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, Form ,990;-PF

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

OMB No. 1545-0052

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

For	calen	ndar year 2012 or tax year beginning	, 2012, and ending				, 20	
Na	me of fo	undation			A Employer	identification number		
MO	RTO	N FAMILY FOUNDATION			06-6469445			
Nu	mber an	d street (or P O. box number if mail is not delivered to street address)	Room	/suite	B Telephone number (see instructions)			
87	SOU	UTH BEACH ROAD			212-921-5777			
Cit	y or tow	n, state, and ZIP code			C If exempt	ion application is pendi	ng, check here ▶	
НО	BE S	SOUND FL 33455						
G	Check	call that apply: Initial return Initial return Initial return	of a former public	charity	D 1. Foreigi	organizations, check l	nere . ▶ 🔲	
		☐ Final return ☐ Amended r	eturn		2 Foreign	n organizations meeting	the 85% test	
		☐ Address change ☐ Name char	nge		check	here and attach compu	tation · · ▶	
Н	Check	type of organization: X Section 501(c)(3) exempt po	rivate foundation			foundation status was t 07(b)(1)(A), check here		
	Section	on 4947(a)(1) nonexempt charitable trust Other tax	able private found	dation	Section 5	U/(U)(T)(A), CHECK HELE		
Ī	Fair m	narket value of all assets at J Accounting method:	: 🖾 Cash 🗌 A	ccrual	F if the four	ndation is in a 60-montl	n termination	
		f year <i>(from Part II, col. (c),</i> Other (specify)				ction 507(b)(1)(B), check		
	line 16	6) ► \$ 1,727,060 (Part I, column (d) must be	on cash basis.)					
P	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(h) No	musetment	(c) Adjusted net	(d) Disbursements for chantable	
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books		investment icome	income	purposes	
_		the amounts in column (a) (see instructions))		<u> </u>			(cash basis only)	
	1	Contributions, gifts, grants, etc., received (attach schedule)	8,637					
	2	Check ► ☐ if the foundation is not required to attach Sch. B						
	3	Interest on savings and temporary cash investments		ļ	25 554			
	4	Dividends and interest from securities	37,554		37,554	37,554		
	5a	Gross rents		<u> </u>				
	b	Net rental income or (loss)						
g	6a	Net gain or (loss) from sale of assets not on line 10	44,673	ļ				
en	b	Gross sales price for all assets on line 6a 427, 380						
Revenue	7	Capital gain net income (from Part IV, line 2)			44,673	0.070		
Œ	8	Net short-term capital gain				9,278		
	9	Income modifications					-	
	10a	Gross sales less returns and allowances			····			
	b	Less: Cost of goods sold				0		
	C	Gross profit or (loss) (attach schedule)	0	<u> </u>				
	11	Other income (attach schedule)	00 064	ļ.,	22 227	46,832		
	12	Total. Add lines 1 through 11	90,864	ļ	32,227	40,032	ļ <u></u>	
S	13	Compensation of officers, directors, trustees, etc.						
enses	14	Other employee salaries and wages .	<u> </u>					
	15	Pension plans, employee benefits C.E.V.E.D.	 					
Ж	16a	Legal fees (attach schedule)	1,925	 	1,925	1,925		
Ş	b	Accounting fees (attach schedule) Other professional fees (attach schedule) Interest	1, 525	 . –	1, 525	1, 72,		
aţį	17	Interest						
Operating and Administrative Exp	18	Taxes (attach schedule) (see instructions)	1,711		1,711	1,711		
<u>:</u>	19	Depreciation (attach schedule) and depletion	-1,111		-,	-,,+		
	20	Occupancy		 			-	
ĕ	21	Travel, conferences, and meetings						
nd	22	Printing and publications						
ä	23	Other expenses (attach schedule)	8,182		8,182	8,182	8,182	
ŭ	24	Total operating and administrative expenses.	3,232		-,	-,		
rat		Add lines 13 through 23	11,818		11,818	11,818	8,182	
þe	25	Contributions, gifts, grants paid	103,500		,		103,500	
0	26	Total expenses and disbursements. Add lines 24 and 25	115,318		11,818	11,818	111,682	
	27	Subtract line 26 from line 12:		 	,	,		
	a	Excess of revenue over expenses and disbursements	(24,454	1				
	b	Net investment income (if negative, enter -0-) .	\\ <u>\</u>	[70,409			
	c	Adjusted net income (if negative, enter -0-)				35,014		

