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SCANNED MAY 3 0 2013

Form 990-PF Department of the Treasury Internal Revenue Service

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

OMB No 1545-0052

For calendar year 2012 or tax year beginning , and ending							
		foundation	A Employer identification number				
		PHIS FAMILY FOUNDATION,					
_		ROCK A. MORPHIS	20-8103092	<u> </u>			
		nd street (or P O box number if mail is not delivered to street WESTVIEW AVENUE	B Telephone number	200			
					615-665-82		
		own, state, and ZIP code HVILLE, TN 37205	C If exemption application is	pending, check here			
	-	all that apply: Initial return	Initial return of a fe	ormer public charity	D 1. Foreign organization	e abook bara	
•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Final return	Amended return	ornici public charity	D 1.1 Oreign organization	S, CHECK HELE	
		Address change	Name change		Foreign organizations m check here and attach c	eeting the 85% test,	
H (heck	type of organization: X Section 501(c)(3) ex					
	_		Other taxable private foundate	ation	E If private foundation sta under section 507(b)(1		
I Fa	ir ma	rket value of all assets at end of year J Account		Accrual	F If the foundation is in a	• • •	
		Part II, col. (c), line 16)	ther (specify)		under section 507(b)(1		
_		854 , 619 . (Part I, colu	mn (d) must be on cash i	basis)			
Pä	<u>irt:l</u>	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	_ (a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes	
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	ıncome	(cash basis only)	
	1	Contributions, gifts, grants, etc., received	301,825.		N/A	*	
	2	Check If the foundation is not required to attach Sch B Interest on savings and temporary			* * * * * * * * * * * * * * * * * * *		
	3	cash investments	11.	11	, -1	STATEMENT 1	
	4	Dividends and interest from securities	13,289.	13,289	· .	STATEMENT 2	
	5a	Gross rents		x*** 363		* ~ ` ` `	
	b	Net rental income or (loss)	· , , , ,	· AGA AGA T-FA	8 () .		
ē	6a	Net gain or (loss) from sale of assets not on line 10	5,625.	erictika d	, , , , , , , , , , , , , , , , , , ,	1 2 22	
en	b	Gross sales price for all assets on line 6a 377,848.		(
Revenue	7	Capital gain net income (from Part IV, line 2)		5,625		FIVED	
_	8	Net short-term capital gain					
	9	Income modifications Gross sales less returns			- 121 00 AV	2 1 2013	
	10a	and allowances		řířa	3 (8 t) No.	7 + 4010 IE.	
		Less Cost of goods sold	` * }		7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		
		Gross profit or (loss)			- OGI	DEN. UT	
	11	Other income	320,750.	18,925			
	12 13	Total. Add lines 1 through 11 Compensation of officers, directors, trustees, etc	320,730.) •	0.	
	14	Other employee salaries and wages	0.		<u>' • </u>	<u> </u>	
	15	Pension plans, employee benefits				-	
es	Į.	Legal fees					
enses		Accounting fees STMT 3	1,825.		, 	0.	
ğ	i .	Other professional fees STMT 4	7,369.	7,369	· •	0.	
Je E	17	Interest		.,505	-	 	
Operating and Administrative Exp	18	Taxes STMT 5	29.	29		0.	
iist	19	Depreciation and depletion					
ш	20	Occupancy	· · · · · · · · · · · · · · · · · · ·		,		
Ad	21	Travel, conferences, and meetings			·· ··		
ğ	22	Printing and publications		,			
g,	23	Other expenses					
atıı	24	Total operating and administrative					
ber		expenses. Add lines 13 through 23	9,223.	7,398	· .	0.	
0	25	Contributions, gifts, grants paid	90,000.			90,000.	
	26	Total expenses and disbursements.					
		Add lines 24 and 25	99,223.	7,398		90,000.	
	27	Subtract line 26 from line 12:					
	а	Excess of revenue over expenses and disbursements	221,527.				
		Net investment income (if negative, enter -0-)		11,527			
2235		Adjusted net income (if negative, enter -0-)	<u> </u>		N/A		
2235 12-05	-12	LHA For Paperwork Reduction Act Notice, see	instructions.			Form 990-PF (2012)	

