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Form 990-PF

## Return of Private Foundation

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

2010

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

For calendar year 2010, or tax year beginning 08-01-2010, and ending 07-31-2011

G Check all that apply

 Initial return Initial return of a former public charity Final return Amended return Address change Name change

## Name of foundation

John C and Eunice B Morrison  
Charitable FoundationNumber and street (or P O box number if mail is not delivered to street address)  
PSorgi Tr 50 Stanford St No 804

Room/suite

City or town, state, and ZIP code  
Boston, MA 021142517H Check type of organization  Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt charitable trust  Other taxable private foundationI Fair market value of all assets at end  
of year (from Part II, col. (c),  
line 16) **\$ 11,599,422**

J Accounting method

 Cash  Accrual Other (specify)  
(Part I, column (d) must be on cash basis.)Part I Analysis of Revenue and Expenses (The  
total of amounts in columns (b), (c), and (d) may not  
necessarily equal the amounts in column (a) (see page 11 of  
the instructions))(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 (attach schedule)			
2	Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B			
3	Interest on savings and temporary cash investments	101,121	101,121	
4	Dividends and interest from securities. . . . .	284,986	284,986	
5a	Gross rents . . . . .			
b	Net rental income or (loss) _____			
6a	Net gain or (loss) from sale of assets not on line 10	336,149		
b	Gross sales price for all assets on line 6a <b>\$ 5,001,921</b>			
7	Capital gain net income (from Part IV, line 2) . . . . .		336,149	
8	Net short-term capital gain . . . . .			
9	Income modifications . . . . .			
10a	Gross sales less returns and allowances			
b	Less Cost of goods sold . . . . .			
c	Gross profit or (loss) (attach schedule) . . . . .			
11	Other income (attach schedule) . . . . .			
12	<b>Total.</b> Add lines 1 through 11 . . . . .	722,256	722,256	

13	Compensation of officers, directors, trustees, etc	51,754	31,054	20,700
14	Other employee salaries and wages . . . . .			
15	Pension plans, employee benefits . . . . .			
16a	Legal fees (attach schedule) . . . . .			
b	Accounting fees (attach schedule) . . . . .			
c	Other professional fees (attach schedule) . . . . .			
17	Interest . . . . .			
18	Taxes (attach schedule) (see page 14 of the instructions)	3,687	3,687	0
19	Depreciation (attach schedule) and depletion . . . . .			
20	Occupancy . . . . .			
21	Travel, conferences, and meetings . . . . .			
22	Printing and publications . . . . .			
23	Other expenses (attach schedule) . . . . .	101,383	99,720	0
24	<b>Total operating and administrative expenses.</b>			
	Add lines 13 through 23 . . . . .	156,824	134,461	20,700
25	Contributions, gifts, grants paid . . . . .	566,000		566,000
26	<b>Total expenses and disbursements.</b> Add lines 24 and 25	722,824	134,461	586,700
27	Subtract line 26 from line 12			
a	<b>Excess of revenue over expenses and disbursements</b>	-568		
b	<b>Net investment income</b> (if negative, enter -0-) . . . . .		587,795	
c	<b>Adjusted net income</b> (if negative, enter -0-) . . . . .			