Part II		Attached schedules and amounts in the description column	Beginning of year	End (of year	
		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash-non-interest-bearing				
	2	Savings and temporary cash investments		6,690	6,690	
	3	Accounts receivable ►				
		Less: allowance for doubtful accounts ▶				
	4	Pledges receivable ►	<u> </u>			
		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 ▶				
ţ	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
Ř	10a	Investments—U.S. and state government obligations (attach schedule)			<u></u>	
	b	Investments – corporate stock (attach schedule)				
	С	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment: basis ▶				
		Less: accumulated depreciation (attach schedule) ▶				
	12	Investments – mortgage loans				
	13	Investments—other (attach schedule)		1,198,247	1,720,370	
	14	Land, buildings, and equipment: basis ▶				
		Less: accumulated depreciation (attach schedule) ▶			<u> </u>	
	15	Other assets (describe ▶)				
	16	Total assets (to be completed by all filers-see the				
		instructions. Also, see page 1, item I)	1,235,574	<u>1,204,937</u>	1,727,060	
	17	Accounts payable and accrued expenses				
Ś	18	Grants payable				
itie	19	Deferred revenue		·		
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
<u>ia</u>	21	Mortgages and other notes payable (attach schedule)				
~	22	Other liabilities (describe ►)	0			
	23	Total liabilities (add lines 17 through 22)	0	0		
alances		Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.				
2	24	Unrestricted				
ala	25	Temporarily restricted				
ä	26	Permanently restricted				
ū		Foundations that do not follow SFAS 117, check here ▶ □				
Net Assets or Fund B		and complete lines 27 through 31.	1			
ō	27	Capital stock, trust principal, or current funds	}			
S	28	Paid-in or capital surplus, or land, bldg., and equipment fund				
se	29	Retained earnings, accumulated income, endowment, or other funds				
As	30	Total net assets or fund balances (see instructions)	1,235,574	1,204,937		
et	31	Total liabilities and net assets/fund balances (see	2,200,011		1	
Z		instructions)	1,235,574	1,204,937		
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			<u> </u>	
		I net assets or fund balances at beginning of year-Part II, colu	mn (a), line 30 (must	agree with		
		of-year figure reported on prior year's return)			1,235,574	
2	Ente	er amount from Part I, line 27a		<u> </u>	(24,454	
_	3 Other increases not included in line 2 (itemize) ▶					
4		lines 1, 2, and 3			1,211,120	
_	_				6,183	
6	Tota	reases not included in line 2 (itemize) ► Il net assets or fund balances at end of year (line 4 minus line 5)—l	Part II, column (b), lir	e 30 6	1,204,937	
					Form 990-PF (2012)	

Part	V Capital Gains and	d Losses for Tax on Investm	ent Income					
		ne kınd(s) of property sold (e.g., real estate, use; or common stock, 200 shs MLC Co)					(d) Date sold (mo , day, yr)	
1a	THRU PNC BANK -	· SEE ATTACHED STAT	EMENT	P				
b	CAPITAL GAIN DI	STRIBUTION-PNC BAN	K	P				
c								
d								
е							<u> </u>	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale			ın or (loss) (f) mınus (g)	
a				-			40,766	
b							3,907	
c								
<u>d</u>								
е								
	Complete only for assets sho	owing gain in column (h) and owned b	y the foundation	on 12/31/69			ol (h) gain minus	
	(i) F M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any	col		ot less than -0-) or from col. (h))	
а								
b								
С								
d								
e			-					
2	Capital gain net income o		llso enter in Pa enter -0- ın Paı		2		44,673	
3	If gain, also enter in Part	n or (loss) as defined in sections I, line 8, column (c) (see instruct	tions). If (loss)	, enter -0- in (0 270	
Dod					3		9,278	
Part		ler Section 4940(e) for Reductivate foundations subject to the s						
If sect Was t	tion 4940(d)(2) applies, leav the foundation liable for the	e this part blank. section 4942 tax on the distribute	able amount of	any year in the b			☐ Yes ☐ No	
		qualify under section 4940(e). Do			-1			
1		ount in each column for each year	r; see the instru	actions before ma	aking any	entries.		
Cale	(a) Base period years endar year (or tax year beginning in			(c) f nonchantable-use as		Dis (col (b)	(d) stribution ratio divided by col (c))	
	2011	79,8	99	1,475,2	293		0.0542	
	2010	67,5		1,334,0			0.0506	
	2009	246,9		1,196,4			0.2064	
	2008	158,0		1,053,			0.1501	
	2007	73,1	66[1,376,0	003		0.0532	
2	Total of line 1, column (d)						0.5145	
3		for the 5-year base period—divid dation has been in existence if les			1	<u></u>	0.1029	
4	Enter the net value of non	charitable-use assets for 2012 fro	om Part X, line	5	. 4		1,692,410	
5	Multiply line 4 by line 3				. 5		174,149	
6 Enter 1% of net investment income (1% of Part I, line 27b)				. 6		704		
7	Add lines 5 and 6				. 7	7 174,85		
8		ons from Part XII, line 4			. 8		111,682	
•		ater than line 7, check the box in				sing a		

