash balances		Ì	1b	3,436,756.
	Fair market value of all other assets			1c	45,409,900.
-	Total (add lines 1a, b, and c)			1d	55,531,656.
	Reduction claimed for blockage or other factors reported on lines 1a and		Ì		
-	· · · · · · · · · · · · · · · · · · ·	1e	0.		
2	Acquisition indebtedness applicable to line 1 assets			2	0.
3	Subtract line 2 from line 1d			3	55,531,656.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, s	ee instructions)	İ	4	832,975.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on F			5	54,698,681.
6	Minimum investment return Enter 5% of line 5	·		6	2,734,934.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and	(j)(5) private operating	foundations an	d certain	
	foreign organizations, check here and do not complete this part.)				
1	Minimum investment return from Part X, line 6			1	2,734,934.
2a	Tax on investment income for 2019 from Part VI, line 5	2a	2,522.		
b	Income tax for 2019. (This does not include the tax from Part VI.)	2b			
C	Add lines 2a and 2b	2c	2,522.		
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	2,732,412.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	2,732,412.
6	Deduction from distributable amount (see instructions)			6	0.
7_	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part X	III, line 1		7	2,732,412.
P	art XII Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpo	ses:			
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26			1a	77,939,711.
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	e, etc., purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the:				
a	Suitability test (prior IRS approval required)			3a	
b	Cash distribution test (attach the required schedule)			3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8; and	Part XIII, line 4		4	77,939,711.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net invest				
	income. Enter 1% of Part I, line 27b			5	2,522.
6	Adjusted qualifying distributions Subtract line 5 from line 4			6	77,937,189.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years wh	en calculating whether ti	ne foundation q	ualifies for	r the section

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI,				
line 7				2,732,412.
2 Undistributed income, if any, as of the end of 2019				
a Enter amount for 2018 only			0.	1
b Total for prior years:		•		
	•	0.		
3 Excess distributions carryover, if any, to 2019:				,
a From 2014 59,930,667.				
b From 2015 <u>62,275,246.</u>				
c From 2016 59,478,472.				
d From 2017 103, 230, 456.				
e From 2018 48,401,300.				
f Total of lines 3a through e	333,316,141.			
4 Qualifying distributions for 2019 from				
Part XII, line 4: \triangleright \$ 77,939,711.			_	
a Applied to 2018, but not more than line 2a			0.	
b Applied to undistributed income of prior		_		
years (Election required - see instructions)		0.	, ,	-
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2019 distributable amount				2,732,412.
e Remaining amount distributed out of corpus	75,207,299.			
Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	408,523,440.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		ı
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2018. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2019. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2020				0.
7 Amounts treated as distributions out of	1			,
corpus to satisfy requirements imposed by		I		
section 170(b)(1)(F) or 4942(g)(3) (Election	·			
may be required - see instructions)	0.			
8 Excess distributions carryover from 2014				
not applied on line 5 or line 7	59,930,667.			
9 Excess distributions carryover to 2020				
Subtract lines 7 and 8 from line 6a	348,592,773.			
10 Analysis of line 9:				
a Excess from 2015 62,275,246.		•		
b Excess from 2016 59,478,472.				<u>'</u>
c Excess from 2017 103, 230, 456,				
d Excess from 2018 48,401,300.				
e Excess from 2019 75, 207, 299.				
				Form 990-PF (2019)

