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Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052 2011

Fo	or cal	endar year 2011 or tax year beginning		, 2011,	and ending	<u> </u>	, 20
_	Name	of foundation				A Employer identi	fication number
	ЈОН 1	N & CHERIE MORRIS FAMILY FOUN	DATION			20-043469	98
	Numb	er and street (or P O box number if mail is not deliver	ed to street address)		Room/suite	B Telephone numb	er (see instructions)
						(9	49) 933-9891
	621	PONTE VEDRA BOULEVARD, UNIT	A			, ,	
_		r town, state, and ZIP code			<u> </u>		
						C If exemption applic	ation is
	PON	re vedra beach, fl 32082				pending, check her	ا
_		ck all that apply: Initial return	Initial return of	of a former pu	iblic charty		. □
G	Cile	Final return	Amended ret	•	iblic charity	D 1 Foreign organiza	
		Address change	H			2. Foreign organiza 85% test, check	
_	Cha	ck type of organization: X Section 501(Name chang			computation .	▶ □
'n						E If private foundation	status was terminated
1		ection 4947(a)(1) nonexempt charitable trust	Other taxable pri			under section 507(I	o)(1)(A), check here . D
ı		1 -	unting method X C	asn Acc	rual		in a 60-month termination
	-		ther (specify)			under section 507(b)(1)(B), check here . P
			column (d) must be or	T Cash basis ,			1 100
j	arti	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 instructions))	(a) Revenue and expenses per books	(b) Net inve	t t	(c) Adjusted net income	(d) Disbursements for chantable purposes
-	1		30,296.				(cash basis only)
	1 2	Contributions, giffs, grants, etc., received (attach schedule) if the foundation is not required to attach Sch. R.	50,250.				· · · · · · · · · · · · · · · · · · ·
	3	allediodi b	15		15.		ATCH 1
	4	Interest on savings and temporary cash investments	1,582		1,582.	· · · · · · · · · · · · · · · · · · ·	ATCH 2
	-	Dividends and interest from securities	1,302.		1,302.		AICH Z
	Ι.	Gross rents		 			
	l	Net rental income or (loss)	18,512.				
Revenue	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales proce for all 121, 320.	10,312.				
Ver	l _	assets on line oa		1	8,512.		
å	7	Capital gain net income (from Part IV, line 2)			8,312.		
	8	Net short-term capital gain					
	9 10 a	Income modifications · · · · · · · · · · · · · · · · · · ·		 			
		and allowances • • • •					
	L	Less: Cost of goods sold .		 			
		Gross profit or (loss) (attach schedule)		-			
	11	Other income (attach schedule)		 	100		
_	12	Total. Add lines 1 through 11		+	0,109.		
	13	Compensation of officers, directors, trustees, etc		1			
,.	14	Other employee salanes and wages		 	·		-
Ses	15	Pension plans, employee benefits					-
ě	16 a	Legal fees (attach schedule)	1 200		CO.		
X	b	Accounting fees (attach schedule) ATCH 3	1,390.		695.		695
9	C	Other professional fees (attach schedule) . *.	523.		523.		
ati	17	Interest					-
istr	16 a b c 17 18 19 20 21 22 23 24	Taxes (attach schedule) (see instructions)	229.		229.		
듣	19	Depreciation (attach schedule) and depletion .					
þ	20	Occupancy					
Þ	21	Travel, conferences, and meetings	-	<u> </u>			
4	22	Profiting and publications					
ing	23_	Other expenses (attach schedule)					ļ
rat	24	Total operating and administrative expenses.			1		
3pe	¥	Addylines 13 through 23	2,142.	<u> </u>	1,447.		695
٣	25	Contributions, grits, grants paid	56,524.				56,524
L	28-	Total expenses and disbursement Add lines 24 and 25	58,666.	ļ	1,447.		57,219
L	27	Sampline 26 from line 12	1	1	[
	а	Excess of revenue over expenses and disbursements	-8,261.				<u> </u>
	b	Net investment income (if negative, enter -0-)]	8,662.		
	ء ا	Adjusted net income (if negative enter -0-)					

*ATCH 4 JSA ** ATCH 5

Form 990-PF (2011)

PAGE 1

1 2

	Attached schedules and amounts in the description column should be for end-of-year		Beginning of year	f year	
نا	art II	Balance Sheets description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	8,864.	6,115.	<u>6,115</u> .
ı	3	Accounts receivable			
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)		-	
		Less allowance for doubtful accounts	l l	-	· - · · · · · · · · · · · · · · · · · · ·
ध	8	Inventories for sale or use			
ssets	9	Prepaid expenses and deferred charges			
ĕ		Investments - U S and state government obligations (attach schedule)			
		Investments - corporate stock (attach schedule) ATCH 6.	27,233.	21,721.	21,409.
	11 C	Investments - corporate bonds (attach schedule)			
					
	12 13 14	Investments - mortgage loans Investments - other (attach schedule) Land, buildings, and			
		equipment basis Less accumulated depreciation (attach schedule)			
	15 16	Other assets (describe Total assets (to be completed by all filers - see the			
	16	Instructions Also, see page 1, item I)	36,097.	27.836	27,524.
_	17	Accounts payable and accrued expenses	30,037.	27,030.	277324.
	18	Grants payable			
s		Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	1		
ją	21	Mortgages and other notes payable (attach schedule)	i i		
تّ	22	Other liabilities (describe			1
	23	Total liabilities (add lines 17 through 22)			
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			ŧ
S	24	Unrestricted	36,097.	27,836.	
ances	25	Temporanly restricted			
		Permanently restricted			
or Fund Ba		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
0	27	Capital stock, trust principal, or current funds			
S	28	Paid-in or capital surplus, or land, bldg , and equipment fund		·	
Assets	29	Retained earnings, accumulated income, endowment, or other funds			
Ā	30	Total net assets or fund balances (see instructions)	36,097.	27,836.	
Net	31	Total liabilities and net assets/fund balances (see			
_		instructions)	36,097.	27,836.	
_		Analysis of Changes in Net Assets or Fund			
1		Il net assets or fund balances at beginning of year - Part			22.22
		of-year figure reported on prior year's return)		I - I	36,097.
		er amount from Part I, line 27a		2	-8,261.
		er increases not included in line 2 (itemize)			22.22
4	Add	lines 1, 2, and 3 reases not included in line 2 (itemize) ATTACH		4	27,836.
					07.000
<u>6</u>	Lota	al net assets or fund balances at end of year (line 4 minus line	e ο) - Μαπ II, column (b), li	ne 30 6	27,836.