Part		instru	ctio	าร)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here ► ☐ and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)					
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check					
-	here ▶ ☐ and enter 1% of Part I, line 27b			408		
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	!				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)					
3	Add lines 1 and 2		1,	408		
4	Subtitle A (Income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4					
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		1,	408		
6	Credits/Payments:					
а	2012 estimated tax payments and 2011 overpayment credited to 2012 6a 6a					
b	Exempt foreign organizations—tax withheld at source 6b					
C	Tax paid with application for extension of time to file (Form 8868) . 6c 1,750					
d	Backup withholding erroneously withheld			750		
7	Total credits and payments. Add lines 6a through 6d		1,	750		
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 ▶ 9			0		
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10			342 0		
11	Enter the amount of line 10 to be: Credited to 2013 estimated tax ► 342 Refunded ► 11					
	VII-A Statements Regarding Activities During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No		
10	participate or intervene in any political campaign?	1a	163	X		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	I				
· ·	Instructions for the definition)?	1b		Х		
	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.) 	1			
С	Did the foundation file Form 1120-POL for this year?	1c		X		
d						
	(1) On the foundation. ► \$ (2) On foundation managers. ► \$					
е						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X		
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	_	<u> </u>		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X		
6	If "Yes," attach the statement required by General Instruction T. Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
U	By language in the governing instrument, or					
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that 	3				
	conflict with the state law remain in the governing instrument?	6	Х			
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶					
	CONNECTICUT					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	į.				
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b		Χ		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	4				
	4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes,"					
	complete Part XIV	9	Х			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their					
	names and addresses	10	Χ			

Pari	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)	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Χ	
14	Website address ► The books are in care of ► LEICHT & REIN TAX ASSOCIATES Telephone no. ► 212-9	21-	577	7
15	Located at ► 570 SEVENTH AVE, STE. 1804, NEW YORK, NY ZIP+4 ► 10018 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here			·
15	and enter the amount of tax-exempt interest received or accrued during the year ▶ 15			
16	At any time during calendar year 2012, 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?	/ 16	Yes	No X
	See the instructions for exceptions and filling requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country ▶			
Pari	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):	Part of		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes			
	(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 period 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)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here ▶□	,		
С	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 2012?	1c		Χ
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		:	
а	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. • 20 , 20 , 20 , 20	20		
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2012 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 2012.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Χ
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 2012?	4h		X

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Page	١

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	t VII-B Statements Regarding Activities	s for V	Vhich Form	4720	Mav Be F	Require	ed (contin	ued)		9-
5a		any amo to influe c electi	ount to: ence legislati	on (sec	tion 4945(e	e))? .	☐ Yes	⊠ No		
	 (3) Provide a grant to an individual for travel, stu (4) Provide a grant to an organization other that section 509(a)(1), (2), or (3), or section 4940(c) (5) Provide for any purpose other than religious 	udy, or on a chad)(2)? (s	ritable, etc., ee instructio	organız ns) .	ation desc	ribed ır 	Yes	⊠ No ⊠ No		
b	purposes, or for the prevention of cruelty to of any answer is "Yes" to 5a(1)-(5), did any of the	childrer e transa	n or animals? actions fail to	qualify	under the	 excepti	Yes ions describ	⊠ No bed in		
С	Regulations section 53.4945 or in a current notice Organizations relying on a current notice regard If the answer is "Yes" to question 5a(4), does to because it maintained expenditure responsibility	ing disa	ster assistar	ice che n exem	ck here	 the tax		 ► □		
6a	If "Yes," attach the statement required by Regula	ations s	ection 53.49	45–5(d)			s _	∐ No		
ъ 7а	,	a party	to a prohibite	d tax sh	elter transa	ction?	☐ Yes	⊠ No	6b	
Pal	If "Yes," did the foundation receive any proceed TVIII Information About Officers, Direct								7b mploy	ees,
	and Contractors									
1	List all officers, directors, trustees, foundatio (a) Name and address	(b) Title	agers and un e, and average rs per week ed to position	(c) Co	mpensation not paid, iter -0-)	(d) emplo	Contributions byee benefit pleared compen	to lans		nse account llowances
87	LIAM I MORTON SOUTH BEACH ROAD	TRUS			··					
	E SOUND, FL 33455 Y K. MORTON	TRUS	n p p						<u> </u>	
87	SOUTH BEACH ROAD E SOUND, FL 33455	IRUS								
2	Compensation of five highest-paid employed "NONE."	es (oth	er than tho	se incl	uded on li	ne 1-	see instru	ctions	s). If no	one, ente
	(a) Name and address of each employee paid more than \$50,00	00	(b) Title, and a hours per v devoted to p	veek -	(c) Compe	nsation	(d) Contributi employee b plans and de compensa	enefit eferred		nse account Ilowances

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

_				٠
Р	а	a	е	

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Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	mployees,
3 Five	highest-paid independent contractors for professional services (see instructions). If none, enter "NO	NE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
<u></u>		
NONE		
NOINE		
rotal numb	er of others receiving over \$50,000 for professional services	
Part IX-A	Summary of Direct Charitable Activities	
	undation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ins and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1		
		<u> </u>
2		
N/A		
3		-
4		
Doubly D	Dela del de la companya del companya del companya de la companya d	
Part IX-B	Summary of Program-Related Investments (see instructions) e two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	e two largest program-related investments made by the roundation during the tax year of times 1 and 2	7 mount
•		
2		
N/A		
•	ogram-related investments. See instructions	
3		
•••••		
otal. Add	ines 1 through 3	0
		Form 990-PF (2012)