<b>Part II</b> <b>Balance Sheets</b>	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)	Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>1</b>	Cash—non-interest-bearing . . . . .	-4	8	8
<b>2</b>	Savings and temporary cash investments . . . . .	593,120	737,258	737,258
<b>3</b>	Accounts receivable ►			
	Less allowance for doubtful accounts ►			
<b>4</b>	Pledges receivable ►			
	Less allowance for doubtful accounts ►			
<b>5</b>	Grants receivable . . . . .			
<b>6</b>	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 15 of the instructions) . . . . .			
<b>7</b>	Other notes and loans receivable (attach schedule) ►			
	Less allowance for doubtful accounts ►			
<b>8</b>	Inventories for sale or use . . . . .			
<b>9</b>	Prepaid expenses and deferred charges . . . . .			
<b>10a</b>	Investments—U S and state government obligations (attach schedule)	1,386,950	959,958	1,054,082
<b>b</b>	Investments—corporate stock (attach schedule) . . . . .	4,410,225	4,792,701	5,669,271
<b>c</b>	Investments—corporate bonds (attach schedule) . . . . .	2,072,150	1,989,715	1,997,564
<b>11</b>	Investments—land, buildings, and equipment basis ►			
	Less accumulated depreciation (attach schedule) ►			
<b>12</b>	Investments—mortgage loans . . . . .			
<b>13</b>	Investments—other (attach schedule) . . . . .	2,003,446	1,976,847	2,141,239
<b>14</b>	Land, buildings, and equipment basis ►			
	Less accumulated depreciation (attach schedule) ►			
<b>15</b>	Other assets (describe ►) . . . . .			
<b>16</b>	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	10,465,887	10,456,487	11,599,422
<b>17</b>	Accounts payable and accrued expenses . . . . .			
<b>18</b>	Grants payable . . . . .			
<b>19</b>	Deferred revenue . . . . .			
<b>20</b>	Loans from officers, directors, trustees, and other disqualified persons			
<b>21</b>	Mortgages and other notes payable (attach schedule) . . . . .			
<b>22</b>	Other liabilities (describe ►) . . . . .			
<b>23</b>	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	0	0	
	<b>Foundations that follow SFAS 117, check here ►</b> <input type="checkbox"/>			
	<b>and complete lines 24 through 26 and lines 30 and 31.</b>			
<b>24</b>	Unrestricted . . . . .			
<b>25</b>	Temporarily restricted . . . . .			
<b>26</b>	Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here ►</b> <input checked="" type="checkbox"/>			
	<b>and complete lines 27 through 31.</b>			
<b>27</b>	Capital stock, trust principal, or current funds . . . . .	10,465,887	10,456,487	
<b>28</b>	Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	
<b>29</b>	Retained earnings, accumulated income, endowment, or other funds	0	0	
<b>30</b>	<b>Total net assets or fund balances</b> (see page 17 of the instructions) . . . . .	10,465,887	10,456,487	
<b>31</b>	<b>Total liabilities and net assets/fund balances</b> (see page 17 of the instructions) . . . . .	10,465,887	10,456,487	

**Part III Analysis of Changes in Net Assets or Fund Balances**

<b>1</b>	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) . . . . .	<b>1</b>	10,465,887
<b>2</b>	Enter amount from Part I, line 27a . . . . .	<b>2</b>	-568
<b>3</b>	Other increases not included in line 2 (itemize) ►	<b>3</b>	0
<b>4</b>	Add lines 1, 2, and 3 . . . . .	<b>4</b>	10,465,319
<b>5</b>	Decreases not included in line 2 (itemize) ►	<b>5</b>	8,832
<b>6</b>	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .	<b>6</b>	10,456,487

**Part IV Capital Gains and Losses for Tax on Investment Income**

<b>(a)</b> List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)	<b>(b)</b> How acquired P—Purchase D—Donation	<b>(c)</b> Date acquired (mo., day, yr.)	<b>(d)</b> Date sold (mo., day, yr.)
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<b>1a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>(e)</b> Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	<b>(g)</b> Cost or other basis plus expense of sale	<b>(h)</b> Gain or (loss) (e) plus (f) minus (g)
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			<b>(l)</b> Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
<b>(i)</b> FMV as of 12/31/69	<b>(j)</b> Adjusted basis as of 12/31/69	<b>(k)</b> Excess of col (i) over col (j), if any	
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			
<b>2</b> Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	<b>2</b>	336,149
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)	{ If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions) If (loss), enter -0- in Part I, line 8 }	<b>3</b>	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

 Yes  No

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part

1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries

<b>(a)</b> Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	<b>(c)</b> Net value of noncharitable-use assets	<b>(d)</b> Distribution ratio (col (b) divided by col (c))
2009	519,830	10,576,654	0 049149
2008	442,340	9,434,718	0 046884
2007	633,269	12,158,237	0 052086
2006	622,520	13,469,418	0 046217
2005	105,675	1,058,523	0 099833
<b>2</b> Total of line 1, column (d).			<b>2</b> 0 294169
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			<b>3</b> 0 058834
<b>4</b> Enter the net value of noncharitable-use assets for 2010 from Part X, line 5.			<b>4</b> 11,307,694
<b>5</b> Multiply line 4 by line 3.			<b>5</b> 665,277
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b).			<b>6</b> 5,878
<b>7</b> Add lines 5 and 6.			<b>7</b> 671,155
<b>8</b> Enter qualifying distributions from Part XII, line 4.			<b>8</b> 586,700