	and Losses for Tax on In		(b) How	(c) Date	40.5
	d describe the kind(s) of property sold (nck warehouse, or common stock, 200	. • .	P-Purchase	acquired (mo., day, yr)	(d) Date sold (mo , day, yr)
1a SEE PART IV SCHE		310 1112 00)	D-Donation	(,,,,,,,,	 -
b				-	
С					
d					
е			1		
(e) Gross sales pnce	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (le (e) plus (f) min	
_a				<u> </u>	
b					
С			<u> </u>		
<u>d</u>					
<u>e</u>		<u> </u>			
Complete only for assets s	showing gain in column (h) and owned	by the foundation on 12/31/69		Gains (Col (h) g	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (ı), ıf any	_∞	(k), but not less t Losses (from o	
_a					
<u>b</u>				<u> </u>	
C			1		· · · · · · · · · · · · · · · · · · ·
<u>d</u>			ļ		
<u>e</u>	<u> </u>		 		
2 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	2		18,512.
	or (loss) as defined in sections 122				
=		structions) If (loss), enter -0- in	.		
Part I, line 8	<u></u>	<u> </u>	3		0
Part V Qualification \	<u> Jnder Section 4940(e) for Rec</u>	duced Tax on Net Investment Ir	ncome		
	•	stable amount of any year in the base	period?		Yes No
		see the instructions before making a	ny entries		
(a)	1		ily entitles	(d)	
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		Distribution ra (col (b) divided by	
2010				(cor (b) divided by	ωι (ε))
2009					
2008	·				
2007					
2006					
2 Total of line 1, column (d)			2		
3 Average distribution ratio	for the 5-year base period - divide	the total on line 2 by 5, or by the			
number of years the found	dation has been in existence if less	than 5 years	3		
4 Enter the net value of non	charitable-use assets for 2011 from	m Part X, line 5	4		
5 Multiply line 4 by line 3			5		
6 Enter 1% of net investmen	nt income (1% of Part I, line 27b)		6		-
7 Add lines 5 and 6			7	-	
O Entor conditions distant	no from Dort VII. has 4				
8 Enter qualifying distribution If line 8 is equal to or git Part VI instructions	reater than line 7, check the box	c in Part VI, line 1b, and complete	that part	using a 1% ta	x rate. See the

om 9	90-PF (2011)			age 4
Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instru	ıctio	ns)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1)			i
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		3	73.
	here ▶ i and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of J Part I, line 12, col (b)	-		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0
3	Add lines 1 and 2		3	73.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0
5	Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-		3	73.
6	Credits/Payments			
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a			i
b	Exempt foreign organizations - tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868)			E
d	Backup withholding erroneously withheld			;
7	Total credits and payments Add lines 6a through 6d			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		3	73.
0	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
1	Enter the amount of line 10 to be Credited to 2012 estimated tax Refunded 11			
	t VII-A Statements Regarding Activities	-		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate		Yes	No
	or intervene in any political campaign?	1a		<u> </u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the		i	
	instructions for definition)?	1b		<u> </u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	1		E
	distributed by the foundation in connection with the activities			
	Did the foundation file Form 1120-POL for this year?	1c		<u> X</u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			i
	(1) On the foundation \$\Bigs\\$			ł
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			1
_	on foundation managers \$		~	i
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X_
	If "Yes," attach a detailed description of the activities		- 1	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of		1	х
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		<u>x</u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T	5		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
•	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			,
	conflict with the state law remain in the governing instrument?	6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Х	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	Ť		
	CA,			
Ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		.,	
_	(or designate) of each state as required by General Instruction G ² If "No," attach explanation	8b	X	-
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		-	
	4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete			х
	Part XIV	_ 9		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	40		х

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 instructions)		X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified		
person had advisory privileges? If "Yes," attach statement (see instructions)	ļ	X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	X	<u> </u>
Website address ▶N/A		
14 The books are in care of ► CHERIE MORRIS Telephone no ► 949-933-98	91	
Located at ▶621 PONTE VEDRA BLVD., UNIT A PONTE VEDRA BEACH, FL ZIP+4 ▶ 32082		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	🕨	· []
and enter the amount of tax-exempt interest received or accrued during the year		
16 At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority	Yes	No
over a bank, secunties, or other financial account in a foreign country?		<u> </u>
See 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	1/	T
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	Yes	No
1 a Dunng the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No		
		,
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?		
disqualified person? Yes X No Yes X No Yes X No Yes X No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		
(5) Transfer any income or assets to a disqualified person (or make any of either available for		
the benefit or use of a disqualified person)?		
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		
foundation agreed to make a grant to or to employ the official for a penod after		
termination of government service, if terminating within 90 days)		
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		
section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		х
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 2011?		X
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 2011, did the foundation have any undistributed income (lines 6d and		
6e, Part XIII) for tax year(s) beginning before 2011?		'
If "Yes," list the years		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		
(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		١.,
all years listed, answer "No" and attach statement - see instructions)		X
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No	İ	1
b If "Yes," did it have excess business holdings in 2011 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 penod? (Use Schedule C, Form 4720, to determine if the		
foundation had excess business holdings in 2011)		х
4a Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes?		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	1	1
charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?		X

om 9	90-PF (2011)					Page 6
Par	VII-B Statements Regarding Activities for	Which Form 47	20 May Be Requir	ed (continued)		
5 a	During the year did the foundation pay or incur any amount	to				
	(1) Carry on propaganda, or otherwise attempt to influence	legislation (section 4	945(e))?	. Yes X No		i
	(2) Influence the outcome of any specific public ele	ction (see section 4	1955), or to carry or	` 1,		
	directly or indirectly, any voter registration drive?			Yes X No	,	
	(3) Provide a grant to an individual for travel, study, or other				,	
	(4) Provide a grant to an organization other than a			. — —		i
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (se	-			.	
	(5) Provide for any purpose other than religious, ch					
	purposes, or for the prevention of cruelty to children or		• •			
L						
В	If any answer is "Yes" to 5a(1)-(5), did any of the		• •	xceptions described in	1	
	Regulations section 53 4945 or in a current notice regard	_	•	· · · · · · · · · · · · · · · · · · ·	5b	 ^ -
	Organizations relying on a current notice regarding disaster					
С	If the answer is "Yes" to question 5a(4), does the			[]		,
	because it maintained expenditure responsibility for the gra	nt?		. Yes X No	·	1 1
	If "Yes," attach the statement required by Regulations section	on 53 4945-5(d)				
6а	Did the foundation, during the year, receive any fund	•	• • • •			
	on a personal benefit contract?			. Yes X No	,	i
þ	Did the foundation, during the year, pay premiums, directly	or indirectly, on a pen	sonal benefit contract?		6b	X
	If "Yes" to 6b, file Form 8870					
7 a	At any time during the tax year, was the foundation a party	to a prohibited tax she	elter transaction?	. Yes X No	,	'
ь	If "Yes," did the foundation receive any proceeds or have a				7ь	l x
Par	VIII Information About Officers, Directors	s, Trustees, Four	idation Managers	, Highly Paid Emp	loyees,	
1	and Contractors List all officers, directors, trustees, foundation ma	nagers and their co	ompensation (see in	etructions)		
•		(b) Title, and average	(c) Compensation (if not paid, enter	(d) Contributions to	(e) Expens	se account,
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other all	
			-		•	
AT	FACHMENT 8		d	d d		0
2	Compensation of five highest-paid employees	(other than thos	se included on line	e 1 - see instruction	ons) If n	one enter
-	"NONE."	(outor than thos	oc moladed on mi	o i - occ madada	5115 <i>j</i> . 11 11	one, enter
		(b) Title, and average		(d) Contributions to employee benefit	(a) Evnens	se account,
(a	Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred	other all	
		devoted to position		compensation		
	NOVE					
	NONE					
			1			
_ _ _						
Tota	number of other employees paid over \$50,000 .					
						0-PF (2011)