Part	Minimum Investment Return (All domestic foundations must complete this part. Fore	ign foi	undations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	1:1	
	purposes:	استدا	
а	Average monthly fair market value of securities	1a	1,692,911
þ	Average of monthly cash balances	1b	25,272
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	1,718,183
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	Subtract line 2 from line 1d	3	1,718,183
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	<u> 25,773</u>
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,692,410
6	Minimum investment return. Enter 5% of line 5	6	84,621
Part			
	foundations and certain foreign organizations check here ► □ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	84,621
2 a	Tax on investment income for 2012 from Part VI, line 5		
b			
C	Add lines 2a and 2b	2c	1,408
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	83,213
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
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	83,213
Part	XII Qualifying Distributions (see instructions)		
			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	Yes.	
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	111,682
b	Program-related investments total from Part IX-B	1b	<u></u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	<u> </u>
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	·
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	111,682
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	111,682
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whet	her the foundation

Form 9	90-PF (2012)				Page
Part	XIII Undistributed Income (see instruction	ons)			
1	Distributable amount for 2012 from Part XI, line 7	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012 83,213
2	Undistributed income, if any, as of the end of 2012:	<u> </u>			03,213
a	Enter amount for 2011 only		İ		
b	Total for prior years: 20,20,20				
3	Excess distributions carryover, if any, to 2012:				
а	From 2007				
b	From 2008				
C	From 2009				
ď	From 2010				
e	From 2011	0			
4	Total of lines 3a through e				
а	Applied to 2011, but not more than line 2a .				
b	Applied to undistributed income of prior years (Election required—see instructions)			٥	
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2012 distributable amount				83,213
е	Remaining amount distributed out of corpus	·			
5	Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0		
С	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	,			
d	Subtract line 6c from line 6b. Taxable amount—see instructions		0	۰	
е	Undistributed income for 2011. Subtract line 4a from line 2a. Taxable amount—see instructions			0	
f	Undistributed income for 2012. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2013				0
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 2007 not applied on line 5 or line 7 (see instructions).		-		
9	Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a	0			
10	Analysis of line 9:				
а	Excess from 2008				
b	Excess from 2009				
C	Excess from 2010			۰	
d	Excess from 2011			j	
е	Excess from 2012		1		

Page	1	C
Paue		•

	90-PF (2012)					Page 10
Part)	
1a	If the foundation has received a ruling					
	foundation, and the ruling is effective for		_	1		
	Check box to indicate whether the four		operating foundati		ction) or 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for	(a) 2012	(b) 2011	(c) 2010	(d) 2009	
	each year listed					0
b	85% of line 2a	0	0	0	0	0
С	Qualifying distributions from Part XII, line 4 for each year listed					0
d	Amounts included in line 2c not used directly for active conduct of exempt activities	_				0
	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	0	0	0	0	0
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test—enter:					•
	(1) Value of all assets			<u></u>		0
	(2) Value of assets qualifying under					0
	section 4942(j)(3)(B)(i)					0
b	of minimum investment return shown in					0
_	Part X, line 6 for each year listed					
С	"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)					0
	(2) Support from general public					
	and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					0
	(3) Largest amount of support from an exempt organization					0
	(4) Gross investment income					0
Part		•	•	e foundation ha	ad \$5,000 or mo	re in assets at
	any time during the year-		s.)			
1	Information Regarding Foundation	•				
а	List any managers of the foundation w					y the foundation
	before the close of any tax year (but or	nly if they have co	ntributed more tha	ın \$5,000). (See se	ection 507(a)(2).)	
NON		100/			7	
b Novi	List any managers of the foundation ownership of a partnership or other en					ge portion of the
<u>NONE</u>		0	. Calcalanalia at			
2	Information Regarding Contribution Check here ▶ ☐ if the foundation of unsolicited requests for funds. If the foundations, complete items 2a, but the foundations of the conditions of the foundation of the foun	only makes contri oundation makes (butions to presele	ected charitable o		
а	The name, address, and telephone nu	mber or e-mail of	the person to who	m applications sho	ould be addressed	
N/A						
b	The form in which applications should	be submitted and	information and n	naterials they shou	uld include:	
<u>N/</u> A				-		
c N/A	Any submission deadlines:					
d	Any restrictions or limitations on aw factors:	ards, such as by	geographical are	eas, charitable fie	lds, kinds of instr	tutions, or other
N/A						

3	Grants and Contributions Paid During t			T T T T T T T T T T T T T T T T T T T	
	Recipient	If recipient is an individual, show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient		
а	Paid during the year				}
				TO ENADLE DONEES	
				1	
				TO FURTHER THEIR	
				TO FORTHER THEIR	ļ
				m E DUDDOCEC	103,500
				T-E PURPOSES	103,300
					ļ
					}
					ļ
	Total			D 20	103,500
b	Approved for future payment	<u></u>	· · · · · ·	▶ 3a	103,300
-	reproved for latere payment				
	İ			1	
			i.		1
	Total	·		D 2h	

