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# <sup>1</sup> Form **990-PF**

## **Return of Private Foundation**

or Section 4947(a)(1) Nonexempt Charitable Trust

Treated as a Private Foundation

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

OMB No 1545-0052

For ca	lendar year 2012 or tax year beginning		<u>, 2012, and e</u>	nding		, 20
	of foundation				A Employer Identif	ication number
JOHI	N & CHERIE MORRIS FAMILY FOUR	NDATION			20-043469	18
Numb	er and street (or P O box number if mail is not delivered	to street address)	Room	/suite	B Telephone numb	er (see instructions)
					(94	19) 933-9891
621	PONTE VEDRA BOULEVARD, UNIT	A				
City or	r town, state, and ZIP code					-
					C If exemption application pending, check here	ation is
PON'	TE VEDRA BEACH, FL 32082				pending, check here	,
	ck all that apply Initial return	Initial return of	f a former public of	harity	D 1 Foreign organiza	tions chack here
<b>-</b>	Final return	Amended retu	•	•	2 Foreign organiza	
	Address change	Name change			85% test, check t	nere and attach
H Che	ck type of organization X Section 501(		undation	-	,	
	section 4947(a)(1) nonexempt charitable trust	Other taxable priv			E If private foundatio	n status was terminated
		unting method X Cas				
		ther (specify)	,,,,,,oo,da.			in a 60-month termination )(1)(B), check here
		column (d) must be on c	cash basis )			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Analysis of Revenue and Expenses (The		74077 24070 7	1	<u></u>	(d) Disbursements
ı altı	total of amounts in columns (b), (c), and (d)	(a) Revenue and expenses per	(b) Net investmen		c) Adjusted net	for charitable
	may not necessarily equal the amounts in column (a) (see instructions) )	books	income	1	income	purposes (cash basis only)
T.	11.	18,660				(cash basis only)
1	Contributions, gifts, grants, etc., received (attach schedule) .  If the foundation is not required to					
2	Check ► attach Sch B					
3	Interest on savings and temporary cash investments	77.	7	7.		ATCH 1
4	Dividends and interest from securities			-		
- 1	Gross rents			_		
_	Net rental income or (loss)	31,927		<del> </del>		
	Net gain or (loss) from sale of assets not on line 10 Gross sales pnce for all 53, 649.					
<u>-</u>  ĕ	assets on line 6a		31,92	7.		
	Capital gain net income (from Part IV, line 2) .		· · · · · · · · · · · · · · · · · · ·			
8	Net short-term capital gain			-		
9 10 a	Gross sales less returns					
	and allowances · · · ·					
	Less Cost of goods sold .		··			<u> </u>
	Gross profit or (loss) (attach schedule)					
11	Other income (attach schedule)	50,664.	32,00	4.	<del>7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 -</del>	
12	Total. Add lines 1 through 11	d				
(-	Compensation of officers, directors, trustees, etc					
S 14 5	Pension plans, employee penefits			<del>-  </del>		
E	Pension plans, employed benefits					
ST TO B	A Company (attached)	1,415.	70	8.		707
9	-Other professional lees (attach schedule). *	150.	15			
ati,	Merchanis (allach schedule)			-		
# 1/ L	Pension plans, employed penefits Legal fees (attach schedule) Accounting fees (attach schedule) ATCH 2 Other professional fees (attach schedule).  Taxes (attach schedule) (see instructions) ATCH 4 Depreciation (attach schedule) and depletion Occupancy  Travel conferences, and meetings	96.	9	6.		
Ē ,	Depreciation (attach schedule) and depletion.			-		<del>                                     </del>
E 19	Occupancy					·
B 20	Occupancy					
E 22	trately comprehensely and meetings			_		· ·
Operating and 23 24 24	Printing and publications					
25 26 27	Other expenses (attach schedule) Total operating and administrative expenses.					
ed 24		1,661.	95	4.		707
0	Add lines 13 through 23	70,764.		+ -	·	70,764
25 26	Contributions, gifts, grants paid	72,425.	95	4.	(	71,471
27	Subtract line 26 from line 12	-,		_		
		-21,761.				
	Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)		31,05	0.		
	· -					
<u>c</u>	Adjusted net income (if negative, enter -0-)					.1