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions on page 18

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)**

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1	1	11,756
	Date of ruling or determination letter _____ <b>(attach copy of letter if necessary—see instructions)</b>		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	1	11,756
c	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-)	2	0
3	Add lines 1 and 2. . . . .	3	11,756
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	0
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3 If zero or less, enter -0- . . . . .	5	11,756
6	<b>Credits/Payments</b>		
a	2010 estimated tax payments and 2009 overpayment credited to 2010	6a	10,520
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. . . . .	7	10,520
8	Enter any <b>penalty</b> for underpayment of estimated tax Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .	9	1,236
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .	10	
11	Enter the amount of line 10 to be <b>Credited to 2011 estimated tax</b> <input type="checkbox"/> <b>Refunded</b> <input type="checkbox"/>	11	

**Part VII-A Statements Regarding Activities**

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .		<b>Yes</b>	<b>No</b>
1b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)? . . . . .		<b>Yes</b>	<b>No</b>
	<i>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.</i>			
1c	Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .		<b>Yes</b>	<b>No</b>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
(1)	On the foundation <input type="checkbox"/> \$ _____ 0	(2)	On foundation managers <input type="checkbox"/> \$ _____ 0	
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . .		<b>Yes</b>	<b>No</b>
	<i>If "Yes," attach a detailed description of the activities.</i>			
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? <i>If "Yes," attach a conformed copy of the changes</i>		<b>Yes</b>	<b>No</b>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .		<b>Yes</b>	<b>No</b>
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .		<b>Yes</b>	<b>No</b>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . .		<b>Yes</b>	<b>No</b>
	<i>If "Yes," attach the statement required by General Instruction T.</i>			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		<b>Yes</b>	
	● 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? . . . . .			
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>		<b>Yes</b>	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) <input type="checkbox"/> MA			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation.</i>		<b>Yes</b>	
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 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page 27)? <i>If "Yes," complete Part XIV</i>		<b>Yes</b>	<b>No</b>
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>		<b>Yes</b>	<b>No</b>

**Part VII-A Statements Regarding Activities (continued)**

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions). . . . .	<input type="checkbox"/> 11	<input type="checkbox"/> Yes	<input type="checkbox"/> No
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008? . . . . .	<input type="checkbox"/> 12	<input type="checkbox"/> Yes	<input type="checkbox"/> No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? . . . . .	<input type="checkbox"/> 13	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
	Website address ► N/A			
14	The books are in care of ► Peter Sorgi Trustee	Telephone no ► (617) 742-2150		
	Located at ► 50 Staniford Street Suite 804 Boston MA	ZIP +4 ► 021142517		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . ►	<input type="checkbox"/> 15		
	and enter the amount of tax-exempt interest received or accrued during the year . . . . . ►			
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . .	<input type="checkbox"/> 16		<input type="checkbox"/> No
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes", enter the name of the foreign country ►			

**Part 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.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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? ► <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . . ► <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ► <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ► <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? . . . . . ► <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). . . . . ► <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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 page 20 of the instructions)? . . . . .	<input type="checkbox"/> 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 2010? . . . . .	<input type="checkbox"/> 1c	<input type="checkbox"/> 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))		
a	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010? . . . . . ► <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	If "Yes," list the years ► 20____, 20____, 20____, 20____		
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see page 20 of the instructions) . . . . .	<input type="checkbox"/> 2b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . ► <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2010 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 2010). . . . .	<input type="checkbox"/> 3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? . . . . .	<input type="checkbox"/> 4a	<input type="checkbox"/> No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010? . . . . .	<input type="checkbox"/> 4b	<input type="checkbox"/> No

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**

5a	During the year did the foundation pay or incur any amount to			
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions). . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here. . . . .	<input checked="" type="checkbox"/>	5b	
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	<i>If "Yes," attach the statement required by Regulations section 53.4945–5(d).</i>			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6b	No
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .			
	<i>If "Yes" to 6b, file Form 8870.</i>			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		7b	
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? . . . . .			

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation <b>(If not paid, enter -0-)</b>	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Peter Sorgi 50 Staniford Street Boston, MA 02114	Trustee 1 50	21,225	0	0
James G Walsh III 6 Rail Tree Terrace Westford, MA 01886	Trustee 1 50	21,210	0	0
A Dennis Barbo 75 Federal Street Boston, MA 02109	Trustee 0 50	9,319	0	0

**2 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). If none, enter "NONE."**

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
<b>Total number of other employees paid over \$50,000.</b>			<input checked="" type="checkbox"/>	0

**Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**

**3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enter "NONE"**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

## **Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

1	
2	
3	
4	

**Part IX-B Summary of Program-Related Investments** (see page 24 of the instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and

Describe the two largest program-related investments made by the foundation during the year, see lines 1 and 2		Amount
<b>1</b>		
<b>2</b>		
<b>All other program-related investments</b> See page 24 of the instructions		
<b>3</b>		
<b>Total</b> Add lines 1 through 3		0

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see page 24 of the instructions.)