Pa	rt X	VI-A Analysis of Income-Producing Ac	ctivities				
Ente	er gro	oss amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by section	on 512, 513, or 514	(0)
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1	Pro	gram service revenue:	Dusiness code	741104111	Excidence of code		(See instructions)
	а						
	b						
	C						
	d						
	е						
	f						
	g	Fees and contracts from government agencies					
2		mbership dues and assessments		· 		·=	
3		rest on savings and temporary cash investments		· · · · · · · · · · · · · · · · · · ·			
4		dends and interest from securities					
5		rental income or (loss) from real estate:					<u> </u>
		Debt-financed property					
		Not debt-financed property		·			
6		rental income or (loss) from personal property					
7		er investment income					
8		n or (loss) from sales of assets other than inventory					
9		income or (loss) from special events		- 			
10		ss profit or (loss) from sales of inventory					
11	Oth	er revenue: a					
	b						
	C						
	~						
	ď						
	е						
	e Sub	ototal. Add columns (b), (d), and (e)		0		0	0
13	e Sub	ototal. Add columns (b), (d), and (e)		0		0 13	0
13 (See	e Sub Tot work	ototal. Add columns (b), (d), and (e)	s.)				
13 See Pa	e Sub Tot work	ototal. Add columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa	e Sub Tot work	ototal. Add columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa	e Sub Tot work t XV	ototal. Add columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa	e Sub Tot work t XV	ototal. Add columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa	e Sub Tot work t XV	ototal. Add columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa	e Sub Tot work t XV	ototal. Add columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa	e Sub Tot work t XV	ototal. Add columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa	e Sub Tot work t XV	ototal. Add columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa	e Sub Tot work t XV	ototal. Add columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa	e Sub Tot work t XV	ototal. Add columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa	e Sub Tot work t XV	ototal. Add columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa	e Sub Tot work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa	e Sub Tot work t XV	ototal. Add columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa	e Sub Tot work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa	e Sub Tot work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa	e Sub Tot work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa	e Sub Tot work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa	e Sub Tot work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa	e Sub Tot work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa	e Sub Tot work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa	e Sub Tot work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa	e Sub Tot work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa	e Sub Tot work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa	e Sub Tot work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes	13	0
13 See Pa	e Sub Tot work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes	13	0

		Exempt Or	rganizations									
1	in se		directly or indirectly ne Code (other than								Y	es No
а	Tran	sfers from the rep	porting foundation t	o a noncha	arıtable exe	mpt org	anizatıor	ı of:				
	(1) C	Cash									1a(1)	<u> </u>
	(2) C	Other assets .									1a(2)	X
b	Othe	er transactions:										
	(1) S	Sales of assets to	a noncharitable ex	empt orgar	nization .						1b(1)	X
	(2) P	Purchases of asse	ets from a noncharit	able exem	pt organiza	tion .					1b(2)	X
			, equipment, or other								1b(3)	X
	(4) F	Reimbursement a	rrangements								1b(4)	X
		oans or loan gua	-								1b(5)	X
		-	ervices or members								1b(6)	X
С			quipment, mailing li	•	_						1c	X
d		•	of the above is "Ye		-		-				v the fai	r market
			ther assets, or serv									
			on or sharing arrang									
(a) Line	no	(b) Amount involved	(c) Name of nonc	hantable exer	npt organization	on	(d) Desc	nption of trans	fers, transaction	ns, and sha	ınng arranç	ements
						····						
				-								
		·		******								
	<u> </u>											
							-					
	$\neg \uparrow$											
									·			
												
										·		
2a b	desc	ribed in section 5 es," complete the	ectly or indirectly af 501(c) of the Code (c) of following schedule	other than	section 501	(c)(3)) o				· · [] Yes [□ No
		(a) Name of organ	ization		b) Type of orga	anization			(c) Descriptio	n or relation	nsnip	
												
												
ign Iere	corre		declare that I have examin aration of preparer (other th							May the if	Ige and belings discuss ireparer shootions)?	this return own below
	Sigr	Print/Type preparer		Preparer's	signatura /	, ille		Date			TIN	
aid		1 (. //	riepaiers	Signal and the signal	N	-	6-7-1	Check	k I lif I		8227
rep			CICLJ LEICHT & RE	IN TAX	ASSOL	TAmero	G, LTI		Firm's EIN	mployed		
lse (Only	Firm's name > 1			1804,	NY,	NY 1				76093 21-57	
		Firm's address ▶	OIO IIU WAF	, 316.	1004,	111,	74 T ,	0010	Phone no 4			PF (2012)
										FC	700 JUNE	(2012)