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager Recipient Foundation Purpose of grant or Amount 3 status of contribution Name and address (home or business) or substantial contributor recipient **EMGS** NONE PUBLIC GENERAL USE - RESEARCH 16285 PARK TEN PLACE HOUSTON TX 77084 25,000, NONE PUBLIC GENERAL USE - ARTS FRIENDS OF IR DAVID, INC. 575 LEXINGTON AVE NEW YORK, NY 10022 500,000. NONE PUBLIC HARVARD UNIVERSITY GENERAL USE - RESEARCH 124 MOUNT AUBURN STREET CAMBRIDGE, MA 02138 67, 262, 888, MIT NONE PUBLIC GENERAL USE -EDUCATOIN 77 MASSACHUSETTS AVE CAMBRIDGE MA 02139 5,000, JB LITTLE CTR RADIAT SCI & ENVIRON NONE PUBLIC GENERAL USE - RESEARCH HEALTH 677 HUNTINGTON AVE 20,000. BOSTON, MA 02115 NONE PUBLIC GENERAL USE - RESEARCH MOVEABLE FEAST 3 RIVERSIDE DRIVE 10,000. WILLIMANTIC CT 06226 LIVING STREAM MINISTRY PUBLIC GENERAL USE -NONE 1299 MASSACHUSETTS AVE RELIGIOUS 945,000. DORCHESTER, MA 02125 MGH CANCER CENTER NONE PUBLIC GENERAL USE - RESEARCH 55 FRUIT STREET 50,000. BOSTON, MA 02114 RADIATION RESEARCH SOCIETY NONE PUBLIC GENERAL USE -EDUCATION 380 ICE CENTER LANE BOZEMAN, MT 59718 50,000. THE CHURCH IN ANAHEIM NONE PUBLIC GENERAL USE -RELIGIOUS 2528 W LA PALM AE ANAEIM, CA 92801 1,481,000. Total from continuation sheets 72 724 648,

Supplementary Information Part XV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor NONE PUBLIC GENERAL USE -THE CHURCH IN IRVING 3600 ESTERS ROAD RELIGIOUS 500,000. IRVING, TX 75062 THE CHURCH OF CAMBRIDGE NONE PUBLIC GENERAL USE ~ 380 GREEN STREET RELIGIOUS 388,260, CAMBRIDGE, MA 02139 WINTHROP PARK SCHOOL, INC. NONE PUBLIC GENERAL USE -EDUCATION 1188 CENTRE STREET 1,487,500. NEWTON CENTRE, MA 02459 Total from continuation sheets

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income			ded by section 512, 513, or 514	(e)
Enter group amount amount of the managed	(a)	(b)	Exclu-	(d)	Related or exempt
1 Program service revenue;	Business code	Amount	sion code	Amount	function income
a					
b					
c					-
a a					
e					
f					
g Fees and contracts from government agencies	_	<u>.</u>			
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	4.	
4 Dividends and interest from securities				=	
5 Net rental income or (loss) from real estate:		<u></u>		··· -	
a Debt-financed property	531120	47,478			
b Not debt-financed property	531120	251,511			
6 Net rental income or (loss) from personal	332220				
property					
7 Other investment income			1		
8 Gain or (loss) from sales of assets other	<u> </u>				
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory		· · · · · ·			
11 Other revenue:					
a					
b	-	· · · · · · · · · · · · · · · · · · ·			
c					
d	_				
е	_				
12 Subtotal. Add columns (b), (d), and (e)		298,989		4.	0.
13 Total Add line 12, columns (b), (d), and (e)			•	13	298,993.
(See worksheet in line 13 instructions to verify calculations)				_	

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

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

Form 990-PF (2019) THE M	ORNINGSID	E FOUN	DATION		04-333	9572	l Pa	ge 13
Part XVII			sfers to a	nd Transactions	and Relations	hips With Noncha	ritable)	
1 Did the o	Exempt Organ irganization directly or indi		of the followin	a with any other organiza	tion described in sect	ion 501(c)		Yes	No
	an section 501(c)(3) organ			· · · · ·		1011 30 1(c)			
•	s from the reporting found	•	-	•					
(1) Casi	h ;						1a(1)		Х
(2) Othe	er assets						1a(2)		X
b Other tra									7.7
	s of assets to a noncharita						1b(1)	_	X
	chases of assets from a no tal of facilities, equipment,	· ·	organization				1b(2)	 	X
	nbursement arrangements						1b(4)		X
	ns or loan guarantees						1b(5)		X
- •	ormance of services or me	embership or fundrai	sing solicitatio	ins			1b(6		Х
_	of facilities, equipment, ma			• •			1c		X
						market value of the goods,		sets,	
	es given by the reporting fi (d) the value of the goods,			ed less than fair market va	alue in any transaction	n or sharing arrangement,	nı wona		
(a)Line no	(b) Amount involved			e exempt organization	(d) Description	n of transfers, transactions and	sharing a	талдете	ents
· · · · · · · ·	(-)	(0)11	N/A		(0,000.0.0			- - -	
									