and Contractors (continued) 3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE NONE **Total number of others receiving over \$50,000 for professional services ▶ NO **Textix-A Summary of Direct Charitable Activities** Lust the foundation's four largest direct chanitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc 1 N/A 2	and Contractors (continued) 3 Five highest-paid independent contractors for professional services (see instructions). If none, et (a) Name and address of each person paid more than \$50,000 (b) Type of some NONE NONE Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities	nter "NONE." ervice (c) Compensation
(a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE Compensation	(a) Name and address of each person paid more than \$50,000 (b) Type of s NONE Otal number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct chantable activities during the tax year include relevant statistical information such as organizations and other beneficianes served, conferences convened, research papers produced, etc. 1 N/A	ervice (c) Compensation
NONE None	NONE otal number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct chantable activities during the tax year include relevant statistical information such as organizations and other beneficianes served, conferences convened, research papers produced, etc. 1 N/A	▶ NON
tal number of others receiving over \$50,000 for professional services NO. No. No. No. No. No. No. No.	otal number of others receiving over \$50,000 for professional services 2art IX-A Summary of Direct Charitable Activities List the foundation's four largest direct chantable activities during the tax year Include relevant statistical information such as organizations and other beneficianes served, conferences convened, research papers produced, etc. 1 N/A 2	
tal number of others receiving over \$50,000 for professional services NO. No. No. No. No. No. No. No.	otal number of others receiving over \$50,000 for professional services 2art IX-A Summary of Direct Charitable Activities List the foundation's four largest direct chantable activities during the tax year include relevant statistical information such as organizations and other beneficianes served, conferences convened, research papers produced, etc 1 N/A 2	
Expenses Lust the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc 1 N/A 2	Cust the foundation's four largest direct chantable activities during the tax year include relevant statistical information such as organizations and other beneficianes served, conferences convened, research papers produced, etc. 1 N/A 2	
Lust the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of programizations and other beneficianes served, conferences convened, research papers produced, etc. 1 N/A	List the foundation's four largest direct chantable activities during the tax year include relevant statistical information such as organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 N/A	
Expenses Lust the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc 1 N/A 2	Cust the foundation's four largest direct chantable activities during the tax year include relevant statistical information such as organizations and other beneficianes served, conferences convened, research papers produced, etc. 1 N/A 2	
art IX-A Summary of Direct Charitable Activities ust the foundation's four largest direct chantable activities during the tax year Include relevant statistical information such as the number of programizations and other beneficianes served, conferences convened, research papers produced, etc. IN/A But IX-A But IX-A But IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount NONE	art IX-A Summary of Direct Charitable Activities List the foundation's four largest direct chantable activities during the tax year include relevant statistical information such as organizations and other beneficianes served, conferences convened, research papers produced, etc. N/A	
Summary of Direct Charitable Activities ust the foundation's four largest direct chantable activities during the tax year Include relevant statistical information such as the number of programizations and other beneficianes served, conferences convened, research papers produced, etc N/A	art IX-A Summary of Direct Charitable Activities ust the foundation's four largest direct chantable activities during the tax year include relevant statistical information such as organizations and other beneficianes served, conferences convened, research papers produced, etc. N/A	
List the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of programizations and other beneficianes served, conferences convened, research papers produced, etc. 1 N/A 2	List the foundation's four largest direct chantable activities during the tax year include relevant statistical information such as organizations and other beneficianes served, conferences convened, research papers produced, etc. 1 N/A	
art IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount NONE	organizations and other beneficianes served, conferences convened, research papers produced, etc 1 N/A 2	
2	2	ne number of Expenses
art IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount NONE		
art IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount NONE		
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art IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount NONE	3	
art IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount NONE	3	
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Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount NONE		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount NONE		
NONE		
		Amount
	NONE	
	<u></u>	

All other program-related investments See instructions

Form	990-PF (2011)		Page 8
Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreig see instructions.)	n foundatio	ons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:	1	
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3		3	
4	Cash deemed held for chantable activities Enter 1 1/2 % of line 3 (for greater amount, see		
		4	
5	instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	
6	Minimum investment return. Enter 5% of line 5	6	
Pa	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	· · · · · · · · · · · · · · · · · · ·	
	foundations and certain foreign organizations check here in and do not complete this particle.	art)	
1	Minimum investment return from Part X, line 6	1	
2a			
b	Tax on investment income for 2011 from Part VI, line 5]	
		2c	373.
3	Add lines 2a and 2b Distributable amount before adjustments Subtract line 2c from line 1	3	-373.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	-373.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	
Pa	rt XII Qualifying Distributions(see instructions)	1 - 1 - 1 - 1 - 1 - 1	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	T	
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	4.	E7 210
a b		1a	57,219.
	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out chantable, etc.,	10	· · · · · · · · · · · · · · · · · · ·
2			
•	purposes Amounts set aside for specific chantable projects that satisfy the:	2	
3		ا ا	
a	Suitability test (prior IRS approval required)		
b	Cash distribution test (attach the required schedule)		57.010
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	57,219.
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 instructions)	5	F7 010
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	57,219.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when ca qualifies for the section 4940(e) reduction of tax in those years	iculating wh	etner the foundation