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a Average monthly fair market value of securities. . . . .	1a	0
b Average of monthly cash balances. . . . .	1b	566,870
c Fair market value of all other assets (see page 24 of the instructions). . . . .	1c	10,913,022
<b>d Total</b> (add lines 1a, b, and c). . . . .	1d	11,479,892
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	1e	0
2 Acquisition indebtedness applicable to line 1 assets. . . . .	2	0
3 Subtract line 2 from line 1d. . . . .	3	11,479,892
4 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25 of the instructions). . . . .	4	172,198
<b>5 Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 Enter here and on Part V, line 4	5	11,307,694
<b>6 Minimum investment return.</b> Enter 5% of line 5. . . . .	6	565,385

**Part XI Distributable Amount** (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here  and do not complete this part.)

1 Minimum investment return from Part X, line 6. . . . .	1	565,385
2a Tax on investment income for 2010 from Part VI, line 5. . . . .	2a	11,756
b Income tax for 2010 (This does not include the tax from Part VI ). . . . .	2b	
c Add lines 2a and 2b. . . . .	2c	11,756
3 Distributable amount before adjustments Subtract line 2c from line 1. . . . .	3	553,629
4 Recoveries of amounts treated as qualifying distributions. . . . .	4	0
5 Add lines 3 and 4. . . . .	5	553,629
6 Deduction from distributable amount (see page 25 of the instructions). . . . .	6	0
<b>7 Distributable amount</b> as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	7	553,629

**Part XII Qualifying Distributions** (see page 25 of the instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	1a	586,700
b Program-related investments—total from Part IX-B. . . . .	1b	0
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	2	
3 Amounts set aside for specific charitable projects that satisfy the		
a Suitability test (prior IRS approval required). . . . .	3a	
b Cash distribution test (attach the required schedule). . . . .	3b	
<b>4 Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	586,700
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 (see page 26 of the instructions). . . . .	5	0
<b>6 Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	6	586,700

**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

**Part XIII Undistributed Income** (see page 26 of the instructions)

	<b>(a) Corpus</b>	<b>(b) Years prior to 2009</b>	<b>(c) 2009</b>	<b>(d) 2010</b>
<b>1</b> Distributable amount for 2010 from Part XI, line 7				553,629
<b>2</b> Undistributed income, if any, as of the end of 2010			0	
<b>a</b> Enter amount for 2009 only. . . . .			0	
<b>b</b> Total for prior years 20____, 20____, 20____		0		
<b>3</b> Excess distributions carryover, if any, to 2010				
<b>a</b> From 2005. . . . .	7,795			
<b>b</b> From 2006. . . . .				
<b>c</b> From 2007. . . . .	33,395			
<b>d</b> From 2008. . . . .				
<b>e</b> From 2009. . . . .	1,508			
<b>f Total</b> of lines 3a through e. . . . .	42,698			
<b>4</b> Qualifying distributions for 2010 from Part XII, line 4 ► \$ _____ 586,700			0	
<b>a</b> Applied to 2009, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see page 26 of the instructions)		0		
<b>c</b> Treated as distributions out of corpus (Election required—see page 26 of the instructions). . . .	0			
<b>d</b> Applied to 2010 distributable amount. . . . .			553,629	
<b>e</b> Remaining amount distributed out of corpus	33,071			
<b>5</b> Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
<b>6</b> Enter the net total of each column as indicated below:	75,769			
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5				
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b. . . . .		0		
<b>c</b> 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		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see page 27 of the instructions . . . . .		0		
<b>e</b> Undistributed income for 2009 Subtract line 4a from line 2a Taxable amount—see page 27 of the instructions . . . . .			0	
<b>f</b> Undistributed income for 2010 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2011. . . . .				0
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions) . . . . .	0			
<b>8</b> Excess distributions carryover from 2005 not applied on line 5 or line 7 (see page 27 of the instructions) . . . . .	7,795			
<b>9</b> Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a . . . . .	67,974			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2006. . . . .	33,395			
<b>b</b> Excess from 2007. . . . .				
<b>c</b> Excess from 2008. . . . .				
<b>d</b> Excess from 2009. . . . .	1,508			
<b>e</b> Excess from 2010. . . . .	33,071			