Р	art IV Capital Gains	and Losses for Tax on Inv	restment Income	·	,	
	(a) List an 2-story b	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )		
1a		rick warehouse, or common stock, 200 DULE	, , , , , , , , , , , , , , , , , , , ,	D - Doriation	<u> </u>	
<u> </u>	<del></del>			_		
<u>c</u>						<u> </u>
_ <u>c</u>		-				··
e						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	•
a						
b b						
_ <u>d</u>						
_ <u>e</u>		1 22	- d b - db - f d-d 40/04/00			· <u>-</u>
_	Complete only for assets	showing gain in column (h) and own			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 (i) over col (j), if any	COI	(k), but not less t Losses (from co	
_a				ļ		
_b						
_ <u>c</u>						
_d	· · · · · · · · · · · · · · · · · · ·					
е						
2	Capital gain net income or		f gain, also enter in Part I, line 7 } f (loss), enter -0- in Part I, line 7	2		31,927.
3	Net short-term capital gair	n or (loss) as defined in sections 1	222(5) and (6)			
	If gain, also enter in Pai	rt I, line 8, column (c) (see ins	tructions) If (loss), enter -0- in $\}$			
	=	<u> </u>		3		0
Р	art V Qualification	Under Section 4940(e) for Re	educed Tax on Net Investment I	ncome		
_			ne section 4940(a) tax on net investi	•	me)	
ζ.	or optional use by domesti	e private roundations subject to tr	to socion honoral tax on hor invost			
16		leave this part blank				
IT S	section 4940(d)(2) applies,	leave this part blank				
۱۸/	as the foundation liable for	the section 4942 tax on the distri	butable amount of any year in the b	ase nerio	12	Yes No
		not qualify under section 4940(e)		acc pono.	·	
			r, see the instructions before making	any entr	96	
				any enu	(d)	
	(a) Base penod years alendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		Distribution ra (col (b) divided by	atio col(c))
	2011					
	2010					
_	2009					
_	2008					
	2007					
2	Total of line 1, column (d	)		2		
3	Average distribution ratio	for the 5-year base period - divid	le the total on line 2 by 5, or by the		•	
•			ss than 5 years	3		
	number of years the loan					
4	Enter the net value of nor	ncharitable-use assets for 2012 fr	om Part X, line 5	4		
5	Multiply line 4 by line 3	5				
6	Enter 1% of net investme			6		
7						
8	Enter qualifying distribution of the street	ons from Part XII, line 4 eater than line 7, check the box	in Part VI, line 1b, and complete t	8 that part	using a 1% ta	x rate See the
	Part VI instructions	•	•			

Х

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	t VII-A Statements Regarding Activities (continued)			
	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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	<u> </u>
	Website address   N/A		<b>-</b> -	
14	The books are in care of ▶ CHERIE MORRIS Telephone no ▶ 949-933	-989	1	
	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 2012, did the foundation have an interest in or a signature or other authority	,	Yes	
	over a bank, securities, or other financial account in a foreign country?	16	L	X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of			
	the foreign country	<u> </u>		
Pa	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required		r - · · · ·	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	ļ	Yes	No
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(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)			
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
t	off any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	4.		Х
	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			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			Х
•	were not corrected before the first day of the tax year beginning in 2012?	1c_		
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))  At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and			
٠	6e, Part XIII) for tax year(s) beginning before 2012?			
	If "Yes," list the years			
ŀ	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	İ		
	all years listed, answer "No" and attach statement - see instructions )	2b		Х
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	<b>&gt;</b>	ľ		
3 a	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			
t	of "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			1
	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)	3 b		X
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X

**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?

Form 990-PF (2012)

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Pa	t VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Requ	i <b>red</b> (continued)		
5 a	During the year did the foundation pay or incur any amou					
	(1) Carry on propaganda, or otherwise attempt to influer	= :			,	
	(2) Influence the outcome of any specific public ele-					
	directly or indirectly, any voter registration drive?				'	
	(3) Provide a grant to an individual for travel, study, or other	ner sımılar purposes?		. Yes X No	·	
	(4) Provide a grant to an organization other than a	charitable, etc., org	janization described			
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (s	see instructions)		. Yes X No	•	
	(5) Provide for any purpose other than religious, ch	arıtable, scientific,	literary, or education	al	1 1	
	purposes, or for the prevention of cruelty to children o	r anımals?		. Yes X No	.	
b	If any answer is "Yes" to 5a(1)-(5), did any of the	transactions fail to	qualify under the e	xceptions described in		
	Regulations section 53 4945 or in a current notice regard	ing disaster assistant	ce (see instructions)?		<u></u> 5b	X
	Organizations relying on a current notice regarding disast	er assistance check h	ere		[X]	
С	If the answer is "Yes" to question 5a(4), does the	foundation claim ex	emption from the ta	ax		
	because it maintained expenditure responsibility for the gr				. } }	
	If "Yes," attach the statement required by Regulations sect	tion 53 4945-5(d)				
6a	Did the foundation, during the year, receive any fund	` '	ctly, to pay premium	ns		
	on a personal benefit contract?	•				
b	Did the foundation, during the year, pay premiums, direct				6b	Х
	If "Yes" to 6b, file Form 8870	<b>,</b> ,,			•	
7 a	At any time during the tax year, was the foundation a pai	rty to a prohibited tax	shelter transaction?	Yes X No	. 1 1	
	If "Yes," did the foundation receive any proceeds or have			• — —	7b	Х
_	t VIII Information About Officers, Directors				yees,	<del></del>
_	and Contractors	sone see and their	- componention (see	instructions)		
	List all officers, directors, trustees, foundation n	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense	
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allo	
ATC	:H 7			q		0
				]		
		-	•			
2	Compensation of five highest-paid employees	(other than thos	e included on lin	e 1 - see instruction	ons). If no	ne, enter
	"NONE."		· · · · · · · · · · · · · · · · · · ·	(d) Contributions to		
(a	) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit plans and deferred	(e) Expense other allo	account,
		devoted to position		compensation	Other and	wantes
				}		
	NONE					
						_
						··-
			_			_
Tota	I number of other employees paid over \$50,000 .	<u> </u>				