	rt XIII Undistributed Income (see instru	ıctions)			rage 0
		(a)	(b)	(c)	(d)
1	Distributable amount for 2011 from Part XI, line 7	Corpus	Years pnor to 2010	2010	2011
2	Undistributed income, if any, as of the end of 2011.		,		
а	Enter amount for 2010 only				e e
ь	Total for pnor years 20 09 20 08 20 07				
3	Excess distributions carryover, if any, to 2011				-
а	From 2006 37,881.				4
b	From 2007 72,214.				,
С	From 2008 57,614.				!
d	From 2009				
f	Total of lines 3a through e	280,429.	<u></u>		
4	Qualifying distributions for 2011 from Part XII,				; {
	line 4 ▶ \$ 57,219.				t 1
а	Applied to 2010, but not more than line 2a				
b	Applied to undistributed income of prior years (Election required - see instructions)				
С	Treated as distributions out of corpus (Election required - see instructions)				
d	Applied to 2011 distributable amount				
е	Remaining amount distributed out of corpus	57,219.			
5	Excess distributions carryover applied to 2011				
6	(If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	337,648.			
b	Pnor years' undistributed income Subtract				
С	Enter the amount of pnor years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d	Subtract line 6c from line 6b Taxable				
е	amount - see instructions Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount - see instructions				
f	Undistributed income for 2011 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2012				
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8	Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)	37,881.			
9	Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	299,767.			
10	Analysis of line 9				
a			İ		
b	Excess from 2008]			
C	Excess from 2009 56,514.				
đ	Excess from 2010 56, 206.				
e	Excess from 2011 57, 219.				<u> </u>

_	(1) Value of all assets					
					· · · · · ·	
_	(2) Value of assets qualifying under section					
	4942(j)(3)(B)(i)					
	enter 2/3 of minimum invest-					
	ment return shown in Part X,					
1	line 6 for each year listed					
	"Support" alternative test - enter					
	(1) Total support other than gross investment income				•	
	(interest, dividends, rents,					
	payments on securities loans (section 512(a)(5)),					
	or royalties)					
	(2) Support from general public and 5 or more					
	exempt organizations as					
	provided in section 4942 (j)(3)(B)(iii)					
	(3) Largest amount of sup-					
	port from an exempt					
	organization (4) Gross investment income					
	\ 	ry Information (C	omplete this part	only if the found	ation had \$5 000	or more in assets
		luring the year - se		,	40,000	
	Information Regarding	Foundation Manager	s:			
а	List any managers of	the foundation who l	nave contributed mo	re than 2% of the tota	I contributions receiv	ed by the foundation
	before the close of any	tax year (but only if the	ney have contributed	more than \$5,000) (S	ee section 507(d)(2))	•
	N/A					
b	List any managers of	the foundation who	own 10% or more of	of the stock of a corpo	oration (or an equally	large portion of the
	ownership of a partner					and parasit or and
				•		
	N/A					
			Gift, Loan, Scholarsh	nip, etc., Programs:		···
2	Information Regarding	Contribution, Grant,				
	Information Regarding		-	to preselected char	table organizations a	and does not accept
	Information Regarding Check here ▶ ☐ if t	he foundation only	makes contributions	to preselected charrants, etc. (see instruct		
	Information Regarding	he foundation only or funds if the found	makes contributions ation makes gifts, gr			
	Information Regarding Check here ▶ if t unsolicited requests fo other conditions, comp	he foundation only or funds if the found lete items 2a, b, c, ar	makes contributions ation makes gifts, gr ad d	ants, etc. (see instruct	ions) to individuals o	
	Information Regarding Check here ▶ if to unsolicited requests foother conditions, comp The name, address, an	he foundation only or funds if the found lete items 2a, b, c, ar	makes contributions ation makes gifts, gr ad d	ants, etc. (see instruct	ions) to individuals o	
а	Information Regarding Check here ▶ ☐ if to unsolicited requests for other conditions, comp The name, address, an N/A	he foundation only or funds If the found lete items 2a, b, c, ar d telephone number o	makes contributions ation makes gifts, gi ad d f the person to whom	ants, etc. (see instruct	addressed:	
а	Information Regarding Check here ▶ if to unsolicited requests foother conditions, comp The name, address, an	he foundation only or funds If the found lete items 2a, b, c, ar d telephone number o	makes contributions ation makes gifts, gi ad d f the person to whom	ants, etc. (see instruct	addressed:	
а	Information Regarding Check here ▶ if t unsolicited requests fo other conditions, comp The name, address, an N/A The form in which appli	he foundation only or funds If the found lete items 2a, b, c, ar d telephone number o	makes contributions ation makes gifts, gi ad d f the person to whom	ants, etc. (see instruct	addressed:	
a b	Information Regarding Check here ▶ if t unsolicited requests fo other conditions, comp The name, address, an N/A The form in which appli	the foundation only or funds if the found of the items 2a, b, c, and telephone number of cations should be sub-	makes contributions ation makes gifts, gi ad d f the person to whom	ants, etc. (see instruct	addressed:	
a b	Information Regarding Check here ▶ if t unsolicited requests fo other conditions, comp The name, address, an N/A The form in which appli	the foundation only or funds if the found of the items 2a, b, c, and telephone number of cations should be sub-	makes contributions ation makes gifts, gi ad d f the person to whom	ants, etc. (see instruct	addressed:	
a b	Information Regarding Check here ▶ if to the transposition in the unsolicited requests for other conditions, composition in the name, address, an N/A The form in which applies N/A Any submission deadling	the foundation only or funds if the found of the items 2a, b, c, and telephone number of cations should be sub-	makes contributions ation makes gifts, gi ad d f the person to whom	ants, etc. (see instruct	addressed:	
a b	Information Regarding Check here ▶ if to unsolicited requests for other conditions, composite name, address, an N/A The form in which appliation N/A Any submission deadling	the foundation only or funds if the found olete items 2a, b, c, are discontinuous should be sub-	makes contributions ation makes gifts, gr id d f the person to whom mitted and information	ants, etc. (see instruct applications should be a and materials they sho	addressed:	r organizations under
a b	Information Regarding Check here ▶ if to the transposition in the unsolicited requests for other conditions, composition in the name, address, an N/A The form in which applies N/A Any submission deadling	the foundation only or funds if the found olete items 2a, b, c, are discontinuous should be sub-	makes contributions ation makes gifts, gr id d f the person to whom mitted and information	ants, etc. (see instruct applications should be a and materials they sho	addressed:	r organizations under
a b	Information Regarding Check here ▶ if to unsolicited requests for other conditions, comp The name, address, an N/A The form in which applie N/A Any submission deadlin N/A Any restrictions or lifted factors	the foundation only or funds if the found olete items 2a, b, c, are discontinuous should be sub-	makes contributions ation makes gifts, gr id d f the person to whom mitted and information	ants, etc. (see instruct applications should be a and materials they sho	addressed:	r organizations under
a b c d	Information Regarding Check here ▶ if to unsolicited requests for other conditions, composite The name, address, an N/A The form in which applie N/A Any submission deadlin N/A Any restrictions or liffactors N/A	the foundation only or funds if the found olete items 2a, b, c, are discontinuous should be sub-	makes contributions ation makes gifts, gr id d f the person to whom mitted and information	ants, etc. (see instruct applications should be a and materials they sho	addressed:	r organizations under
a b c d	Information Regarding Check here ▶ if to unsolicited requests for other conditions, comp The name, address, an N/A The form in which applie N/A Any submission deadlin N/A Any restrictions or lifted factors	he foundation only or funds If the found lete items 2a, b, c, ard telephone number of cations should be submes:	makes contributions ation makes gifts, gr id d f the person to whom mitted and information	ants, etc. (see instruct applications should be a and materials they sho	addressed:	r organizations under