**Part XIV** **Private Operating Foundations** (see page 27 of the instructions and Part VII-A, question 9)

**Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see page 27 of the instructions.)**

## 1 Information Regarding Foundation Managers:

**a** 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) (See section 507(d)(2) )

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**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

## 2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs

Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

**a** The name, address, and telephone number of the person to whom applications should be addressed

**b** The form in which applications should be submitted and information and materials they should include

## 6 Any submission deadlines

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

**Part XV Supplementary Information (continued)****3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b> See Additional Data Table				
<b>Total</b> . . . . .			► 3a	566,000
<b>b Approved for future payment</b>				
<b>Total</b> . . . . .			► 3b	0

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income	Excluded by section 512, 513, or 514		(e) Related or exempt function income (See page 28 of the instructions )
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount
<b>1</b>	<b>Program service revenue</b>				
<b>a</b>					
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>f</b>					
<b>g</b>	<b>Fees and contracts from government agencies</b>				
<b>2</b>	<b>Membership dues and assessments.</b>				
<b>3</b>	<b>Interest on savings and temporary cash investments</b>				101,121
<b>4</b>	<b>Dividends and interest from securities.</b>				284,986
<b>5</b>	<b>Net rental income or (loss) from real estate</b>				
<b>a</b>	<b>Debt-financed property.</b>				
<b>b</b>	<b>Not debt-financed property.</b>				
<b>6</b>	<b>Net rental income or (loss) from personal property</b>				
<b>7</b>	<b>Other investment income.</b>				
<b>8</b>	<b>Gain or (loss) from sales of assets other than inventory</b>				336,149
<b>9</b>	<b>Net income or (loss) from special events</b>				
<b>10</b>	<b>Gross profit or (loss) from sales of inventory.</b>				
<b>11</b>	<b>Other revenue</b> <b>a</b>				
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>12</b>	<b>Subtotal Add columns (b), (d), and (e).</b>		0		0
<b>13</b>	<b>Total.</b> Add line 12, columns (b), (d), and (e).				722,256
(See worksheet in line 13 instructions on page 28 to verify calculations.)					

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

## Relationship of Activities to the Accomplishment

Explain below how each activity, for which income is reported in column (e) of Part XVI-A, contributes to the accomplishment of the exempt purpose.

**Part XVII** **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

**a Transfers from the reporting foundation to a noncharitable exempt organization or**

(1) Cash.

**(2) Other assets.**

### Other transactions

**(1) Sales of assets to a noncharitable exempt organization. . .**

**(2) Purchases of assets from a noncharitable exempt**

**(3) Rental of facilities, equipment,**

#### (4) Reimbursement arrangement

**(8) Performance of services or membership or fundraising solicitations.**

**c Sharing of facilities, equipment, mailing lists, other assets, or paid employees**

**d** If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

	Yes	No
1a(1)		No
1a(2)		No
1b(1)		No
1b(2)		No
1b(3)		No
1b(4)		No
1b(5)		No
1b(6)		No
1c		No

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations?

described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  Yes  No

**b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship	
<p>Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.</p>			
<p>*****</p>	<p>2011-11-16</p>	<p>*****</p>	
<p>Signature of officer or trustee</p>	<p>Date</p>	<p>Title</p>	
<p><b>Sign Here</b></p> <p>Paid Preparer's Use Only</p>	<p>Preparer's Signature</p>	<p>Date</p>	<p>PTIN</p>
		<p>Check if self-employed <input type="checkbox"/></p>	
		<p>Firm's name ►</p>	<p>Firm's EIN ►</p>
		<p>Sullivan Sorgi and Dimmock LLP</p>	
<p>50 Staniford Street Suite 804</p>	<p>50 Staniford Street Suite 804</p>	<p>50 Staniford Street Suite 804</p>	
<p>Firm's address ►</p>	<p>Boston, MA 021142537</p>	<p>Boston, MA 021142537</p>	
<p>Phone no (617) 742-2150</p>	<p>Phone no (617) 742-2150</p>	<p>Phone no (617) 742-2150</p>	