3 NONE

Total. Add lines 1 through 3

All other program-related investments. See instructions

Pa	<ul> <li>Minimum Investment Return (All domestic foundations must complete this part. Foreignee instructions.)</li> </ul>	gn fou	ndations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	I	
	purposes	1	
а	Average monthly fair market value of securities	1a	
h	Average of monthly cash balances	1b	
	Fair market value of all other assets (see instructions)	1c	
		1d	0
u	Total (add lines 1a, b, and c)	<del>- '"  </del>	
е	Reduction claimed for blockage or other factors reported on lines 1a and		
_	1c (attach detailed explanation) 1e	2	
2	Acquisition indebtedness applicable to line 1 assets	-	
3	Subtract line 2 from line 1d  Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see	3	
4			
	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	4	
5		5	0
6	Minimum investment return. Enter 5% of line 5	6	0
Pa	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ and do not complete this process.	oart)	
1	Minimum investment return from Part X, line 6	1	
2 a	Tax on investment income for 2012 from Part VI, line 5		
b	Income tax for 2012 (This does not include the tax from Part VI) 2b	1 1	
	Add lines 2a and 2b	2c	621.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	-621.
4	Recoveries of amounts treated as qualifying distributions	4	
5		5	-621.
5 6		6	
0 7	Deduction from distributable amount (see instructions)  Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,	•	
•		7	
	line 1		
Pa	rt XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	71,471.
þ	Program-related investments - total from Part IX-B	1b	
2	Program-related investments - total from Part IX-B  Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		-
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	71,471.
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	71,471.
J	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when cal	للنا	<u> </u>
	qualifies for the section 4940(e) reduction of tax in those years	ouiatill	y whether the foundation

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Рa	Part XIII Undistributed Income (see instructions)							
		(a)	(b)	(c)	(d)			
1	Distributable amount for 2012 from Part XI,	Corpus	Years prior to 2011	2011	2012			
	line 7				ļ			
2	Undistributed income, if any, as of the end of 2012							
а	Enter amount for 2011 only			<del> </del>	<del> </del>			
b	Total for pnor years 20 10 ,20 09 ,20 08							
3	Excess distributions carryover, if any, to 2012							
а	From 2007							
	5							
	110111 2011	299,767.						
	Total of lines 3a through e	233,101.						
4	Qualifying distributions for 2012 from Part XII, line 4 > \$ 71,471.							
	Applied to 2011, but not more than line 2a	<del></del>			<del> </del>			
b	Applied to undistributed income of prior years							
	(Election required - see instructions)							
С	Treated as distributions out of corpus (Election required - see instructions)							
ч	Applied to 2012 distributable amount	· · · · · · · · · · · · · · · · · · ·						
	Remaining amount distributed out of corpus	71,471.		-				
5	Excess distributions carryover applied to 2012	•		<del> </del>				
	(If an amount appears in column (d), the same			•				
6	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	371,238.						
b	Prior years' undistributed income Subtract							
	line 4b from line 2b			···				
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							
e	amount - see instructions				-			
·	4a from line 2a Taxable amount - see							
	instructions							
f	Undistributed income for 2012 Subtract lines							
	4d and 5 from line 1 This amount must be distributed in 2013							
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)	72,214.						
9	Excess distributions carryover to 2013.	200 024						
	Subtract lines 7 and 8 from line 6a	299,024.						
	Analysis of line 9 Excess from 2008 57, 614.							
	5.C. F1.4							
	56.206							
	Excess from 2010							
	Excess from 2017							
	ENGGGG HOHI ZUIZ   / - / - /				<u> </u>			