Form 990-PF (2011)				Page 11
Part XV Supplementary Information	(continued)		. <u> </u>	
3 Grants and Contributions Paid Duri Recipient Name and address (home or business)	ng the Year or App	roved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Purpose of grant or contribution	Amount
a Paid during the year				
		1		
ATTACHMENT 9				
ATTACHMENT 5				
	}		ļ	
		1		
				İ
		1		
			1	
				1
			<u> </u>	
Total	<u> </u>		▶ 3a	56,524.
b Approved for future payment		1	1	İ
				1
		ł		

Total

Part XVI-	A Analysis of Income-Produ	ucing Act	ivities	_		
	amounts unless otherwise indicated	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e)
_		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income
	service revenue		7	Excusion code	,,,,,,	(See instructions)
h.				-		
				+	<u> </u>	
				+		 <u>-</u>
		 		 		
• —						
f				 		
-	and contracts from government agencies		 	+		·
	ship dues and assessments		·	14	<u> </u>	15.
	n savings and temporary cash investments is and interest from securities			14		1,582.
	al income or (loss) from real estate			+		1,302.
	-financed property					
						-
	I income or (loss) from personal property			 		
	vestment income	· · · · · · · · · · · · · · · · · · ·		18		18,512.
-	oss) from sales of assets other than inventory			10		10,312.
	me or (loss) from special events			-		
	rofit or (loss) from sales of inventory		1			
_	venue a			- 		
				1	-	
e				-		20 100
	Add columns (b), (d), and (e)		<u> </u>		<u> </u>	20,109.
	dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calcul		• • • • • • • • • • • • •		13	20,109.
	B Relationship of Activities		complishment of E	vomnt Dur	2020	
Line No.	Explain below how each activit					
▼	accomplishment of the foundation	on's exemp	t purposes (other than	by providing	funds for such purpose	s) (See instructions)
3,4	INVESTMENT INCOME FRO	M SECTIO	דיידים דאטיבטיים י	TO FADM F	CIMD	
	FOR EXEMPT PURPOSE OF			IO EARN E	OND	
8	INVESTMENT INCOME FRO			PO PADN P	ZUMD	
	FOR EXEMPT PURPOSE OF			IO EARN E	UND	····
	FOR EXEMPT FORFOSE OF	THE OR	GANIZATION		<u></u>	
						
					<u>.</u>	
						
				-		
						
						
			 			
						
			· · · · · · · · · · · · · · · · · · ·			
					·- ···	
JSA 454402 4 000						Form 990-PF (2011)
1E1492 1 000						

Form 9	990-PF (2	011)								Pa	ige 13
Par	t XVII	Information R Exempt Organ		ansfers To a	nd Transact	tions an	d Relation	ships With No	nchar		
1	Did the	e organization directl	ly or indirectly	engage in any o	of the following	with an	v other organ	nization described	T	Yes	No
	in sect	tion 501(c) of the Cozations?								.00	_
_	_	ers from the reporting	foundation to a	nonchartable ov	compt organiza	f.					l
a									4-(4)		х
		sh							1a(1)	\vdash	X
h		her assets transactions		• • • • • • • • •		• • • • •		• • • • • • • • • • • • • • • • • • • •	1a(2)		
b		les of assets to a non	charitable even	ent organization						-	Х
	(1) Sa	rchases of assets from	m a nanchantah	ipi organization Io ovemnt ergeni			• • • • • • •	• • • • • • • • • • •	15(1)		X
	(2) Pa	ntal of facilities, equin	ment or other:	ne exempt organi	zauon	• • • • •	• • • • • • •	• • • • • • • • • • •	1b(2)	 - 	X
	(4) Po	ntal of facilities, equip	mente	assets			• • • • • • •	• • • • • • • • • • • • • • • • • • • •	1b(3)		X
	(5) Lo	imbursement arrange		• • • • • • • • •		• • • • •	• • • • • • •	• • • • • • • • • • • • • • • • • • • •	1b(4)		X
	(6) Pe	ans or loan guarantee rformance of services	or membershir	or fundraising s					1b(5)		X
_		g of facilities, equipme						• • • • • • • • • •	1b(6)		X
4	If the	answer to any of th	ent, maining lists	e, cuiei assets, ci	paid employe	shedule (Column (b) o	hould always show	1c		
u	value	of the goods, other	assets or serv	ices aiven by the	e renorting so	undation	If the found:	nioulu always show	than	fair m	arket
	value	in any transaction or	r shanno arran	gement, show in	column (d) t	he value	of the goods	other assets or s	ervice	s rece	eived
(a) L	ine no	(b) Amount involved		nonchantable exempt				s, transactions, and shar			
	1	N/A	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			N/A				3	
				·							
			1					 			
					-			<u> </u>			
							-				
							-	·	_		
	descri	foundation directly bed in section 501(c) s," complete the follow	of the Code (c							es X] No
	11 103	(a) Name of organization		(b) Type	of organization			c) Description of relations			
							;	······································			
							-				
Sig		or penalties of penury, I declaration of	are that I have exam preparer (other than	ined this return, includit taxpayer) is based on all	ing accompanying s	chedules and preparer has	statements, and to	o the best of my knowled	ge and b	elief, it	is true
Her		nature of officer or trustee	Wines_	Date	25-12	Title	<i>BULL</i>		reparer		return below No
			·	· • T_ · · ·							==
Paid	d	Print/Type preparer's	name	Preparer's sig	nature	• _	Date	Check if	PTIN		
		DEBLA CL	ALKDIXO	NAHILLE!	Yakkle	M/h	3-19-	self-employed	P000	4350	3
	parer		DDECKE CLAF					Firm's EIN ▶ 95-3	50340	04	
USE	Only	Firm's address > 44	4-875 DEEP	CANYON ROAD	, SUITE 1						

92260

PALM DESERT, CA

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.