## Additional Data

**Software ID:**  
**Software Version:**

**EIN:** 04-3310863

**Name:** John C and Eunice B Morrison  
Charitable Foundation

### Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

<b>(a)</b> List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)		<b>(b)</b> How acquired P—Purchase D—Donation	<b>(c)</b> Date acquired (mo, day, yr)	<b>(d)</b> Date sold (mo, day, yr)
A	See Attached Schedule	P	2010-01-01	2010-08-01
B	See Attached Schedule	P	2009-01-01	2010-08-01
C	See Attached Schedule	P	2010-01-13	2010-08-16
D	See Attached Schedule	P	2006-10-10	2010-08-18
E	See Attached Schedule	P	2010-01-06	2010-12-09
F	See Attached Schedule	P	2010-01-06	2011-06-30
G	Capital Gains Dividends	P		

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

	<b>(e) Gross sales price</b>	<b>(f) Depreciation allowed (or allowable)</b>	<b>(g) Cost or other basis plus expense of sale</b>	<b>(h) Gain or (loss) (e) plus (f) minus (g)</b>
A	1,026,553		952,213	74,340
B	1,615,367		1,372,230	243,137
C	1,023,130		1,037,253	-14,123
D	963,149		949,207	13,942
E	258,487		255,768	2,719
F	98,465		99,101	-636
G	16,770			16,770

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			<b>(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))</b>
<b>(i) F M V as of 12/31/69</b>	<b>(j) Adjusted basis as of 12/31/69</b>	<b>(k) Excess of col (i) over col (j), if any</b>	
A			74,340
B			243,137
C			-14,123
D			13,942
E			2,719
F			-636
G			16,770

**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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
A Place to Turn Food Pantry 99 Hartford Street No 1 Natick, MA 01760	PUBLIC	N/A	Support	10,000
Albany Medical Center (Study for MS) 711 Troy Schenectady Road Latham, NY 12110	PUBLIC	N/A	Research	10,000
Barton Center for Diabetes Education Inc PO Box 356 No Oxford, MA 01537	N/A	N/A	Education	3,000
Bay State Community Services Inc 13 Temple Street Quincy, MA 02169	PUBLIC	N/A	Programs	3,000
Boston Health Care for Homeless 729 Massachusetts Avenue Boston, MA 02118	PUBLIC	N/A	Programs and support	10,000
Boston Rescue Mission PO Box 120069 Boston, MA 02112	PUBLIC	N/A	Programs	5,000
Brockton Neighborhood Health Center 63 Main Street Brockton, MA 02301	PUBLIC	N/A	Support	2,500
Camp Fatima-Exceptional Children's Week P O Box 206 Gilmanton Iron Works, MA 03837	PUBLIC	N/A	Programs	10,000
Cape Cod Outreach Program 30 Brewster Cross Roads Orleans, MA 02653	PUBLIC	N/A	Programs and support	12,500
Carroll Center for the Blind 770 Centre Street Newton, MA 02458	PUBLIC	N/A	Programs	5,000
Children's Hospital of Wisconsin Mail Stop 3050 PO Box 1997 Milwaukee, WI 53201	PUBLIC	N/A	Equipment	2,500
City of St Jude 1048 W Fairview Drive Montgomery, AL 36119	PUBLIC	N/A	Research	10,000
Coaches Across the Continent 35 Myrtle Street Watertown, MA 02172	PUBLIC	N/A	Programs and Equipment	2,500
COMPASS for Kids 4 Militia Drive Ste 7 Lexington, MA 02421	PUBLIC	N/A	Programs	5,000
Cor Unum 191 Salem Street Lawrence, MA 01843	PUBLIC	N/A	Programs and support	5,000
<b>Total . . . . .</b>			<b>► 3a</b>	<b>566,000</b>