Part XV Supplementary Information (continued)							
3 Grants and Contributions Paid During the Year or Approved for Future Payment  Recipient Show any relationship to any foundation manager or substantial contribution Purpose of grant or contribution  Name and address (home or business) Purpose of grant or contribution Amount							
Recipient	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount			
Name and address (home or business)	or substantial contributor	recipient	Contribution				
a Paid during the year							
_				İ			
ATCH 8							
				1			
Total	<u></u>	<u></u>	▶ 3a	70,764.			
b Approved for future payment							
	1						
Total			<u>▶</u> 3b	}			

Part XVI Enter gross	<ul> <li>Analysis of Income-Produ amounts unless otherwise indicated</li> </ul>		ated business income	Excluded b	y section 512, 513, or 514	(e)
1 Program	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
		. ,				(eco inche energy
d						
e						
g Fees	and contracts from government agencies					
_	rship dues and assessments					
3 interest of	on savings and temporary cash investments			14		
	ds and interest from securities			14		77
	al income or (loss) from real estate					
	-financed property					
	debt-financed property			<del></del>		
	ivestment income	_				
	loss) from sales of assets other than inventory			18		31,927
•	ome or (loss) from special events					
	rofit or (loss) from sales of inventory					
•	evenue a					
b						
c						
d		<del></del> ,				
e	I Add columns (b), (d), and (e)					32,004
	dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calc  Relationship of Activities	ulations)				32,004
Line No. ▼	Explain below how each activit accomplishment of the foundation	-	•			•
4	INVESTMENT INCOME FRO	OM SECUE	RITIES INVESTED	TO EARN	FUNDS	
	FOR EXEMPT PURPOSE OF			<u>-</u>		
7	SECURITIES ARE HELD A	AND SOLE	FOR A PROFIT	TO EARN I	FUNDS FOR	
	THE EXEMPT PURPOSE OF	THE OF	RGANIZATION			
		<del></del>				
		<del></del>				······································
				<del></del>	<del></del>	
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			<del></del>		-	
						<del></del>
		·			<del></del>	
			<del></del>		<del></del>	
						······································

Part	ΧÝΙΙ	Information R Exempt Orga		nsfers To an	d Transact	ions a	nd Relat	ionships With No	nchar	itable	9
- 1	n sect	_						organization described 27, relating to politica		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of											
									)	X	
									1a(2)	4	X
		transactions	and a supplementation of the supplementation	ant organization					45.4		Х
											X
											Х
										$\overline{}$	Х
										_	Х
											Х
											Х
\	value	of the goods, other	assets, or service	ces given by the	reporting fo	undatio	n If the fo	<ul> <li>b) should always shoundation received lesoods, other assets, or</li> </ul>	s than	fair m	narke
(a) Lin		(b) Amount involved	<del>,</del>	oncharitable exempt				ransfers, transactions, and s			
		N/A				N/A		· · · · · · · · · · · · · · · · · · ·			
							·	···-			
					<del></del> .						
						l					
			<del>  -</del> -								
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		<del> </del>		<del></del>							
										-	
		foundation directly						empt organizations	$\Gamma$	es X	٦
		bed in section 501(c		ner than section	501(c)(3)) or	ın secti	on 52//.		Y	es <u></u>	] 140
D I	ii res	(a) Name of organization		(b) Type	of organization			(c) Description of relation	nship		-
-		(-,		(-7 - 7 - 7							
					_						
			~~								
						_					
Sign	corre	r penalties of penury, I decl ct, and complete Declaration of	are that I have examin preparer (other than ta	ned this return, includin expayer) is based on all in	ig accompanying solution of which	chedules ar preparer ha	nd statements, is any knowledge		edge and		
Here		nature of officer or trustee	1 YWW	Date	<u>//                                   </u>	Title	<u>C</u> UDUNU		preparer		
		Print/Type preparer's	s name	Preparer's sign	nature		Date	Check	PTIN		
Paid		7	ALLAND	O De De	n Pon A	10-	2-4	Check if self-employed		4349	32
Prep	arer	- Compression	DDECKE CLARI	<u> </u>	s can	weg	UBIT		35034		
Use	Only	Firm's address > 44			, SUITE 1	-		Timita Elit		-	
	-	1	ALM DESERT,	CA		9	2260	Phone no 760-	346-3	861	
		<del></del>							- 0	A DE	