OMB No 1545-0047

2011

Name of the organization JOHN & CHERIE MORRIS	FAMILY FOUNDATION	Employer identification number
Organization type (check one)		20-0434698
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 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt chantable trust treated as a private foundation.	ation
	501(c)(3) taxable private foundation	
	So ((S)(S) (LALLES PINALE ISLANDIS	
	vered by the General Rule or a Special Rule. (8), or (10) organization can check boxes for both the General Rule and a	Special Rule. See
General Rule		
_	ling Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 c e contributor. Complete Parts I and II	or more (in money or
Special Rules		
under sections 509(a)	B) organization filing Form 990 or 990-EZ that met the 33 1/3 % support to (1) and 170(b)(1)(A)(vi) and received from any one contributor, during the 000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) For II	year, a contribution of
during the year, total	7), (8), or (10) organization filing Form 990 or 990-EZ that received from a contributions of more than \$1,000 for use exclusively for religious, chases, or the prevention of cruelty to children or animals. Complete Parts I, I	ntable, scientific, literary,
during the year, contr not total to more than year for an exclusivel	7), (8), or (10) organization filing Form 990 or 990-EZ that received from a libutions for use exclusively for religious, charitable, etc., purposes, but t \$1,000 If this box is checked, enter here the total contributions that were fy religious, charitable, etc., purpose Do not complete any of the parts unlication because it received nonexclusively religious, charitable, etc., contributions.	hese contributions did received during the ess the General Rule butions of \$5,000 or
990-EZ, or 990-PF), but it must	not covered by the General Rule and/or the Special Rules does not file Stanswer "No" on Part IV, line 2, of its Form 990; or check the box on line f, to certify that it does not meet the filing requirements of Schedule B (Fo	H of its Form 990-EZ or on
For Paperwork Reduction Act Notice,	see the Instructions for Form 990, 990-EZ, or 990-PF. Sched	lule B (Form 990, 990-EZ, or 990-PF) (2011)

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization JOHN & CHERIE MORRIS FAMILY FOUNDATION Employer identification number 20-0434698

Part I	Contributors (see instructions). Use duplicate copies of Pa	art I if additional space is need	ded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	JOHN AND SHARON MORRIS FAMILY TRUST 621 A PONTE VEDRA BLVD PONTE VEDRA, FL 32082-2982	\$ <u>15,000</u> .	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2_	JOHN AND SHARON MORRIS FAMILY TRUST 621 A PONTE VEDRA BLVD PONTE VEDRAS, FL 32082	\$ <u>15,296.</u>	Person X Payroll X Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		. \$.	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		. \$.	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$ - \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Name of organization JOHN & CHERIE MORRIS FAMILY FOUNDATION

Employer identification number 20-0434698

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. Part II (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) 323 SHARES SIMON PROPERTY GROUP DEL 2 15,296. 03/11/2011 (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions)

Employer identification number

20-0434698

For o	otal more than \$1,000 for the year. rganizations completing Part III, ente butions of \$1,000 or less for the ye luplicate copies of Part III if additiona	er the total of <i>exclusively</i> i ar. (Enter this information	through (e) and the following line entry. religious, charitable, etc., n once. See instructions.) \$\bigsim \frac{1}{2} \]
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, and Zi	P+4	Relationship of transferor to transferee
No.			
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_ _			
		(e) Transfer of gift	<u> </u>
	Transferee's name, address, and Z	IP + 4	Relationship of transferor to transferee
No. om art i	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_			
		(e) Transfer of gift	
	Transferee's name, address, and Z	IP+4	Relationship of transferor to transferee
_			
) No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
art I	(b) i dipose oi giit	(c) 650 of girl	(a) boompastion and gift to the
-			
		(e) Transfer of gift	

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

<u> </u>	<u> </u>	<u> </u>	<u>R TAX ON</u>	<u>INVEST</u>	M	IENT INCOM	<u>/IE</u>
Kınd of Property			nption		P of D	Date acquired	Date sold
Gross sale Depreciation price less allowed/ expenses of sale allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
	SIMON PROPE				D	04/19/2010	03/11/2011
2,325.	PROPERTY TY:	PE: SECURIT	IES			383.	
	LORD ABBETT PROPERTY TY			FUND C	₽	02/22/2011	12/20/2011
60,000.	60,294.	EB. BEGORIT	113			-294.	
7.	PIMCO TOTAL PROPERTY TY 7.				P	06/18/2010	02/22/2011
	SIMON PROPE				P	10/11/2002	03/11/2011
31,812.	PROPERTY TY 13,339.	PE: SECURIT	165			18,473.	
	PIMCO TOTAL PROPERTY TY				Р	08/23/2004	02/22/2011
27,176.	27,226.		-,			-50.	
OTAL GAIN (LOSS)							

FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

REVENUE NET AND EXPENSES INVESTMENT PER BOOKS INCOME	15.	15.
REV A EXPE		TOTAL
DESCRIPTION	MERRILL LYNCH	

	NET	INVESTMENT	INCOME	1,582.
REVENUE	AND	EXPENSES	PER BOOKS	1,582.
			DESCRIPTION	MERRILL LYNCH
			DESC	MERR

1,582.

TOTAL

FEES	
ACCOUNTING	
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E-	•
PART	
990PF. PAI	
RM 990PF.	

CHARITABLE PURPOSES	. 695	695.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	695.	695.
REVENUE AND EXPENSES PER_BOOKS	1,390.	1,390.
		TOTALS
DESCRIPTION	ACCOUNTING FEES	

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

NET INVESTMENT INCOME	523.	523.
REVENUE AND EXPENSES PER BOOKS	523.	523.
DESCRIPTION	MERRILL LYNCH INVESTMENT FEES	TOTALS

NET INVESTMENT INCOME	10. 219.	229.
REVENUE AND EXPENSES PER BOOKS	10. 219.	229.
		TOTALS
DESCRIPTION	FILING FEES IRS	

STOCK
CORPORATE
H
ART
а
990PF, P

ENDING <u>FMV</u>	21,409.	21,409.
ENDING BOOK VALUE	21,721.	21,721.
BEGINNING BOOK VALUE	27,233.	27,233.
DESCRIPTION	MERRILL LYNCH PORTFOLIO 9208 PIMCO TOT RETURN FD CL A	TOTALS

ATTACHMENT	AΤ	TΑ	CHMENT	7
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FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