			.						
		· · · · · · · · · · · · · · · · · · ·							
		 							
				··· <u>-</u> -		 -			
	·								
		<u> </u>							
			·			·			
				·					
							· · · · ·		
2a Is the fou	undation directly or indirec	tly affiliated with, or	related to, one	or more tax-exempt orga	nizations described				
	n 501(c) (other than sectio		ection 527?				Yes	X] No
b If "Yes," (complete the following sch		·	1 457		(10	1		
	(a) Name of org	janization		(b) Type of organization	1 !	(c) Description of relations	inip		
					 				
				· · · · · · · · · · · · · · · · · · ·					
المحما	or panalties of perjury I declare belief it is true correct, and cor					Ma	y the IRS urn with th	discuss i	his
Sign Here	~ 20m			11/0/20		sh	own below	See in:	str 7
 	nature of officer or trustee	<u> </u>	 	Date Date	VICE I	PRESIDENT L	X Yes		J No
	Print/Type preparer's na		Preparer's s		Date	Check if PTIN	•		
	ANDREW P.	PRAGUE,	//	<i>X</i> /		self- employed			
Paid	CPA		11	+	11/09/20		0451		
Preparer		GUE & COM	IPANY,	P.C.		Firm's EIN ► 04 - 3	1078	05	
Use Only		LIAT ATTEM C	mara am	CMD 150					
	Firm's address ► 15	WALNUT S LLESLEY,				Phone no. 781-2	37_5	555	
	WE.	TITLE I	UZ4	<u> </u>		Trimine in. 101-2	<i>51</i> - 3	223	

923622 12-17-19

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.

THE MORNINGSIDE FOUNDATION

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

OMB No 1545 0047

2019

Name of the organization

Employer identification number

04-3339572

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

Organiz	Organization type (check one)						
Filers of	:	Section:					
Form 990 or 990-EZ		501(c)() (enter number) organization					
		4947(a)(1) nonexempt charitable trust not treated as a private foundation					
		527 political organization					
Form 99	0-PF	X 501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
	-	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions					
General	Rule						
X		filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special	Rules						
	sections 509(a)(1) a any one contributor	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 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 r, 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, line 1 Complete Parts I and II					
	year, total contribut	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the tion's of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the ty to children or animals. Complete Parts I, II, and III					
	year, contributions is checked, enter hi purpose Don't con	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., applete any of the parts unless the General Rule applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year.					
but it mi	ust answer "No" on	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), 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 ne filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)					

Employer identification number

THE MORNINGSIDE FOUNDATION

04-3339572

Ine M	ORNINGSIDE FOUNDATION		-3339372
Part I	Contributors (see instructions) Use duplicate copies of Part I if addition	onal space is needed	···
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DAKDYN, INC. 2550 MIDDLE ROAD, SUITE 603 BETTENDORF, IA 52722	\$ 875,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	MORNINGSIDE FOUNDATION LIMITED 22/F, HANG LUNG CENTRE, 2-20 PATERSON ST. CAUSEWAY BAY, HONG KONG, CHINA	\$ 53,890,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	MORNINGSIDE FOUNDATION LIMITED 22/F, HANG LUNG CENTRE, 2-20 PATERSON ST. CAUSEWAY BAY, HONG KONG, CHINA	\$\$,097,063.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	MORNINGSIDE FOUNDATION LIMITED 22/F, HANG LUNG CENTRE, 2-20 PATERSON ST. CAUSEWAY BAY, HONG KONG, CHINA	s 17,262,888.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	DR. LEESTER WU & DR. CAROLYN SHIH 25 GRACEWOOD DRIVE MANHASSET, NY 11030-3930	- - - -	Person X Payroll
(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

THE MORNINGSIDE FOUNDATION

04-3339572

art II	Noncash Property (see instructions) Use duplicate copies of P	art II if additional space is needed	-3333314
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	4.3M SHARES XIAOMI A&B HKD		
3		\$sssssss	09/24/19
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
4	NUCANA 2,911,111 SHARES		
_		\$ 17,262,888.	12/30/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	
3453 11-06-			90, 990-EZ, or 990-PF) (