## 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

Employer identification number

Name of the organization		Employer identification number
JOHN & CHERIE MORRIS	FAMILY FOUNDATION	20-0434698
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private	te foundation
		.5 154.164.1677
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private fo	undation
	501(c)(3) taxable private foundation	
Instructions  General Rule	, (8), or (10) organization can check boxes for both the General Rule ar	iu a Special Rule See
X For an organization t	filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5, one contributor. Complete Parts I and II	,000 or more (in money or
Special Rules		
under sections 509(a	(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % suppa)(1) and 170(b)(1)(A)(vi) and received from any one contributor, duri, 000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) III	ng the year, a contribution of
during the year, total	(7), (8), or (10) organization filing Form 990 or 990-EZ that received to contributions of more than \$1,000 for use exclusively for religious, choses, or the prevention of cruelty to children or animals. Complete Part	naritable, scientific, literary,
during the year, cont not total to more tha year for an exclusivel	(7), (8), or (10) organization filing Form 990 or 990-EZ that received tributions for use <i>exclusively</i> for religious, charitable, etc., purposes, bin \$1,000. If this box is checked, enter here the total contributions that by religious, charitable, etc., purpose. Do not complete any of the parts ization because it received nonexclusively religious, charitable, etc., or	ut these contributions did t were received during the unless the <b>General Rule</b> contributions of \$5,000 or
990-EZ, or 990-PF), but it <b>mus</b>	s not covered by the General Rule and/or the Special Rules does not t answer "No" on Part IV, line 2 of its Form 990, or check the box on PF, to certify that it does not meet the filing requirements of Schedule E	line H of its Form 990-EZ or on
For Paperwork Reduction Act Notice	, see the Instructions for Form 990, 990-EZ, or 990-PF. Sche	edule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization JOHN & CHERIE MORRIS FAMILY FOUNDATION

Employer identification number 20-0434698

Part I	rt I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed.						
(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 VEDRAS, FL 32082	- \$18,660. -	Person X 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)				
(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)				

Employer identification number

			20-0434698
Part II	Noncash Property (see instructions). Use duplicate copies of Pa	art II if additional space is ne	eded.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<del>-</del> -		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Name of organization JOHN & CHERIE MORRIS FAMILY FOUNDATION

Employer Identification number 20-0434698

Part III	Exclusively religious,	charitable, etc	c., individual co	ntributions t	o section 50	)1(c)(7), (8),	or (10) organizations	S
	that total more than	\$1,000 for the	year. Complete	columns (a)	through (e)	and the foll	lowing 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. 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 (a) No. from (c) Use of gift (d) Description of how gift is held (b) Purpose of gift Part i (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (d) Description of how gift is held (c) Use of gift from (b) Purpose of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (c) Use of gift (d) Description of how gift is held (b) Purpose of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

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SECO	
FROM	
INTEREST	
AND	
DIVIDENDS AND INTEREST FROM SECURITIES	
1	۱
PART I	
990PF,	
FORM	

NET INVESTMENT	INCOME	.77.
REVENUE AND EXPENSES	PER BOOKS	. 77
	DESCRIPTION	MERRILL LYNCH

TOTAL

FEES
ACCOUNTING
ı
PART
990PE,
ORM

ATTACHMENT 2

CHARITABLE	707.	707.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	708.	708.
REVENUE AND EXPENSES PER BOOKS	1,415.	1,415.
,		TOTALS
DESCRIPTION	ACCOUNTING FEES	

# FORM 990PF, PART I - OTHER PROFESSIONAL FEES

	NET	INVESTMENT	INCOME	150.	150.
REVENUE	AND	EXPENSES	PER BOOKS	150.	150.
			CON	JERRILL LYNCH INVESTMENT FEES	TOTALS
			DESCRIPTION	MERRILL L	

E E	INVESTMENT	INCOME	.96	.96
REVENUE AND	EXPENSES	PER BOOKS	.96	.96
				TOTALS
		DESCRIPTION	FILING FEES	

ATTACHMENT 5

DESCRIPTION

BEGINNING BOOK VALUE

MERRILL LYNCH PORTFOLIO

21,721.

TOTALS

ATTACHMENT 6

## FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION		AMOUNT
FEDERAL INCOME TAX		373.
	TOTAL	373.

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

Kınd of F	Property		Desc	ription		or or	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ 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)	
, , , , , , , , , , , , , , , , , , ,		2947.538 SH PROPERTY TY	LORD ABBOT	T SHORT DUR		Р	02/22/2011	01/23/201
13,441.		13,588.					-147.	
		1768 SH LORI PROPERTY TY			F	Р	03/15/2011	01/23/201
8,062.		8,133.					-71.	
		54 SH APPLE		TEC		Р	01/13/2009	03/20/201
32,146.		PROPERTY TY	PE: SECURII	IES			32,145.	
OTAL GAIN(L	oss)						31,927.	