. 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

2012

Name o	of the organization			Employer identification number
MORT	ON FAMILY FO	DUNDATION		06-6469445
Organi	zation type (check o	ne):		
Filers o	of:	Section:		
Form 9	90 or 990-EZ	☐ 501(c)() (enter number) organization	
		☐ 4947(a)(1) no	nexempt charitable trust not treated as a private fo	oundation
		☐ 527 political	organization	
Form 9	90-PF		mpt private foundation	
		☐ 4947(a)(1) no	nexempt charitable trust treated as a private found	ation
		☐ 501(c)(3) taxa	able private foundation	
	Only a section 501(c)(•	eneral Rule or a Special Rule. Dization can check boxes for both the General Rule	and a Special Rule. See
Genera	al Rule			
X			90-EZ, or 990-PF that received, during the year, \$5, omplete Parts I and II.	,000 or more (in money or
Specia	l Rules			
	under sections 509	(a)(1) and 170(b)(1)(5,000 or (2) 2% of t	ng Form 990 or 990-EZ that met the 33½ % suppo (A)(vi) and received from any one contributor, during the amount on (i) Form 990, Part VIII, line 1h, or (ii) f	g the year, a contribution of
	during the year, total	al contributions of r	nization filing Form 990 or 990-EZ that received fron nore than \$1,000 for use exclusively for religious, chatton of cruelty to children or animals. Complete Par	naritable, scientific, literary,
	during the year, con not total to more th year for an exclusiv applies to this orga	ntributions for use of ean \$1,000. If this be rely religious, charit unization because it	anization filing Form 990 or 990-EZ that received from the exclusively for religious, charitable, etc., purposes, ox is checked, enter here the total contributions the able, etc., purpose. Do not complete any of the para	but these contributions did at were received during the its unless the General Rule contributions of \$5,000 or
	n. An organization the	at is not covered by	y the General Rule and/or the Special Rules does n n Part IV, line 2 of its Form 990; or check the box o	ot file Schedule B (Form 990,

Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
MORTON FAMILY FOUNDATION

Employer identification number

06-6469445 Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (d) (c) (a) (b) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 \square 1 WILLIAM I. MORTON Person **Payroll** 8,637 Noncash 87 SOUTH BEACH ROAD (Complete Part II if there is HOPE SOUND, FL 33455 a noncash contribution.) (a) (b) (c) (d) **Total contributions** Type of contribution Name, address, and ZIP + 4 No. Person **Payroll** Noncash (Complete Part II if there is a noncash contribution) (d) (a) (c) (b) Νo. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person **Payroll** Noncash П (Complete Part II if there is a noncash contribution) (a) (c) (d) (b) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II if there is a noncash contribution.) (d) (a) (c) (b) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) (a) (b) (c) Total contributions No. Type of contribution Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II if there is a noncash contribution.)

Name of organization

MORTON FAMILY FOUNDATION

Employer identification number

06-6469445 MORTON FAMILY FOUNDATION Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. Part II (a) No. (c) (d) (b) FMV (or estimate) from Date received Description of noncash property given Part I (see instructions) (a) No. (c) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (d) (b) from **FMV** (or estimate) Description of noncash property given **Date received** Part I (see instructions) (a) No. (c) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (see instructions) (a) No. (c) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (see instructions) (a) No. (c) (d) FMV (or estimate) from Description of noncash property given **Date received** Part I (see instructions)

Schedule B (Form 990, 990-EZ, or 990-PF) (2012) Name of organization **Employer identification number** 06-6469445 MORTON FAMILY FOUNDATION Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) Use duplicate copies of Part III if additional space is needed. (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (c) Use of gift (d) Description of how gift is held (b) Purpose of gift from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Morton Family Foundation Form 990-PF 2012

EIN 06-6469445

<u> </u>		
Part I - Line 1 - Contributions Part VII-A - Question 10		
Substantial contributors	William I. M 87 South Be Hobe Sound	each Road
\$8,637 - Misc. cash		
Part I - Line 18 - Taxes		
Foreign taxes Excise taxes	\$	868 843
	\$	1,711
Part I - Line 23 - Other Expenses		
Investment Advisory Fees Investment expenses Misc.	\$	7,794 342 46
	\$	8,182
Part VII-A- OUESTION 8(b)		

Part VII-A- QUESTION 8(b)

Connecticut does not require the filing of annual returns for private foundations

Morton Family Foundation 2012 Part XV - Contributions Paid

EIN 06-6469445

~	564 Park Ave Restoration Foundation		\$	2,000
~	1000 Friends of Florida		•	500
~	Boys & Girls Club of Greenwich			2,500
~				26,000
	Breast Cancer Research Foundation			1,000
	Carolina Performing Arts Society			3,500
	Christ Memorial Chapel			4,000
	Eaglebrook School			1,000
	First Presbyterian Church of Greenwich			2,500
	Guardians of Martin County			500
	Hobe Sound Community Chest			2,500
~				11,000
	Loblollypop Foundation Inc.			1,000
	Mayo Foundation			5,000
	Memorial Sloan Kettering Cancer Center			1,000
	New York Botanical Garden			2,500
~	Riverside Children Theatre			2,500
~	Society of the Four Arts			5,000
~	Steadman Philippon Research Institute			500
~	UNC School of Journalism and Mass Communication			5,000
~	United Way - Martin County			1,000
	University of Rochester			7,500
	Vail Valley Music Festival 2010			15,000
~	Woven Journey Foundation			500
	•			
		Total	\$	103,500

2012 Tax Information Statement

PHILADELPHIA, PA 19103 Payer's Name and Address: 1600 MARKET ST 4TH FL PNC BANK, NA

(215)585-7328 ext 7328 12350443982887 XX-XXX9445 22-1146430 Recipient's Tax ID Number: Payer's Federal ID Number: Payer's State ID Number: Account Number: **Questions?** State:

Page 7 of 25 Ref: 520 ATTN WILLIAM I MORTON TRUSTEE MORTON FAMILY FOUNDATION HOBE SOUND, FL 33455-2336 Recipient's Name and Address: 87 SOUTH BEACH ROAD

> 2nd TIN notice Corrected

2012 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

Reported to the IRS is Sales Price of stocks, bonds etc., less commissions and option premiums.