Employer identification number

THE MO	ORNINGSIDE FOUNDATION		04-3339572	
Part III	from any one contributor. Complete columns (a) through (e) and the following line entry	tion 501(c)(7), (8), or (10) that total more than \$1,000 for the	e year
	completing Part III, enter the total of exclusively religious,	charitable, etc., contributions of \$1,000 or le	ss for the year (Enter this info once) > \$	
(a) Na	Use duplicate copies of Part III if additional	space is needed		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
				<u> </u>
				<u> </u>
		(e) Transfer of gift		
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee	
(a) No.				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
			_	
		(e) Transfer of gift		
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
				
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee	
•	Transferee's name, address, a	III ZIF + 4	nerationship of transfer of to transfer ee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
				<u> </u>
		(e) Transfer of gift		<u> </u>
	Transferee's name, address, a		Relationship of transferor to transferee	

FORM 990-PF INTEREST ON SAVINGS	AND 1	TEMPORARY	CASH	INVESTMENTS	STATEMENT	1
SOURCE		(A) EVENUE R BOOKS	NET	(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOM	E
CITIZENS BANK		4.		4.		
TOTAL TO PART I, LINE 3		4.		4.		
FORM 990-PF RI	ENTAL	INCOME			STATEMENT	2
KIND AND LOCATION OF PROPERTY				ACTIVITY NUMBER	GROSS RENTAL INC	OME
509-531 HAMMOND ST, CHESTNUT HILD STORY ST, CAMBRIDGE, MA 497 HAMMOND ST, CHESTNUT HILL, MA 5233 18TH AVE, SEATTLE, WA 9649 PAULINE DR, CYPRESS, CA 63 DANA STREET, CAMBRIDGE, MA 30 ATHENS STREET, CAMBRIDGE, MA 1-11 GRAY STREET, CAMBRIDGE, MA 184 POWER STREET, PROVIDENCE, RI 56 HANCOCK STREET, CAMBRIDGE, MA	A	& 11-13		1 2 3 4 7 8 9 10 11	507,3 67,9 23,3 290,8 79,8 598,5 6,0 180,6	0. 65. 40. 86. 62. 28. 00.
FORM 990-PF REI	NTAL E	EXPENSES			STATEMENT	3
DESCRIPTION		ACTIVITY NUMBER	Y	AMOUNT	TOTAL	
DEPRECIATION AMORTIZATION OPERATING EXPENSES - ROSEMARY - SUBTO	OTAL -	- 1		175,528. 279. 344,125.	519,9	32.
DEPRECIATION OPERATING EXPENSES - ELDERBERRY - SUBTO	OTAL -	- 2		1,325. 84,603.	85,9	28.
DEPRECIATION OPERATING EXPENSES - TURMERIC - SUBTO	OTAL -	- 3		11,829. 12,109.	23,9	38.
DEPRECIATION				8,155.	, -	