FORM 990PE, PART VIII - LIST OF OFFI	OFFICERS, DIRECTORS, AND TRUSTEES		ATTACHMENT 7
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION		
JOHN MORRIS 621 PONTE VEDRA BOULEVARD, UNIT A PONTE VEDRA BEACH, FL 32082	PRESIDENT	0	0
CHERIE MORRIS 621 PONTE VEDRA BOULEVARD, UNIT A PONTE VEDRA BEACH, FL 32082	SECRETARY/TREASURER	0	0

0

0

GRAND TOTALS

ATTACHMENT 8

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	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	12,500
GEORGIA TECH ATHLETIC ASSOC & ALEXANDER THARPE END 150 BOBBY DODD WAY, NW ATLANTA, GA 10332	N/A PUBLIC	ASSIST STUDENT ATHLETES FOR ACADEMIC SUCCESS	200
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	250
CHILDREN'S HOSPITAL OF THE KINGS DAUGHTERS 601 CHILDREN'S LANE NORFOLK, VA 23507	N/A PUBLIC	PROVIDE QUALITY CHILDREN'S HEALTH SERVICES	. 500.
SUN VALLEY WRITERS CONFERENCE P O. BOZ 957 KETCHUM, ID 83340	N/A PUBLIC	PROMOTION OF EXCELLENCE IN WRITING	2,500

ATTACHMENT 8 (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 P O BOX 1914 SUN VALLEY, ID 83353	N/A PUBLIC	ARTISTIC, EDUCATIONAL AND CULTURAL PROGRAMMING	2,000.
CONSERVATION INTERNATIONAL 2011 CRYSTAL DRIVE, SOUTH 500 ARLINGTON, VA 22202	N/A PUBLIC	PRESERVE THE WORLD'S LANDSCAPES AND SEASCAPES BY ESTABLISHING A GLOBAL CONSERVATION AGENDA	2,500
MAYO CLINIC 200 FIRST ST SW ROCHESTER, MN 55905	N/A PUBLIC	MAYO CLINIC HAS INSPIRED HOPE AND CONTRIBUTED TO HEALTH AND WELL-BEING BY PROVIDING THE BEST CARE TO EVERY PATIENT THROUGH INTEGRATED CLINICAL PRACTICE, EDUCATION AND RESEARCH	1,000
COLONIAL BAPTIST CHURCH 6051 TRYON ROAD CARY, NC 27518	N/A PUBLIC	OUR CHURCH IS A FELLOWSHIP OF BELIEVERS REDEEMED FOR ETERNITY BY JESUS CHRIST, EQUIPPED FOR LIFE BY THE WORD OF GOD, EMPOWERED FOR MINISTRY BY THE HOLY SPIRIT, WHOSE PURPOSE FOR EXISTENCE IS IN BRINGING GLORY TO GOD AND ENJOYING OUR ABUNDANT LIFE IN HIM OUR VARIOUS MINISTRIES AND RESOURCES ARE DESIGNED TO HELP CHISEL GOD'S TRUTH ON EACH PERSON'S HEART SO THAT OUR LIVES MAY BETTER REFLECT HIS GLORY AND EXPLORE THE WORLD OF COLONIAL AT YOUR FINGERTIPS.	200.
BREAD FOR THE CITY 1640 GOOD HOPE ROAD, SE WASHINGTON, DC 20020	N/A PUBLIC	BREAD FOR THE CITY OFFERS FIVE PROGRAM SERVICES TO LOW-INCOME RESIDENTS OF WASHINGTON, DC FOOD AND CLOTHING DISTRIBUTION, PRIMARY MEDICAL CARE, LEGAL ADVICE AND REPRESENTATION, AND COMPREHENSIVE SOCIAL SERVICES	900

L.

ATTACHMENT 8 (CONT'D)

100.

200

AMOUNT

500.