Withheld

Income Tax Withheld

or Loss

Net Gain

Wash Sale

(Box 5)

Federal

(Box 15)

(Box 4)

State ă

0.00 257.55 0.00 0.00 470.99 477.90 0.00 -6.91 0.00 0.00 0.00 00.0 Loss Disallowed 14,532.24 4,981.66 37,661.67 36,548.82 616.40 596.54 Other Basis (Box 3) Stock or Other Symbol (Box 1d) 5,114.03 14,789.79 (Box 2a) Stocks Bonds, etc. PRHYX **GTEYX** χ χĽ GATEWAY FUND FUND CLASS Y FD 1986 PRICE T ROWE HIGH YIELD FUND INC AMEX FINANCIAL SELECT SPDR AMEX CONSUMER SVC SELECT 05/30/2012 03/23/2012 05/15/2012 02/14/2012 05/15/2012 02/14/2012 AMEX CYCL TRANS SELECT AMEX CYCL TRANS SELECT Acquisition 11/15/2012 Various (Box 1b) 11/15/2012 Various Date of Description (Box 8) Short Term Sales Reported on 1099-B Covered (Box 6a is not checked) Exchange (Box 1a) Date of Sale or 741481105 81369Y209 401.0000 **81369Y407** 114.0000 2480.0000 367829884 14.0000 81369Y407 81369Y605 17.7530 Quantity (Box 1e) Sold

This is important tax information and Is being furnished to the Internal Revenue Service (except as indicated). If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. The taxpayer is ultimately responsible for the accuracy of their own tax return.

05/15/2012 02/14/2012 00.00 13,267.50 12,807.60 0.00 459.90

0.00

0.00

33.14

1,599.39

00.0

00.0

4,421.68 4,609.09 0.00 -187.41

11/15/2012 08/16/2012 SECTOR SPDR TR SBI CONS STPLS

SECTOR SPDR TR SBI BASIC INDS

81369Y100

127.0000 81369Y308

231.1220

12/04/2012 Various

0.00

0.00

00.0

00.0

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0.00

132.37

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Page 8 of 25 Ref: 520 0.00 Withheld 00.00 0.00 1,424.16 0.00 0.00 00.0 State Ţax 0.00 126.40 0.00 0.00 (Box 15) ATTN WILLIAM I MORTON TRUSTEE 0.00 224.88 0.00 0.00 0.00 Income Tax Withheld (Box 4) MORTON FAMILY FOUNDATION HOBE SOUND, FL 33455-2336 Recipient's Name and Address: 87 SOUTH BEACH ROAD or Loss 35.02 Net Gain 3,631.81 0.00 (Box 5) 0.00 Loss Disallowed Wash Sale (215)585-7328 ext 7328 12350443982887 2nd TIN notice 16,820.65 4,173.60 20,589.76 1,377.88 119,081.99 XX-XXX9445 Other Basis Cost or (Box 3) 22-1146430 Stock or Other Symbol (Box 1d) Reported to the IRS is Sales Price of stocks, bonds etc., less commissions and option premiums. 17,045.53 4,300.00 22,013,92 1,412.90 122,713.80 (Box 28) Stocks Bonds, etc. Recipient's Tax ID Number: Payer's Federal ID Number: Payer's State ID Number: WEAX χK ZLC Account Number: Corrected **Questions?** State: SECTOR SPDR TR SHS BEN INT-TECHNOLOGY 08/16/2012 02/14/2012 05/15/2012 02/14/2012 VANGUARD HIGH YIELD CORP ADM FD 529 SECTOR SPDR TR SHS BEN INT-UTILITIES SECTOR SPDR TR SHS BEN INT-UTILITIES 05/15/2012 02/14/2012 Report on Form 8949, Part I, with Box A checked Acquisition (Box 1b) Total Short Term Sales Reported on 1099-B 232.7660 12/04/2012 Various Date of Description (Box 8) Covered (Box 6a is not checked) Exchange (Box 1a) Date of Sale or PHILADELPHIA, PA 19103 Payer's Name and Address: 1600 MARKET ST 4TH FL PNC BANK, NA 592.0000 120.0000 922031760 81369Y803 81369Y886 81369Y886 595.0000 Quantity (BOX 18) Sold

This is important tax information and is being furnished to the Internal Revenue Service (except as indicated). If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. The

taxpayer is ultimately responsible for the accuracy of their own tax return.