**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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
Cystic Fibrosis Foundation 220 N Main Street 104 Natick, MA 01760	PUBLIC	N/A	Support	2,500
DCF Kids Fund Inc 24 Farnsworth Street Boston, MA 02210	PUBLIC	N/A	Programs	10,000
Doug Flutie Jr Foundation for Autism PO Box 767 Framingham, MA 01701	PUBLIC	N/A	Research	2,500
Father Bill's Place 422 Washington Street Quincy, MA 02169	PUBLIC	N/A	Support	10,000
Food for the Poor 550 SW 12th Avenue Deerfield Beach, FL 33442	PUBLIC	N/A	Support	10,000
Friends of Westford Recreation PO Box 2011 Westford, MA 01886	PUBLIC	N/A	Programs and Equipment	10,000
Friendship Home Inc PO Box 675 Norwell, MA 02061	PUBLIC	N/A	Support	3,000
Greater Boston Food Bank 99 Atkinson Street Boston, MA 02118	PUBLIC	N/A	Support	10,000
Greater Lowell YMCA 35 YMCA Drive Lowell, MA 01852	PUBLIC	N/A	Programs	5,000
Hingham Food Pantry 685 Main Street Hingham, MA 02043	PUBLIC	N/A	Programs	5,000
Huntington Disease 6 Courthouse Lane - Unit 6 Chelmsford, MA 01824	PUBLIC	N/A	Research	10,000
Jonathan Rizzo's Memorial Foundation P O Box 412 Kingston, MA 02364	PUBLIC	N/A	Support	2,500
Joslin Diabetes Center One Joslin Place 7th Floor Boston, MA 02215	PUBLIC	N/A	Research	5,000
Joslin Summer Camp PO Box 55112 Boston, MA 02205	PUBLIC	N/A	Summer Program	2,500
Lazarus House Ministries PO Box 408 Lawrence, MA 01842	PUBLIC	N/A	Support	10,000
<b>Total . . . . .</b>			<b>► 3a</b>	<b>566,000</b>

**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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
Little Sisters of the Poor 186 Highland Avenue Somerville, MA 02143-1595	PUBLIC	N/A	Support	2,500
Littleton Scholarship Trust 7 Brant Lane Littleton, MA 01460	PUBLIC	N/A	Town Scholarship Fund	60,000
LittletonAyer Loaves and Fishes 234 Barnum Road Devens, MA 01434	PUBLIC	N/A	Aid to Needy	10,000
Lowell Open Pantry 200 Central Street Lowell, MA 01852	PUBLIC	N/A	Support	5,000
Make A Wish Foundation One Bulfinch Place 2nd FL Boston, MA 02114	PUBLIC	N/A	Programs	1,500
Marge Crispin Food Pantry Center 74 Pond Street Braintree, MA 02184	PUBLIC	N/A	Support	5,000
Marine Toys for Tots Foundation P O Box 1947 Quantico, VA 22134	PUBLIC	N/A	Programs	5,000
Mass Mentoring Partnership 105 Chauncy Street Boston, MA 02111	PUBLIC	N/A	Support and programs	5,000
Massachusetts Soldiers Legacy Fund P O Box 962601 Boston, MA 02196	PUBLIC	N/A	Programs and support	5,000
MEDA Inc 92 Pearl Street Newton, MA 02458	PUBLIC	N/A	Support and programs	5,000
Metrowest YMCA 280 Old Connecticut Path Framingham, MA 01701	PUBLIC	N/A	Programs	5,000
NE Shelter for Homeless Veterans 17 Court Street Boston, MA 02108	PUBLIC	N/A	Support and programs	5,000
Naivasha Project 275 Billerica Road Chelmsford, MA 01824	PUBLIC	N/A	Programs	5,000
Nashoba Valley Chorale PO Box 416 Groton, MA 01450	PUBLIC	N/A	Support and programs	2,500
Nephcure Foundation 16 Quonahassit Trail Cohasset, MA 02205	PUBLIC	N/A	Research	10,000
<b>Total . . . . .</b>			<b>► 3a</b>	<b>566,000</b>

**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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
Noah Shelter 77 Winter Street Hyannis, MA 026015553	PUBLIC	N/A	Support and programs	2,500
Pan Mass Challenge 77 Fourth Avenue Needham, MA 02494	PUBLIC	N/A	Support	7,500
Perkins School for the Blind 175 North Beacon Street Watertown, MA 02472	PUBLIC	N/A	Programs	2,500
Pine Street Inn 444 Harrison Avenue Boston, MA 02118	PUBLIC	N/A	Support	10,000
Project Bread 145 Border Street East Boston, MA 02128	PUBLIC	N/A	Support	10,000
Pure Water for the World PO Box 55112 Rutland, VT 05702	PUBLIC	N/A	Programs	10,000
Rosie's Place 869 Harrison Avenue Boston, MA 02118	PUBLIC	N/A	Support	10,000
Salvation Army 147 Berkley Street Boston, MA 02116	PUBLIC	N/A	Support	15,000
See A New Sun Foundation P O Box 1344 Littleton, MA 01460	PUBLIC	N/A	Programs	12,500
Shelter Inc PO Box 390516 Cambridge, MA 02139	PUBLIC	N/A	Support	5,000
South Shore Day Camp 200 Middle Street Weymouth, MA 02169	PUBLIC	N/A	Support and programs	2,500
South Shore YMCA 79 Coddington Street Quincy, MA 02169	PUBLIC	N/A	Programs	5,000
St Catherine's Food Pantry 107 North Main Street Westford, MA 01886	PUBLIC	N/A	Supplies	10,000
St Catherine's Youth Ministry 107 North Main Street Westford, MA 01886	PUBLIC	N/A	Programs	10,000
St Charles Children's Home 19 Grant Street Rochester, NH 03867	PUBLIC	N/A	Supplies and programs	5,000
<b>Total . . . . .</b>			<b>► 3a</b>	<b>566,000</b>