THE MORNINGSIDE FOUNDATION				04-3339572
OPERATING EXPENSES - CLOVE			15,764.	
	SUBTOTAL -	4	74 100	23,919.
DEPRECIATION OPERATING EXPENSES - MEDJOOL			74,122. 147,145.	
	SUBTOTAL -	7	147,145.	221,267.
DEPRECIATION	BOBIOINE	,	27,668.	221,207.
OPERATING EXPENSES - WILLOWB	ARK		46,366.	
	SUBTOTAL -	8		74,034.
DEPRECIATION	_		170,172.	
OPERATING EXPENSES - CORKTRE		9	220,091.	200 262
DEPRECIATION	SUBTOTAL -	9	3,132.	390,263.
DEFRECIATION OPERATING EXPENSES - GINGERG	OLD		21,380.	
	SUBTOTAL -	10	22,0000	24,512.
DEPRECIATION			18,274.	•
AMORTIZATION			345.	
OPERATING EXPENSES - TACCA		4.4	73,157.	04 556
-	SUBTOTAL -	11	_	91,776.
TOTAL RENTAL EXPENSES				1,455,569.
NET RENTAL INCOME TO FORM 99	0-PF, PART I	, LINE 5B	=	298,989.
	0-PF, PART I LEGAL			298,989. STATEMENT 4
FORM 990-PF			(C) ADJUSTED NET INCOME	STATEMENT 4 (D) CHARITABLE
FORM 990-PF DESCRIPTION	LEGAL (A) EXPENSES	FEES (B) NET INVEST-	(C) ADJUSTED	STATEMENT 4 (D) CHARITABLE
NET RENTAL INCOME TO FORM 99 FORM 990-PF DESCRIPTION LEGAL TO FM 990-PF, PG 1, LN 16A	(A) EXPENSES PER BOOKS	FEES (B) NET INVEST- MENT INCOME	(C) ADJUSTED	STATEMENT 4 (D) CHARITABLE PURPOSES
FORM 990-PF DESCRIPTION LEGAL TO FM 990-PF, PG 1, LN 16A	(A) EXPENSES PER BOOKS 24,404.	FEES (B) NET INVEST- MENT INCOME 24,404.	(C) ADJUSTED NET INCOME	STATEMENT 4 (D) CHARITABLE PURPOSES 0.
FORM 990-PF DESCRIPTION LEGAL	(A) EXPENSES PER BOOKS 24,404.	FEES (B) NET INVEST- MENT INCOME 24,404.	(C) ADJUSTED NET INCOME	STATEMENT 4 (D) CHARITABLE PURPOSES 0.
FORM 990-PF DESCRIPTION LEGAL TO FM 990-PF, PG 1, LN 16A	(A) EXPENSES PER BOOKS 24,404.	FEES (B) NET INVEST- MENT INCOME 24,404.	(C) ADJUSTED NET INCOME	CHARITABLE PURPOSES O. STATEMENT 5 CHARITABLE DIRPOSES
FORM 990-PF DESCRIPTION LEGAL TO FM 990-PF, PG 1, LN 16A FORM 990-PF	LEGAL (A) EXPENSES PER BOOKS 24,404. 24,404. ACCOUNTI	(B) NET INVEST- MENT INCOME 24,404. 24,404. NG FEES (B) NET INVEST-	(C) ADJUSTED NET INCOME	CHARITABLE PURPOSES O. STATEMENT 5 CHARITABLE DIRPOSES
DESCRIPTION LEGAL TO FM 990-PF, PG 1, LN 16A FORM 990-PF	(A) EXPENSES PER BOOKS 24,404. 24,404. ACCOUNTI (A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME 24,404. 24,404. NG FEES (B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	CHARITABLE PURPOSES (D) CHARITABLE PURPOSES (D) CHARITABLE PURPOSES

FORM 990-PF	TAX	ES	S'	TATEMENT (
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
MA FORM PC CA FRANCHISE TAX 2018 FORM 990-PF	1,000. 1,060. 1,809.	1,000. 1,060. 1,809.		0.0
TO FORM 990-PF, PG 1, LN 18 =	3,869.	3,869.		0 .
FORM 990-PF	OTHER E	XPENSES	S'	TATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
BANK FEES MISCELLANEOUS EXPENSES INSURANCE OPERATING EXPENSES -	<9,603. 2,187. 221.			0.0
ROSEMARY OPERATING EXPENSES - ELDERBERRY	344,125. 84,603.	344,125. 84,603.		0.
OPERATING EXPENSES - TURMERIC OPERATING EXPENSES - CLOVE OPERATING EXPENSES - MEDJOOL	12,109. 15,764. 147,145.	12,109. 15,764.		0.0
OPERATING EXPENSES - WILLOWBARK OPERATING EXPENSES -	46,366.	46,366.		0 .
CORKTREE OPERATING EXPENSES - GINGERGOLD	220,091. 21,380.	220,091. 21,380.		0.
OPERATING EXPENSES - TACCA AMORTIZATION	73,157. 624.	73,157.		0.
TO FORM 990-PF, PG 1, LN 23	958,169.	958,169.		0.