1,500

THE WORLD

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR	
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION
MORAN EYE CENTER GENERAL RETINAL RESEARCH FUND 540 ARAPEEN DRIVE SALT LAKE CITY, UT 84108-1238	N/A PUBLIC	FIND TREATMENTS AND PROCEDURES ON A WIDE RANGE OF EYE PROBLEMS, SUCH AS AGE-RELATED MACULAR DEGENERATION, GLAUCOMA, CATARACTS, AND EXTERNAL EYE DISEASES.
SAWTOOTH BOTANICAL GARDENS 11 GIMLET ROAD SUN VALLEY, ID 83353	N/A PUBLIC	THE SAWTOOTH BOTANICAL GARDEN IS A COMMUNITY RESOURCE SHOWCASING NATIVE AND CULTIVATED PLANTS THAT FLOURISH AT HIGH ALTITUDE. THE GARDEN CONNECTS PEOPLE TO THE REGION'S UNIQUE BEAUTY AND FOSTERS ENVIRONMENTAL STEWARDSHIP THROUGH EDUCATION, EVENTS, DISPLAYS AND PLANT COLLECTIONS
ST ANDREWS EPISCOPAL CHURCH 1004 GRAYDON AVENUE NORFOLK, VA 23507	N/A PUBLIC	SAINT ANDREW'S IS A PARISH OF WORSHIP, SPIRITUAL GROWTH, ACCEPTANCE AND HEALING CENTERED IN THE EUCHARIST WE REACH BEYOND OURSELVES, STRIVING TO ALLOW GOD TO WORK THROUGH OUR HANDS AS CHRIST'S OWN IN OUR ROLE AS STEWARDS OF GOD'S GIFTS WE EMBRACE A COMPREHENSIVE CONCEPT OF STEWARDSHIP AS CENTRAL TO OUR MINISTRY AS A PLACE OF HOPE FOR ALL PEOPLE, WE CELEBRATE WITH JOY THROUGH GRACE OUR ONENESS IN CHRIST
ST LUKES WOOD RIVER FOUNDATION P O BOX 7005 KETCHUM, ID 83340	N/A PUBLIC	SUPPORT LIFE-SAVING TECHNOLOGY, PATIENT CARE, HEALTH EDUCATION, AND SPECIALIZED SERVICES RARELY SEEN AT A HOSPITAL OF OUR SIZE
ALDERSGATE UNITED METHODIST CHURCH	N/A	ALDERSGATE UNITED METHODIST CHURCH SEEKS TO PERFORM MISSIONS AND SERVICE TO OUR NEIGHBORS IN OUR LOCAL COMMUNITY, THE NATION, AND THROUGHOUT

5,000

YEAR
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ATTACHMENT 8 (CONT'D)

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
1301 COLLINGWOOD ROAD	PUBLIC		
ALEXANDRIA, VA 22308			
GOERGIA TECH ALUMNI ASSOCIATION	N/A		2,000
190 NORTH AVENUE	PUBLIC		
ATLANTA, GA 30313		IMPROVE OUR WORLD	

70,764
PAID
TOTAL CONTRIBUTIONS
TOTAL

THOSE AVAILABLE AT THE CAMPUS RECREATION CENTER

SQUARE, WHICH TRANSFORMED TECH'S CAMPUS

### SCHEDULE D (Form 1041)

Internal Revenue Service

Name of estate or trust

Department of the Treasury

## **Capital Gains and Losses**

▶ Attach to Form 1041, Form 5227, or Form 990-T. ▶ Information about Schedule D (Form 1041) and its separate instructions is at www.irs.gov/form1041.

OMB No 1545-0092

Employer Identification number

20-0434698 JOHN & CHERIE MORRIS FAMILY FOUNDATION Note: Form 5227 filers need to complete only Parts I and II Short-Term Capital Gains and Losses - Assets Held One Year or Less (f) Gain or (loss) for (a) Description of property (Example 100 shares 7% preferred of "Z" Co) (b) Date acquired (c) Date sold (e) Cost or other basis (d) Sales price the entire year Subtract (e) from (d) (mo, day, yr) (mo, day, yr) (see instructions) 1a b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 1b -218. Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 2 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts 3 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2011 Capital Loss Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, -218. column (3) on the back, Long-Term Capital Gains and Losses - Assets Held More Than One Year (f) Gain or (loss) for the entire year (b) Date acquired (e) Cost or other basis (a) Description of property (c) Date sold (d) Sales price (Example 100 shares 7% preferred of "Z" Co) (see instructions) (mo , day, yr ) (mo, day, yr) Subtract (e) from (d) 6a **b** Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b 6b 32,145. Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 7 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 9 Capital gain distributions Gain from Form 4797, Part I 10 10 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2011 Capital Loss 11 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, 12 32,145. column (3) on the back . . . . . . . . Schedule D (Form 1041) 2012 For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