**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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
St Patrick's of Lowell 282 Suffolk Street Lowell, MA 01854	PUBLIC	N/A	Kitchen renovations	7,500
Stone Family Adoption Assistance Fund 57 Bedford Street Ste 225 Lexington, MA 02421	PUBLIC	N/A	Programs	5,000
Sunset Point Camp 185 Columbia Road Dorchester, MA 02121	PUBLIC	N/A	Summer Program	3,000
Supportive Living 17 Warren Avenue Woburn, MA 01801	PUBLIC	N/A	Support and programs	3,000
Susan G Komen Breast Cancer Fund P O Box 224523 Dallas, TX 75224523	PUBLIC	N/A	Research	5,000
The Pastor's Benevolent Fund 1 Satucket Road Brewster, MA 02631	PUBLIC	N/A	Support	5,000
Town of Braintree Scholarship Fund 128 Town Street Braintree, MA 02184	PUBLIC	N/A	Scholarship Fund	70,000
Travis Roy Roundation 111 Huntington Avenue Boston, MA 02199	PUBLIC	N/A	Supoort	7,000
VNA Hospice Care P O Box 114 Woburn, MA 01801	PUBLIC	N/A	Supplies	2,500
Westford Academy Scholarship Trust co Enterprise Bank 237 Littleton Road Westford, MA 01886	PUBLIC	N/A	Scholarships	5,000
Westford Food Pantry 55 Main Street Westford, MA 01886	PUBLIC	N/A	Support	2,500
Women's Lunch Place P O Box 170900 Boston, MA 02117	PUBLIC	N/A	Programs	5,000
Year Up 93 Summer Street Boston, MA 02110	PUBLIC	N/A	Programs	2,500
<b>Total . . . . .</b>			<b>► 3a</b>	<b>566,000</b>

## TY 2010 Investments Corporate Bonds Schedule

**Name:** John C and Eunice B Morrison  
Charitable Foundation  
**EIN:** 04-3310863

Name of Bond	End of Year Book Value	End of Year Fair Market Value
FHLMC & FNMA	1,296,715	1,260,721
Corporate Bonds	693,000	736,843

## TY 2010 Investments Corporate Stock Schedule

**Name:** John C and Eunice B Morrison  
Charitable Foundation  
**EIN:** 04-3310863

Name of Stock	End of Year Book Value	End of Year Fair Market Value
Stocks	4,792,701	5,669,271

## TY 2010 Investments Government Obligations Schedule

**Name:** John C and Eunice B Morrison  
Charitable Foundation  
**EIN:** 04-3310863

**US Government Securities - End of  
Year Book Value:** 959,958

**US Government Securities - End of  
Year Fair Market Value:** 1,054,082

**State & Local Government  
Securities - End of Year Book  
Value:** 0

**State & Local Government  
Securities - End of Year Fair  
Market Value:** 0

## TY 2010 Investments - Other Schedule

**Name:** John C and Eunice B Morrison

Charitable Foundation

**EIN:** 04-3310863

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
Mutual Funds	AT COST	1,976,847	2,141,239

## TY 2010 Other Decreases Schedule

**Name:** John C and Eunice B Morrison

Charitable Foundation

**EIN:** 04-3310863

Description	Amount
IRS - Payments made	8,832

## TY 2010 Other Expenses Schedule

**Name:** John C and Eunice B Morrison

Charitable Foundation

**EIN:** 04-3310863

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
UBS - Investment advisory fees	98,738	98,738		0
Foregin Fees	857	857		0
Filing fee	125	125		0
Insurance premium	1,663	0		0

## TY 2010 Taxes Schedule

**Name:** John C and Eunice B Morrison

Charitable Foundation

**EIN:** 04-3310863

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Foreign Taxes Paid	3,687	3,687		0