•				
FORM 990-PF	CC	RPORATE STOCK		STATEMENT 8
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE
JP MORGAN ACCO	TNUC	_	37,275,000.	4,130,000.
TOTAL TO FORM	990-PF, PART II, LIN	JE 10B =	37,275,000.	4,130,000.
FORM 990-PF	DEPRECIATION OF ASS	SETS HELD FOR INV	ESTMENT	STATEMENT 9
DESCRIPTION		COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
BUILDING		560,000.	560,000.	0.
BUILDING		560,000.	560,000.	0.
ACQUISITION		8,904.	8,904.	0.
IMPROVEMENTS		4,400.	4,400.	0.
IMPROVEMENTS		3,504.	3,440.	64.
IMPROVEMENTS		2,440.	2,440.	0.
IMPROVEMENTS		3,578.	3,578.	0.
IMPROVEMENTS		53,469. 55,738.	53,469. 55,738.	0.
IMPROVEMENTS IMPROVEMENTS		116,322.	116,322.	0.
IMPROVEMENTS		57,543.	57,449.	94.
IMPROVEMENTS		30,059.	29,922.	137.
IMPROVEMENTS		53,988.	53,576.	412.
IMPROVEMENTS		18,318.	18,122.	196.
IMPROVEMENTS		112,166.	110,640.	1,526.
IMPROVEMENTS		30,443.	29,935.	508.
IMPROVEMENTS		24,795.	24,795.	0.
IMPROVEMENTS		64,272.	64,272.	0.
IMPROVEMENTS		48,773.	48,773.	0.
IMPROVEMENTS		9,132.	9,132.	0.
IMPROVEMENTS		13,300.	13,300.	0.
BUILDING		1,250.	1,250.	0.
BUILDING		10,627.	10,627.	0.
BUILDING		2,042.	2,042.	0.
BUILDING		8,465.	8,465.	0.
BUILDING		972.	972.	0.
BUILDING		739.	739.	0.
BUILDING		3,506.	3,506.	0.
BUILDING		2,911.	2,911.	0.
BUILDING		4,544.	4,544.	0.
BUILDING		6,489.	6,489.	0.
BUILDING		14,362.	14,362.	0.
BUILDING		10,000. 4,354.	10,000. 4,354.	0.
BUILDING		4,354.	4,354.	0.

608.

0.

608.

BUILDING

THE MORNINGSIDE FOUNDATION			04-3339372
BUILDING	909.	904.	5.
BUILDING	2,298.	2,288.	10.
BUILDING	3,523.	3,495.	28.
BUILDING	8,434.	8,375.	59.
BUILDING	4,006.	3,969.	37.
IMPROVEMENTS	8,124.	8,031.	93.
IMPROVEMENTS	7,758.	7,674.	84.
IMPROVEMENTS	30,000.	29,501.	499.
BUILDING	31,946.	31,946.	0.
BUILDING	5,179.	5,179.	0.
BUILDING	6,019.	6,019.	0.
BUILDING	31,946.	31,946.	0.
BUILDING	14,248.	14,248.	0.
BUILDING	72,874.	72,874.	0.
BUILDING	51,393.	51,393.	0.
BUILDING	60,000.	60,000.	0.
BUILDING	21,927.	21,927.	ŏ.
	115,751.	115,751.	0.
BUILDING	11,482.		
BUILDING		11,482.	0.
BUILDING	8,936.	8,936.	0.
BUILDING	8,317.	8,297.	20.
BUILDING	104,415.	103,942.	473.
BUILDING	16,077.	15,962.	115.
BUILDING	3,793.	3,765.	28.
BUILDING	100,000.	99,236.	764.
BUILDING	4,575.	4,520.	55.
BUILDING	71,955.	70,981.	974.
BUILDING	32,401.	31,857.	544.
IMPROVEMENTS	2,695.	2,695.	0.
BUILDING	19,000.	18,742.	258.
IMPROVEMENTS	3,396.	3,269.	127.
IMPROVEMENTS	1,270.	1,176.	94.
IMPROVEMENTS	24,762.	22,841.	1,921.
IMPROVEMENTS	3,103.	3,103.	0.
IMPROVEMENTS	4,352.	3,985.	367.
IMPROVEMENTS	3,945.	3,596.	349.
IMPROVEMENTS	13,675.	12,489.	1,186.
	6,369.	5,826.	543.
IMPROVEMENTS	1,200.	1,103.	97.
IMPROVEMENTS			722.
IMPROVEMENTS	4,050.	3,328.	
BUILDING	745.	575.	170.
BUILDING	3,600.	2,778.	822.
IMPROVEMENTS	9,540.	6,433.	3,107.
IMPROVEMENTS	10,300.	6,921.	3,379.
EQUIPMENT	24,429.	24,429.	0.
EQUIPMENT	1,046.	1,046.	0.
LAND	75,673.	0.	75,673.
BUILDING	320,750.	308,607.	12,143.
BUILDING	213,150.	205,724.	7,426.
LAND	64,174.	0.	64,174.
BUILDING	120,000.	119,822.	178.
BUILDING	9,868.	9,855.	13.
BUILDING	10,445.	10,337.	108.
BUILDING	12,325.	11,892.	433.
	, = 10.00	,	2234