MORPHIS FAMILY FOUNDATION, INC. 20-8103092 C/O ROCK A. MORPHIS Form 990-PF (2012) Page 2 Balance Sheets Attached schedules and amounts in the description Beginning of year End of year Part II column should be for end-of-year amounts only (a) Book Value (b) Book Value (c) Fair Market Value Cash - non-interest-bearing 202,804. 334,480 334,480. 2 Savings and temporary cash investments 3 Accounts receivable ▶ Less: allowance for doubtful accounts 4 Pledges receivable ▶ حدث گال Less: allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations STMT 6 411,214 501,065 520,139. b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis_ Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment; basis I Less accumulated depreciation 15 Other assets (describe ▶ 614,018 835,545 16 Total assets (to be completed by all filers) 854,619 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 0 0 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. Fund Balances 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted \triangleright X Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. þ 27 Capital stock, trust principal, or current funds 0 Net Assets 0 0 28 Paid-in or capital surplus, or land, bldg., and equipment fund 614,018. 835,545 29 Retained earnings, accumulated income, endowment, or other funds 614,018. 835,545 30 Total net assets or fund balances 614,018 835,545 31 Total liabilities and net assets/fund balances **Analysis of Changes in Net Assets or Fund Balances**

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30		1
(must agree with end-of-year figure reported on prior year's return)	1	614,018.
2 Enter amount from Part I, line 27a	2	221,527.
3 Other increases not included in line 2 (itemize)	3	0.
4 Add lines 1, 2, and 3	4	835,545.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	835,545.

Page 3

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)			I P-	ow acquired Purchase Donation		(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)	
b SEE ATTACHED	STATEMENTS			├				
C			 	 				
d					–			
e				<u> </u>				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	, , ,	t or other basis xpense of sale				iain or (loss) s (f) minus (
a				\dashv				
b c	-							
d	- · · · · · · · · · · · · · · · · · · ·			+				
e 377,848.			372,22	3.				5,625.
Complete only for assets showing	gain in column (h) and owned by	the foundation	on 12/31/69			(I) Gains (C	Col. (h) gain	minus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (1), if any		C		not less thar (from col. (
a		-						
b				\dashv				
d				\dashv				
e								5,625.
	∫ If gain, also enter	ın Part I line	7	7				5,025
2 Capital gain net income or (net capi) [2			5,625
3 Net short-term capital gain or (loss)				ί[·	
If gain, also enter in Part I, line 8, co		, ,		\mathbf{I}			/-	
If (loss), enter -0- in Part I, line 8 Part Va Qualification Un	der Section 4940(e) for	Peduced	Tay on Not	J	3	oomo.	N/A	
(For optional use by domestic private for						-	-	
	•	10 10(a) tax 011	not investment in		,			
If section 4940(d)(2) applies, leave this	part blank.							
Was the foundation liable for the sectio	n 4942 tax on the distributable am	ount of any ye	ar in the base per	od?				Yes X No
If "Yes," the foundation does not qualify								
1 Enter the appropriate amount in ea (a)		istructions be	ore making any ei					(a)
Base period years Calendar year (or tax year beginning	(b) Adjusted qualifying dis	tributions	Net value of no	(c) nchari	table-use asset	s	Distrib	(d) ution ratio ided by col. (c))
2011		0.			413,99		(00% (5) 0.1	• 000000
2010		885.			357,24			.002477
2009		843.			284,82			.002960
2008		3,472.			432,12			.170025
2007		4,801.			520,47	5.		.009224
2 Total of line 1, column (d)								.184686
3 Average distribution ratio for the 5-	vear hase period - divide the total o	n line 2 hy 5	or by the number	of ves	re	2		.104000
the foundation has been in existence		ni iiic z by o,	or by the number	OI yea	15	3		.036937
4 Enter the net value of noncharitable	-use assets for 2012 from Part X,	ine 5				4		631,653.
5 Multiply line 4 by line 3			5		23,331.			
6 Enter 1% of net investment income	(1% of Part I, line 27b)					6		115.
7 Add lines 5 and 6						7		23,446.
8 Enter qualifying distributions from F	Part XII, line 4					8		90,000.
If line 8 is equal to or greater than li	•	1b, and comp	lete that part using	g a 1%	tax rate.		·	
See the Part VI instructions.	•							