AMOUNT

FEDERAL INCOME TAX

TOTAL

AND TRUSTEES
DIRECTORS,
F OFFICERS,
I - LIST O
PART VII
ORM 990PF,

ATTACHMENT 8

	0	0	
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRESIDENT	SECRETARY/TREASURER	
NAME AND ADDRESS	JOHN MORRIS 621 PONTE VEDRA BOULEVARD, UNIT A PONTE VEDRA BEACH, FL 32082	CHERIE MORRIS 621 PONTE VEDRA BOULEVARD, UNIT A PONTE VEDRA BEACH, FL 32082	

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	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
RECIPIENT NAME AND ADDRESS	AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
THE LIVING DESERT 47900 PORTOLA AVE PALM DESERT, CA 92260	N/A PUBLIC	WILDLIFE EDUCATION AND PRESERVATION	5,000.
GEORGIA TECH ATHLETIC ASSOC & ALEXANDER THARPE FND 150 BOBBY DODD WAY, NW ATLANTA, GA 30332	N/A PUBLIC	ASSIST STUDENT ATHLETES FOR ACADEMIC SUCCESS	500.
EISENHOWER MEDICAL CENTER 39000 BOB HOPE DRIVE RANCHO MIRAGE, CA 92270	N/A PUBLIC	QUALITY HEALTH CARE FOR EVERYONE	35,714
GEORGIA TECH FOUNDATION 760 SPRING STREET, NW, SUITE 400 ATLANTA, GA 30308	N/A PUBLIC	SCHOLARSHIPS IN THE STATE OF GEORGIA	5,000.
CHILDREN'S HOSPITAL OF THE KINGS DAUGHTERS 601 CHILDREN'S LANE NORFOLK, VA 23507	N/A PUBLIC	PROVIDE QUALITY CHILDREN'S HEALTH SERVICES	100.
SUN VALLEY WRITERS CONFERENCE P.O BOZ 957 KETCHUM, ID 83340	N/A PUBLIC	PROMOTION OF EXCELLENCE IN WRITING	2,500

THE YEAR
PAID DURING T
IDNS
GRANTS AND CONTRIBUT
V - GRANTS
PF. PART X
OBM 990

ATTACHMENT 9 (CONT'D)

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
SUN VALLEY SUMMER SYMPHONY	N/A	ARTISTIC, EDUCATIONAL AND CULTURAL PROGRAMMING	1,000.
P.O. BOX 1914	PUBLIC		
SUN VALLEY, ID 83353			
CONSERVATION INTERNATIONAL	N/A	PRESERVE THE WORLD'S LANDSCAPES AND SEASCAPES BY	2,500.
2011 CRYSTAL DRIVE, SOUTH 500	PUBLIC	ESTABLISHING A GLOBAL CONSERVATION AGENDA	
ARLINGTON, VA 22202			
MAYO CLINIC	N/A	MAYO CLINIC HAS INSPIRED HOPE AND CONTRIBUTED TO	1,000.
200 FIRST ST SW	PUBLIC	HEALTH AND WELL-BEING BY PROVIDING THE BEST CARE	
ROCHESTER, MN 55905		TO EVERY PATIENT THROUGH INTEGRATED CLINICAL	
		PRACTICE, EDUCATION AND RESEARCH	
UNC CHAPEL HILL	N/A	OUR MISSION IS TO SERVE AS A CENTER FOR RESEARCH,	210.
CAMPUS BOX 9100	PUBLIC	SCHOLARSHIP AND CREATIVITY AND TO TEACH A DIVERSE	
CHAPEL HILL, NC 27599-9100		COMMUNITY OF UNDERGRADUATE, GRADUATE AND	
		PROFESSIONAL STUDENTS TO BECOME THE NEXT	
		GENERATION OF LEADERS	
HEALY HAILS OF JOY	N/A	MONTHERHOOD SUPPORT NETWORKS IN ETHOPIA	. 200
3101 N HAMPTON DRIVE, SUITE 1517	PUBLIC		
ALEXANDRIA, VA 22030			
BLAINE COUNTY HAYES COALITION	N/A	HELPING TO FEED AREA RESIDENTS WHO ARE FACING OR	1,000.
121 HONEYSUCKLE STREET	PUBLIC	AT RISK OF HUNGER	
BELLEVIEW, ID 83313			

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ATTACHMENT 9 (CONT'D)

AMOUNT	250.	750.	500.
PURPOSE OF GRANT OR CONTRIBUTION	TO REACH, WELCOME, AND INVOLVE NEWCOMERS IN OUR LIFE AS A COMMUNITY OF FAITH.	PROVIDE QUALITY CHILDREN'S HEALTH SERVICES	HELPING TO FEED AREA RESIDENTS WHO ARE FACING OR AT RISK OF HUNGER IN ADDITION, WORKING TO EDUCATE, EMPOWER AND ENLIGHTEN THE COMMUNITY ABOUT THE ISSUES OF HUNGER AND NUTRITION.
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	N/A	N/A	N/A
	PUBLIC	PUBLIC	PUBLIC
RECIPIENT NAME AND ADDRESS	TRINITY EPISCOPAL CHURCH	CHILDREN'S HOSPITAL OF THE KING'S DAUGHTER	CAPITAL AREA FOOD BANK
	2216 BALL AVENUE	601 CHILDREN'S LANE	645 TAYLOR STREET, NE
	GALVESTON, TX 77550	NORFOLK, VA 23507	WASHINGTON, DC 20017-2803

TOTAL CONTRIBUTIONS PAID 56,524

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T. See the Instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

2011

Name o	of estate or trust				Employer identifi	cation	number
J	OHN & CHERIE MORRIS FAMILY FOU	INDATION			20-04346	98	
Note:	Form 5227 filers need to complete only Par						
Part	Short-Term Capital Gains and Lo	sses - Assets	Held One Y	ear or Less			
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other (see instruction		(f) Gain or (loss) for the entire year Subtract (e) from (d)
1a							
		. 0.1. 1.1. 0.4	1		<u> </u>		00
b	Enter the short-term gain or (loss), if any, from	m Schedule D-1	, line 1b	• • • • • • • • • • • • • • • • • • • •	• • • • • • • •	1b	89.
2	Short-term capital gain or (loss) from Forms	4684, 6252, 678	31, and 8824			2	
	Net short-term gain or (loss) from partnership					3_	
	Short-term capital loss carryover. Enter Carryover Worksheet		•		•	4	()
5	Net short-term gain or (loss). Combine	lines 1a throug	jh 4 in colum	n (f) Enter here and	d on line 13,		0.0
Par	column (3) on the back		Held More 7	Than One Year	<u></u>	5	89.
r ar		(b) Date acquired	l		(e) Cost or other	hacia	(f) Gain or (loss) for
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(mo , day, yr)	(mo , day, yr)	(d) Sales price	(see instruction		the entire year Subtract (e) from (d)
6a							
	Enter the long-term gain or (loss), if any, fror	n Schedule D-1	line 6h			6b	18,423.
D						00	10,425.
7	Long-term capital gain or (loss) from Forms	2439, 4684, 625	52, 6781, and 8	824	• • • • • • • •	7	
8	Net long-term gain or (loss) from partnership	s, S corporation	ns, and other es	states or trusts		8	
9	Capital gain distributions					9	
10	Gain from Form 4797, Part I					10	
11	Long-term capital loss carryover. Enter	the amount, if	any, from li	ne 14 of the 2010	Capital Loss		,
12	Carryover Worksheet Net long-term gain or (loss). Combine li	nes 6a through	11 in colum	n (f) Enter here and	on line 14a,	11	
	column (3) on the back					12	18,423. e D (Form 1041) 2011