04-	3	3	3	9	5	7	2
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THE MORNINGSIDE FOUNDATION

THE MORNINGSIDE FOUNDATION			04-3339572
IMPROVEMENTS	12,512.	11,887.	625.
IMPROVEMENTS	1,150.	1,078.	72.
LAND	1,578,647.	0.	1,578,647.
HOT WATER HEATER	1,000.	1,000.	0.
APPLIANCES	2,011.	2,011.	0.
APPLIANCES	916.	916.	0.
	575 .	575.	0.
ACQUISITION		5,350.	0.
HVAC	5,350.		
APPLIANCES	319.	319.	0.
CONDOMINIUM UNITS	3,234,000.	1,729,700.	1,504,300.
CONDOMINIUM UNIT	375,000.	198,290.	176,710.
CONDOMINIUM UNIT	375,000.	198,290.	176,710.
APPLIANCES	424.	424.	0.
11-13 STORY CLOSING COSTS	11,166.	4,115.	7,051.
11-13 APPLIANCES	701.	701.	0.
HAMMOND FENCE	6,500.	5,683.	817.
HAMMOND APPLIANCES	2,202.	2,202.	0.
63 DANA STREET LAND	985,800.	0.	985,800.
63 DANA STREET BUILDING	1,814,200.	909,850.	904,350.
63 DANA STREET IMPROVEMENTS	132,706.	64,145.	68,561.
63 DANA STREET LOAN COSTS	25,084.	25,080.	4.
30 ATHENS STREET LAND	718,600.	0.	718,600.
30 ATHENS STREET BUILDING	701,400.	351,757.	349,643.
30 ATHENS STREET IMPROVEMENTS	9,700.	4,780.	4,920.
30 ATHENS STREET CLOSING COSTS	2,300.	1,158.	1,142.
LOAN COSTS	33,004.	33,000.	4.
63 DANA STREET CLOSING COSTS	3,235.	1,627.	1,608.
30 ATHENS STREET IMPROVEMENTS	500.	221.	279.
30 ATHENS STREET IMPROVEMENTS	20,781.	9,166.	11,615.
PAULINE DRIVE IMPROVEMENTS	4,901.	2,143.	2,758.
11-13 STORY UNIT 2 PURCHASE	350,000.	161,739.	188,261.
HAMMOND IMPROVEMENTS	25,783.	20,843.	4,940.
11-13 STORY UNIT 2 CLOSING	25,705.	20,045.	4,540.
	1,040.	476.	564.
COSTS	1,733.	1,733.	0.
11-13 STORY APPLIANCES		1,733.	0.
HOT WATER HEATER	1,024.		
HAMMOND IMPROVEMENTS	5,089.	2,197.	2,892.
30 ATHENS STREET IMPROVEMENTS	18,156.	7,398.	10,758.
509 BOILER	10,900.	10,900.	0.
LAND	491,300.	0.	491,300.
BUILDING	4,421,700.	1,735,181.	2,686,519.
1-11 GRAY STREET CLOSING COSTS	5,300.	2,083.	3,217.
ASBESTOS ABATEMENT	3,600.	1,414.	2,186.
IMPROVEMENTS	37,400.	14,337.	23,063.
APPLIANCES	1,581.	1,581.	0.
IMPROVEMENTS	48,198.	16,726.	31,472.
IMPROVEMENTS	2,962.	1,075.	1,887.
IMPROVEMENTS	4,500.	1,524.	2,976.
HAMMOND IMPROVEMENTS (NEW			
ROOF)	30,670.	9,431.	21,239.
IMPROVEMENTS	54,653.	16,476.	38,177.
APPLIANCES	2,456.	2,456.	0.
LAND	275,000.	0.	275,000.
BUILDING	75,000.	23,975.	51,025.