chedu	ile D (Form 1041) 2012					Page Z
Part			(1) Beneficiaries'	(2) Estate or trust		(3) Total
	Caution: Read the instructions before completing this		(see instr.)	OI trust		-218.
	Net short-term gain or (loss)	13				210.
	Net long-term gain or (loss):	142				32,145.
a. hi	Total for year	14b				
	28% rate gain	$\overline{}$				
	Fotal net gain or (loss). Combine lines 13 and 14a					31,927.
lote:	If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 go to Part V, and do not complete Part IV If line 15, column (3), is a n	(or For	m 990-T, Part I, line 4 , complete Part IV an	a) If lines 14a	and Loss C	15, column (2), are net Carryover Worksheet, as
ecess Part			-			
	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, F	Part I. III	ne 4c. if a trust), the sr	naller of		
					6 (	)
lote:	The loss on line 15, column (3) or b \$3,000.  If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, arryover Worksheet in the instructions to figure your capital loss carryover.	page 1	, line 22 (or Form 99	0-T, line 34), is	s a los	s, complete the Capital
Part						· · · · · · · · · · · · · · · · · · ·
	1041 filers. Complete this part only if both lines 14a and 15 in coli		2) are gains, or an a	mount is ent	ered i	n Part I or Part II and
	is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mor					
autio	on: Skip this part and complete the Schedule D Tax Worksheet in the i	nstruc	tions if			
Eitl	her line 14b, col (2) or line 14c, col (2) is more than zero, or					
	th Form 1041, line 2b(1), and Form 4952, line 4g are more than zero					d
orm	990-T trusts. Complete this part only if both lines 14a and 15 a m 990-T, and Form 990-T, line 34, is more than zero. Skip this part	re gai	ns, or qualified divi	dends are inc	Siudeo rkeha	In income in Part i
	er line 14b, col (2) or line 14c, col (2) is more than zero	anu c	omplete the Schedt	He D Tax WO	INSTIC	et in the instructions
		24)	17		$\overline{}$	
	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3		· · <del>  17  </del>			
	Enter the smaller of line 14a or 15 in column (2)					
	but not less than zero					
	from Form 1041, line 2b(2) (or enter the qualified					
	dividends included in income in Part I of Form 990-T) 19					
	Add lines 18 and 19		-		1	
	If the estate or trust is filing Form 4952, enter the					
	amount from line 4g, otherwise, enter -0 <b>21</b>					
	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			
		• • •				
4	Enter the smaller of the amount on line 17 or \$2,400		. 24			
	Is the amount on line 23 equal to or more than the amount on line 24					
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box					
	No. Enter the amount from line 23		25			
26	Subtract line 25 from line 24		26			
27	Are the amounts on lines 22 and 26 the same?					
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or lin	ne 22	27			
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)		. <u> </u>		30	
	Figure the tax on the amount on line 23. Use the 2012 Tax Rate					
	(see the Schedule G instructions in the instructions for Form 1041)			3	31	
	Add lines 30 and 31	· : :			32	<del> </del>
	Figure the tax on the amount on line 17 Use the 2012 Tax Rate				.	
	(see the Schedule Ginstructions in the instructions for Form 1041)	 bar		<u>3</u>	33	
	Tax on all taxable income. Enter the smaller of line 32 or line 33 l				.	
	G, line 1a (or Form 990-T, line 36)	• • •			shedu	ule D (Form 1041) 2012
						ne v reviii ivali <i>z</i> ulz

## SCHEDULE D-1 (Form 1041)

Continuation Sheet for Schedule D (Form 1041)

OMB No 1545-0092

**Employer identification number** 

Department of the Treasury Internal Revenue Service

Name of estate or trust

► Attach to Schedule D to list additional transactions for lines 1a and 6a. ▶ Information about Schedule D (Form 1041) and its separate instructions is at www.irs.gov/form1041.

JOHN & CHERIE MORRIS FAMILY FOUNDATION 20-0434698 Short-Term Capital Gains and Losses - Assets Held One Year or Less Part I (b) Date (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (e) Cost or other basis (see instructions) (f) Gain or (loss) Subtract (e) from (d) (c) Date sold (d) Sales price acquired (mo , day, yr ) (mo, day, yr) 1a 2947.538 SH LORD ABBOTT SHORT DUR INC F -147. 02/22/2011 01/23/2012 13,441. 13,588 1768 SH LORD ABBOTT SHORT 8,062. 8,133. -71. DUR INC F 03/15/2011 01/23/2012 1b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 1b . . . . . . -218.

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

Schedule D-1 (Form 1041) 2012

Name 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	(b) Date			(-) (21	(0.C-1- : "
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	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)
a 54 SH APPLE INC	01/13/2009	03/20/2012	32,146.	1.	32,145
34 SH APPLE INC	01/13/2009	03/20/2012	32,140.		32,143
					<u> </u>
	-				
				-	
	ļ				
					· <del>-</del> ····
	, .				
		<u> </u>			
	-		<del></del>		
				<u> </u>	
b Total. Combine the amounts in colu	ımn (f). Enter here and	d on Schedule D. line	e 6h		32,14