2012 Tax Information Statement

Page 11 of 25 Ref: 520 ATTN WILLIAM I MORTON TRUSTEE MORTON FAMILY FOUNDATION 87 SOUTH BEACH ROAD HOBE SOUND, FL 33455-2336 Recipient's Name and Address: (215)585-7328 ext 7328 12350443982887 2nd TIN notice XX-XXX9445 22-1146430 Account Number: Recipient's Tax ID Number: Payer's Federal ID Number: Payer's State ID Number: Corrected Questions? State: PHILADELPHIA, PA 19103 1600 MARKET ST 4TH FL Payer's Name and Address:

PNC BANK, NA

For noncovered securities (Box 6a is checked) shown on this statement, cost basis information including wash sale disallowed loss is not being reported to the IRS.

Cusip	Description (Box 8)	(Box 8)	Stock or Other Symbol (Box 1d)	lbol (Box 1d)				
Quantity Sold	Date of Sale or Exchange	Date of Acquisition	Stocks Bonds, etc.	Cost or Other Basis	Wash Sale Loss Disallowed	Net Gain or Loss	Federal Income Tax Withheld	State Tax Withheld
<i>(Box 1e)</i> 81369Y100	(Box 1a) SECTOR SPI	(Box 1a) SECTOR SPDR TR SBI BASIC INDS	(<i>Box 28</i>) XLB				(Box 4)	(Box 15)
18.0000	11/15/201	11/15/2012 02/14/2011	626.69	724.75	0.00	-98.06	00.0	0.00
81369Y308	SECTOR SP(SECTOR SPDR TR SBI CONS STPLS	XLP			•		
247.0000	05/15/201	05/15/2012 Various	8,402.75	6,694.85	0.00	1,707.90	0.00	0.00
81369Y308	SECTOR SPI	SECTOR SPDR TR SBI CONS STPLS	XLP					
369.0000	08/16/201	08/16/2012 08/25/2009	13,219.68	9,178.10	0.00	4,041.58	00.0	0.00
81369Y803	SECTOR SPI	SECTOR SPDR TR SHS BEN INT-TECHNOLOGY	XLK					
91.0000	05/15/201	05/15/2012 Various	2,606.96	2,188.64	00.0	418.32	00.0	0.00
81369Y886	SECTOR SPI	SECTOR SPDR TR SHS BEN INT-UTILITIES	XLU					
412.0000	08/16/201	08/16/2012 Various	15,320.49	12,328.59	0.00	2,991.90	00.0	0.00
922031760	VANGUARD	VANGUARD HIGH YIELD CORP ADM FD 529	VWEAX					
3836.7440	12/04/201	12/04/2012 Various	23,289.06	16,616.60	0.00	6,672.46	00.0	0.00
922031760	VANGUARD	VANGUARD HIGH YIELD CORP ADM FD 529	VWEAX					
20.6500	12/04/201	12/04/2012 12/19/2008	125.35	83.84	0.00	41.51	00.0	0.00
Total Long Term 15% Sales Reported on 1099-B Report on Form 8949, Part II, with Sox B check	15% Sales Repu 18949, Part II, v	otal Long Term 15% Sales Reported on 1099-B Report on Form 8949, Part II, with Box B checked	223,680.31	192,192.76	00'0	31,487.55	0.00	0.00

This is important tax information and is being furnished to the Internal Revenue Service (except as indicated). If you are required to file a return, a negligence penalty or other sanction may be Imposed on you if this income is taxable and the IRS determines that it has not been reported. For noncovered securities shown on this statement, cost basis information including wash sale disallowed loss is not being reported to the Internal Revenue Service. The taxpayer is ultimately responsible for the accuracy of their own tax return.

··· 8868

(Rev January 2013)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

Internal Revenue Service • If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box • If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 If you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits. Automatic 3-Month-Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension-check this box and complete All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number, see instructions Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or Type or 06-6469445 MORTON FAMILY FOUNDATION print Social security number (SSN) Number, street, and room or suite no. If a P.O. box, see instructions. File by the SOUTH BEACH ROAD due date for filing your City, town or post office, state, and ZIP code. For a foreign address, see instructions. return. See HOBE SOUND, FL 33455 instructions. 04 Enter the Return code for the return that this application is for (file a separate application for each return) Return Return Application Application Code Code îs For Is For 07 Form 990 or Form 990-EZ 01 Form 990-T (corporation) Form 1041-A 08 Form 990-BL 02 Form 4720 09 Form 4720 (individual) 03 10 Form 5227 Form 990-PF 04 Form 990-T (sec. 401(a) or 408(a) trust) •11 Form 6069 12 Form 990-T (trust other than above) 06 Form 8870 • The books are in the care of ▶ STEVEN M. LEICHT Telephone No. ► 212-921-5777 EXT 250 FAX No. ►212-921-9756 • If the organization does not have an office or place of business in the United States, check this box • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) a list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2013, to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 20 12 or , 20 ____, and ending ____ ► □ tax year beginning If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 3a |\$ 1,750 b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. зь |\$ Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using 1,750.00 EFTPS (Electronic Federal Tax Payment System). See instructions.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.