THE MORAINGSIDE FOUNDATION			04-33395/2
IMPROVEMENTS	11 144	2 402	7,651.
	11,144.	3,493.	_
LAND	1,330,000.	0.	1,330,000.
BUILDING	301,000.	92,577.	208,423.
IMPROVEMENTS	20,000.	5,846.	14,154.
FINANCING COSTS	6,897.	2,904.	3,993.
DRIVEWAY, WALKWAY & PATIO		4 400	4 504
IMPROMEMENTS	6,210.	1,629.	4,581.
NEW BOILER	33,930.	9,718.	24,212.
PATIO	2,700.	715.	1,985.
PORTICO	1,255.	362.	893.
UNIT RENOVAIONS	17,594.	4,986.	12,608.
BOILER	18,750.	5,030.	13,720.
DECK	10,700.	3,096.	7,604.
IMPROVEMENTS UNIT #1	26,293.	7,130.	19,163.
IMPROVEMENTS UNIT #2	12,565.	3,332.	9,233.
IMPROVEMENTS UNIT #3	27,848.	7,386.	20,462.
IMPROVEMENTS UNIT #5	7,020.	1,838.	5,182.
ASBESTOS REMOVAL	1,793.	485.	1,308.
IMPROVEMENTS - OTHER	11,163.	2,960.	8,203.
11-13 STORY APPLIANCES	1,023.	1,023.	0.
IMPROVEMENTS	4,532.	1,024.	3,508.
30 ATHENS STREET IMPROVEMENTS	8,024.	1,813.	6,211.
BATH REMODEL (1-2 GRAY)	4,425.	1,107.	3,318.
	5,200.		3,964.
REWIRE APARTMENT (1-6 GRAY)		1,236.	
REMODEL BATHROOM (11-8 GRAY)	4,720.	1,111.	3,609.
IMPROVEMENTS - UNIT 5	24,034.	5,353.	18,681.
IMPROVEMENTS - OTHER	3,250.	792.	2,458.
30 ATHENS STREET APPLIANCES	516.	516.	0.
11-13 STORY APPLIANCES	2,066.	2,066.	0.
HAMMOND APPLIANCES	765.	765.	0.
HAMMOND IMPROVEMENTS	11,670.	2,385.	9,285.
HAMMOND APPLIANCES	685.	685.	0.
LIGHTTING	3,900.	822.	3,078.
REMODEL BATHROOM (1-8 GRAY)	10,067.	2,120.	7,947.
APPLIANCES	550.	550.	0.
IMPROVEMENTS (11-3 GRAY)	26,590.	5,278.	21,312.
IMPROVEMENTS (1-5 GRAY)	38,750.	7,573.	31,177.
HAMMOND GARAGE	54,500.	8,011.	46,489.
HAMMOND APPLIANCES	2,867.	2,847.	20.
11-13 STORY APPLIANCES	940.	907.	33.
11-13 STORY IMPROVEMENTS	30,075.	4,695.	25,380.
HVAC	38,150.	6,068.	32,082.
11-13 STORY IMPROVEMENTS	24,625.	2,722.	21,903.
HAMMOND - DRIVEWAY PAVING	38,700.	3,342.	35,358.
HAMMOND - IMPROVEMENTS	60,500.	5,042.	55,458.
	464,318.	0.	464,318.
LAND 497 HAMMOND STREET		4,356.	
HAMMOND - IMPROVEMENTS	63,879.		59,523 .
ROOF REPLACEMENT	39,980.	2,120.	37,860.
TOTAL TO FM 990-PF, PART II, LN 11	22,448,053.	9,351,999.	13,096,054.

FORM 990-PF	OTHER INVESTMENTS		STATEMENT 10
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
BOOK VALUE LESS BASIS	COST	4,166,793.	0.
TOTAL TO FORM 990-PF, PART II,	LINE 13	4,166,793.	0.
FORM 990-PF	OTHER LIABILITIES		STATEMENT 11
DESCRIPTION		BOY AMOUNT	EOY AMOUNT
SECURITY DEPOSITS AND OTHER LIABILITIES ACCRUED DONATIONS		143,813. 26,760.	150,058. 26,760.