MORPHIS FAMILY FOUNDATION, INC.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instruc	ions)
1a 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 Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔀 and enter 1%	115.
of Part I, line 27b	
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	0.
3 Add lines 1 and 2	115.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	115.
6 Credits/Payments:	_
a 2012 estimated tax payments and 2011 overpayment credited to 2012	4
b Exempt foreign organizations - tax withheld at source	4
c Tax paid with application for extension of time to file (Form 8868)	, s.g
d Backup withholding erroneously withheld	76
7 Total credits and payments. Add lines 6a through 6d 7	0.
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	115.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	
11 Enter the amount of line 10 to be: Credited to 2013 estimated tax	
Part VII-A Statements Regarding Activities	
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	es No
any political campaign?	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	X
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.	
c Did the foundation file Form 1120-POL for this year?	_ x
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	5 A
(1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$ 0.	*
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	:: M
managers. ► \$ 0.	
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?	X
If "Yes," attach a detailed description of the activities.	
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	_ X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	X
b If "Yes," has it filed a tax return on Form 990-T for this year? N/A 4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	X
If "Yes," attach the statement required by General Instruction T.	
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	^
By language in the governing instrument, or	z.
By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law	
remain in the governing instrument?	x
7 Did the foundation have at least \$5,000 in assets at any time during the year?	X
If "Yes," complete Part II, col. (c), and Part XV.	1
8a Enter the states to which the foundation reports or with which it is registered (see instructions)	.; **
TN	
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	~
	x
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	
year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV	\mathbf{x}
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	X

MORPHIS FAMILY FOUNDATION, INC.

	1990-PF (2012) C/O_ROCK A. MORPHIS 20-810	3092		Page 5
Pa	art 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	\top		
	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	Х	
	Website address ► N/A			
14	The books are in care of ► ROCK A. MORPHIS Telephone no. ►615 – 6			
	Located at ► 709 WESTVIEW AVENUE, NASHVILLE, TN ZIP+4 ►3	7205		
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	N	/A	
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign	` `	· .	5- EG 1
	country >	<u> </u>	~ ,**	* × * *
Pa	art 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.	3.7.	Yes	No
18	a During the year did the foundation (either directly or indirectly):	* 30		
	(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?	***		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	25		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	4 ^{1/2}	25	2.0
	(5) Transfer any income or assets to a disqualified person (or make any of either available	~~	1	
	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.)			
ľ	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		- 22	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A	1b		388
_	Organizations relying on a current notice regarding disaster assistance check here			
(c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
•	before the first day of the tax year beginning in 2012?	1c	- 5 ×	
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	44.	1000	, ;
	defined in section 4942(j)(3) or 4942(j)(5)): At the end of the year 2012, did the foundation have any undistributed income (lines 6d and 6a. Best XIII) for the year(a) beginning.		•	K '25
•	a 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? Yes X No		~	3 2/00
	reme on the boundary of the bo	*	(°	
,	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	*	ž	
•	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	.c. 2		
	statement - see instructions.) N/A	2b	_11_	i
,	the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	~		-
3:	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		~ ;	
٠.	during the year?			
ı	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			· _g
	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,		}	[4
	Form 4720, to determine if the foundation had excess business holdings in 2012.) N/A	3b	l	l ¹
4:	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	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?

MORPHIS FAMILY FOUNDATION, INC. 20-8103092 C/O ROCK A. MORPHIS Form 990-PF (2012) Page 6 Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for __ Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? N/A 5b Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained N/A 🗌 Yes 🔙 No expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b If "Yes" to 6b, file Form 8870. Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? N/A 7b Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred (c) Compensation (b) Title, and average (e) Expense account, other hours per week devoted to position (If not paid, enter -0-) (a) Name and address allowances compensation ROCK MORPHIS PRESIDENT 709 WESTVIEW AVENUE

705 MEDIVIEW HVEROE				
NASHVILLE, TN 37205	1.00	0.	0.	0.
BILL HARBISON	SECRETARY			
1040 LYNNWOOD BLVD				
NASHVILLE, TN 37215	1.00	0.	0.	0.
LINDA MORPHIS	TREASURER			
709 WESTVIEW AVENUE				
NASHVILLE, TN 37205	1.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those		, enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deterred compensation	(e) Expense account, other allowances
NONE			Compensation	
		-		
			_	
	_			
Total number of other employees paid over \$50,000				<u> </u>

MORPHIS FAMILY FOUNDATION, INC. C/O ROCK A. MORPHIS

Form 990-PF (2012) C/O ROCK A. MORPHIS		8103092 Page 7
Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, en		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		> 0
Part IX-A Summary of Direct Charitable Activities	·	
List the foundation's four largest direct charitable activities during the tax year. Include relevant stanumber of organizations and other beneficiaries served, conferences convened, research papers p.	itistical information such as the roduced, etc.	Expenses
1 N/A		
2		
		{
3		
4		
Part IX-B Summary of Program-Related Investments		1
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2.	Amount
1 N/A		
2		1
All other program-related investments. See instructions.		
3		
Total Add lines 1 through 3	•	0.