chedule D (Form 1041) 2011					Page 2
Part III Summary of Parts I and II Caution: Read the instructions before completing this p	204	(1) Beneficiaries' (see instr.)	(2) Estat		(3) Total
3 Net short-term gain or (loss)	13	(300 1130)	Oi tiust		89.
4 Net long-term gain or (loss):					
a Total for year	14a	•			18,423.
b Unrecaptured section 1250 gain (see line 18 of the wrksht.)	14b				
c 28% rate gain	14c				
	15				18,512.
Note: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4					
nains, go to Part V, and do not complete Part IV If line 15, column (3), is a net loss, co	omplete	Part IV and the Capita	alLossCarryov	eiWor	ksheet, as necessary
Part IV Capital Loss Limitation		· · · · · · · · · · · · · · · · · · ·			
6 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, P	art I, lır	ne 4c, if a trust) , the si		.	
a The loss on line 15, column (3) or b \$3,000 Note: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page CarryoveWorksheetin the instructions to figure your capital loss carryover	ė 1, im	e 22 (or Form 990-T, I	ne 34), is a los	16 (ss, con	nplete the Capital Loss
Part V Tax Computation Using Maximum Capital Gains Rate					
form 1041 filers. Complete this part only if both lines 14a and 15 in colu		r) are gains, or an an	nount is ente	red in	Part I or Part II and
here is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more					
Caution: Skip this part and complete the Schedule D Tax Worksheeth the i	nstruc	tions if.			
 Either line 14b, col. (2) or line 14c, col. (2) is more than zero, or Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero. 					
Form 990-T trusts. Complete this part only if both lines 14a and 15 ar	0 0010	e or qualified divide	ande ara inel	udod	in income in Bort I
of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part a	e yani	ns, or qualified divide molete the Schedule	enus are inci e D Tax Worl	uu c u kshee	in income in Part i
f either line 14b, col (2) or line 14c, col. (2) is more than zero.					
17 Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)		17	-1	\neg	
18 Enter the smaller of line 14a or 15 in column (2)	•				
but not less than zero					
9 Enter the estate's or trust's qualified dividends					
from Form 1041, line 2b(2) (or enter the qualified		1		ŀ	
dividends included in income in Part I of Form 990-T) 19					
20 Add lines 18 and 19					
21 If the estate or trust is filing Form 4952, enter the					
amount from line 4g, otherwise, enter -0 ▶ 21		_			
Subtract line 21 from line 20 If zero or less, enter -0		22			
Subtract line 22 from line 17 If zero or less, enter -0-		23			
24 Enter the smaller of the amount on line 17 or \$2,300		24			
Is the amount on line 23 equal to or more than the amount on line 24?			1		
Yes. Skip lines 25 and 26, go to line 27 and check the "No" box.		25	i	- 1	
No. Enter the amount from line 23 Subtract line 25 from line 24	• • •	25			
27 Are the amounts on lines 22 and 26 the same?	• • •	20			`
Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line	• 22	27		ļ	
		-			
28 Enter the amount from line 26 (If line 26 is blank, enter -0-)		28			
29 Subtract line 28 from line 27		29			
30 Multiply line 29 by 15% (.15)				30	
31 Figure the tax on the amount on line 23 Use the 2011 Tax Rai					
(see the Schedule Ginstructions in the instructions for Form 1041)]_:	31	
32 Add lines 30 and 31			· · · · · -	32	
33 Figure the tax on the amount on line 17. Use the 2011 Tax Rai				_	
(see the Schedule Ginstructions in the instructions for Form 1041)				33	 .
34 Tax on all taxable income. Enter the smaller of line 32 or line 33 G line 1a (or Form 990-T line 36)				24	
G, line 1a (or Form 990-T, line 36)	• • •	 		34 Schodu	ule D (Form 1041) 2011
			•	,-:: :: ::::	20 2 (1 Olin 1041) 2011

JSA 1F1220 2 000

SCHEDULE D-1 (Form 1041)

Continuation Sheet for Schedule D (Form 1041)

► See instructions for Schedule D (Form 1041).

► Attach to Schedule D to list additional transactions for lines 1a and 6a.

OMB No 1545-0092

2011

Department of the Treasury Internal Revenue Service Name of estate or trust

JOHN & CHERIE MORRIS FAMILY FOUNDATION

Employer identification number 20-0434698

JOHN & CHERIE MORRIS FAMILY		4-11-11-0-22		20-0434698	
Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less (a) Description of property (Example (b) Date (c) Date sold (c) Date (d) Cost or other basis (f)					
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)
SIMON PROPERTY GROUP DEL	04/19/2010	03/11/2011	2,325.	1,942.	383
LORD ABBETT SHORT DURATION		-			
INCOME FUND CL F	02/22/2011	12/20/2011	60,000.	60,294.	-294
PIMCO TOTAL RETURN FUND	06/18/2010	02/22/2011	7.	7.	
<u></u>					
			<u></u>		
			<u> </u>		
		<u> </u>			
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	<u> </u>	L		<u> </u>	

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D-1 (Form 1041) 2011

89.

1b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 1b

Page 2

Name of estate or trust as shown on Form 1041 Do not e	of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side		Employer identification number		
Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year					
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales pnce	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)
6a SIMON PROPERTY GROUP DEL		02/11/2011	21 012	12 220	10, 472
PIMCO TOTAL RETURN FUND CL	10/11/2002	03/11/2011	31,812.	13,339.	18,473
P	08/23/2004	02/22/2011	27,176.	27,226.	50
					·
					_
	 				
				:	
			-	-	
	-				
	<u> </u>				
6b Total. Combine the amounts in column	(f) Enter here and	on Schedule D, line	6b		18, 423