C/O ROCK A. MORPHIS

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Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, s	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	I	
а	Average monthly fair market value of securities	1a	600,721. 40,551.
	Average of monthly cash balances	1b	40,551.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	641,272.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	641,272.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	9,619.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	631,653.
6	Minimum investment return. Enter 5% of line 5	6	31,583.
	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are	nd certain	
Ĺ.	foreign organizations check here 🕨 🔛 and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	31,583.
2a	Tax on investment income for 2012 from Part VI, line 5	3. 2 mar.	
b	Income tax for 2012. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	115.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	31,468.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	31,468.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	31,468.
P	art XII Qualifying Distributions (see instructions)		
, 1, 3			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		00 000
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	90,000.
þ	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
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	90,000.
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	5	115.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	89,885.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies for	the section
	4940(e) reduction of tax in those years.		

C/O ROCK A. MORPHIS

20-8103092

Page 9

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI,				24 460
line 7				31,468.
2 Undistributed income, if any, as of the end of 2012				,
a Enter amount for 2011 only			19,185.	
b Total for prior years:		_		, s
,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,		0.	, « ,	***
3 Excess distributions carryover, if any, to 2012:			*•	
a From 2007		٠	* ***	
b From 2008	•	′ × •	* * * * * * * * * * * * * * * * * * * *	
c From 2009	, , , , , , , , , , , , , , , , , , , ,	· ***		
d From 2010		,		
e From 2011				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2012 from				
Part XII, line 4: ►\$ 90,000.				
a Applied to 2011, but not more than line 2a	(,, , ,	, ;; d , ; t	19,185.	
b Applied to undistributed income of prior		_		
years (Election required - see instructions)		0.	79. 3 1 8 × 2.17.4	13. 3 0.00 % 30.00 4
c Treated as distributions out of corpus	•	*		
(Election required - see instructions)	0.	,		
d Applied to 2012 distributable amount	, , , , , , , , , , , , , , , , , , , ,			31,468.
e Remaining amount distributed out of corpus	39,347.		` : \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))	0.	***		
6 Enter the net total of each column as indicated below:	~ * * * * * * * * * * * * * * * * * * *			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	39,347.	7		
b Prior years' undistributed income. Subtract	33,317		**	2 1 4 1 7 4 4 5 7 4 5 7 4 5 7 4 5 7 4 5 7 4 5 7 4 5 7 4 5 7 4 5 7 7 4 5 7 7 7 7
line 4b from line 2b	4.1.	0.		
c Enter the amount of prior years'			* * * * * * * * * * * * * * * * * * * *	*
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously	- f _u			
assessed	\$,	0.		* * * * * * * * * * * * * * * * * * * *
d Subtract line 6c from line 6b. Taxable		,	,	** * ! * * !
amount - see instructions		0.		**
e Undistributed income for 2011. Subtract line	*	2	0	الم المناسبة الما الما الما الما الما الما الما الم
4a from line 2a. Taxable amount - see instr.		\$ <u>%</u>	. 0	
f Undistributed income for 2012. Subtract				
lines 4d and 5 from line 1. This amount must				0.
be distributed in 2013	<u>.</u>		· · · · · · · · · · · · · · · · · · ·	V•
7 Amounts treated as distributions out of		, ·;		
corpus to satisfy requirements imposed by	0.	٩		}
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2007	0.			, ;
not applied on line 5 or line 7 9 Excess distributions carryover to 2013.				, ,
Subtract lines 7 and 8 from line 6a	39,347.			l ·
O Analysis of line 9:	33,347.			
a Excess from 2008				;
b Excess from 2009				
c Excess from 2010				
d Excess from 2011				
e Excess from 2012 39,347.				v
	<u> </u>			

MORPHIS FAMILY FOUNDATION, INC.

C/O ROCK A. MORPHIS 20-8103092 Page 10 Form 990-PF (2012) Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2012, enter the date of the ruling 4942(j)(5) b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or Prior 3 years Tax year 2 a Enter the lesser of the adjusted net (a) 2012 (b) 2011 (c) 2010 (d) 2009 (e) Total income from Part I or the minimum investment return from Part X for each year listed **b** 85% of line 2a c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets (2) Value of assets qualifying under section 4942(1)(3)(B)(1) b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed c "Support" alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization (4) Gross investment income Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) **Information Regarding Foundation Managers:** a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) ROCK MORPHIS b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. NONE Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here $\triangleright X$ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number or e-mail of the person to whom applications should be addressed: b The form in which applications should be submitted and information and materials they should include: c Any submission deadlines: d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

C/O ROCK A. MORPHIS Part XV | Supplementary Information (continued)

20-8103092

Page 11

Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation status of recipient Purpose of grant or contribution show any relationship to Amount Name and address (home or business) any foundation manager or substantial contributor a Paid during the year FIRST PRESBYTERIAN CHURCH N/A 501(C)(3) GENERAL USE TO SUPPORT 4815 FRANKLIN PIKE PUBLIC CHARITY CHARITABLE MISSION NASHVILLE, TN 37220 20,000. HARDING ACADEMY 501(C)(3) GENERAL USE TO SUPPORT N/A 170 WINDSOR DRIVE PUBLIC CHARITY CHARITABLE MISSION NASHVILLE, TN 37205 10,000. MONTGOMERY BELL ACADEMY N/A 501(C)(3) GENERAL USE TO SUPPORT 4001 W END AVE PUBLIC CHARITY CHARITABLE MISSION NASHVILLE, TN 37205 50,000. UNITED WAY N/A 501(C)(3) GENERAL USE TO SUPPORT 250 VENTURE CIRCLE PUBLIC CHARITY CHARITABLE MISSION NASHVILLE, TN 37228 10,000. Total ▶ 3a 90,000. b Approved for future payment NONE Total 3b

Form 990-PF (2012)

Analysis of Income-Producing Activities

Enter a second conference and sected	Unrelated	business income	L Exclu	ded by section 512, 513, or 514	(a)
Enter gross amounts unless otherwise indicated.		(b)	(C) Exclu-	(d)	(e) Related or exempt
1 Drogram convice revenue:	(a) Business code	Amount	sion	Amount	function income
1 Program service revenue:	Code		+		
a b	- 		+		
C			+		
d	_		+		·
	- 		 		
f			+		
g Fees and contracts from government agencies			 		
2 Membership dues and assessments			+		
3 Interest on savings and temporary cash					
investments			14	11.	
4 Dividends and interest from securities		-	$+\overline{14}$	L -	
5 Net rental income or (loss) from real estate:	Triby, Bo	9 JA 34 1			Winter - Vali
a Debt-financed property	× 1,00 4	e orden & r mad and alternot	V. 411-54-5806-	0.29 (0.20 (
b Not debt-financed property					
6 Net rental income or (loss) from personal	<u> </u>		+		
property					
7 Other investment income	-	• • •	+		
8 Gain or (loss) from sales of assets other			+		
at a second seco			18	5,625.	
9 Net income or (loss) from special events			+ = •	0,020.	
10 Gross profit or (loss) from sales of inventory			- 	·····-	
11 Other revenue:			 		
a]				
b			-		
			-		
d	_				
e	- 		1		
12 Subtotal. Add columns (b), (d), and (e)	27.	0 .	\$25°	18,925.	0.
13 Total. Add line 12, columns (b), (d), and (e)		 		13	18,925.
(See worksheet in line 13 instructions to verify calculations	s.)			_	· · · · · · · · · · · · · · · · · · ·
Part XVI-B. Relationship of Activitie		malichment of E	vomn	+ Purposso	
Relationship of Activitie	is to the Accor	iipiisiiiileiit oi E	xemp	a Purposes	
Line No. Explain below how each activity for which	income is reported in	column (e) of Part XVI-	A contrit	outed importantly to the accor	nplishment of
▼ the foundation's exempt purposes (other t					
					· ·
	*			·-·	<u>.</u>
		*			
	•				
				······································	· · · · · · · · · · · · · · · · · · ·
					
					
		· · · · · · · · · · · · · · · · · · ·			

Form 990-PF		ROCK A. MORPHI			103092 Page 13
Part XVI	II Information R Exempt Organ		o and Transactions a	nd Relationships With Nonc	haritable
	organization directly or ind	rectly engage in any of the follo	owing with any other organizations of the second se	- · ·	Yes No
		lation to a noncharitable exemp		zalions	
(1) Cas		autori to a monomantable exemp	or gamzadon or.		1a(1) X
	her assets				1a(2) X
b Other tr	ransactions:				
(1) Sa	les of assets to a noncharita	able exempt organization			1b(1) X
(2) Pu	rchases of assets from a no	oncharitable exempt organization	on .		1b(2) X
٠,	ntal of facilities, equipment,				1b(3) X
	imbursement arrangements	3			1b(4) X
	ans or loan guarantees				1b(5) X
• •		embership or fundraising solici	- ••		1b(6) X
_		ailing lists, other assets, or paid	· •	and the second of the second o	1c X
				ays show the fair market value of the goo e in any transaction or sharing arrangeme	
column	_ ' ' '	other assets, or services received	ved.		
(a)Line no	(b) Amount involved		table exempt organization	(d) Description of transfers, transactions,	and sharing arrangements
		N/.	A		
		 			
					
					· · · · · · · · · · · · · · · · · · ·
					
ın secti		er than section 501(c)(3)) or in	one or more tax-exempt organiz section 527?	ations described	Yes X No
<u> </u>	(a) Name of or		(b) Type of organization	(c) Description of relati	onship
	N/A	<u> </u>	() ,,,	(0)-1001	
	::			· · · · · · · · · · · · · · · · · · ·	
Sign Here		mplifie Declaration of preparer (other		statements, and to the best of my knowledge ation of which preparer has any knowledge PRESIDENT Title	May the IHS discuss this return with the preparer shown below (see instr.)? X Yes No
	Print/Type preparer's n	<u></u>	r's signature	Date Check if PT	IN
Paid	S.L. PILSO	L	GIÚM	self- employed	200964990
	1 2 - 1 - 1 1 1 1 1	··· /1/	m∵ ∽ l	· / - I	・ししつしせフラリ

(615)377-4600 Form **990-PF** (2012)

Firm's EIN ▶ 62-1199757

Phone no.

Preparer

Use Only

Firm's address ► P.O. BOX 1869

Firm's name LATTIMORE BLACK MORGAN & CAIN, P.C.

BRENTWOOD, TN 37024-1869

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

MORPHIS FAMILY FOUNDATION, INC.

OMB No 1545-0047

Employer identification number

2012

C	/O ROCK A. MORPHIS	20-8103092					
Organization type (check	one):						
Filers of: Section:							
Form 990 or 990-EZ	501(c)() (enter number) organization						
	4947(a)(1) nonexempt chantable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt chantable trust treated as a private foundation	-					
	501(c)(3) taxable private foundation						
	is covered by the General Rule or a Special Rule. c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	le See instructions.					
General Rule							
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in m plete Parts I and II.	oney or property) from any one					
Special Rules							
509(a)(1) and 170	For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.						
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.							
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, chantable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, chantable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, chantable, etc., contributions of \$5,000 or more during the year							
but it must answer "No" o	that is not covered by the General Rule and/or the Special Rules does not file Schedule En Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part et the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization
MORPHIS FAMILY FOUNDATION, INC.
C/O ROCK A. MORPHIS

Employer identification number

20-8103092

Part 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	ROCK A. MORPHIS 709 WESTVIEW AVENUE NASHVILLE, TN 37205	\$ 301,825.	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 Oncash 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	
_		s	Person Payroll Noncash (Complete Part II if there is a noncash contribution)	

Name of organization

MORPHIS FAMILY FOUNDATION, INC.

C/O ROCK A. MORPHIS

Employer identification number

20-8103092

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed				
(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		
		-			
		- - \$			
(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		
		-			
 		-			
	12	_	990 990-F7 or 990-PF) (20		

Schedule B (Form 990, 990-EZ, or 990-PF) (2012) Name of organization **Employer identification number** MORPHIS FAMILY FOUNDATION, INC. C/O ROCK A. MORPHIS 20-8103092 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) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (c) Use of gift (b) Purpose of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee	

Capital Gains and Losses for Tax on Investment Income Part IV (b) How acquired P - Purchase D - Donation (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (d) Date sold 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo., day, yr.) (mo., day, yr.) 1a 100 SHS. AIR PRODUCTS & CHEMICALS P 01/09/1209/27/12 300 SHS. GRACO INCORPORATED P 01/09/1203/15/12 c 100 SHS. ILLINOIS TOOL WKS INCORPORATED P 01/09/1209/17/12 d 400 SHS. ISHARES TR CORE S&P500 ETF 09/20/1212/04/12 P SHS. e 200 ISHARES TR CORE S&P500 ETF P 09/27/1212/04/12 1 300 SHS. RAYTHEON COMPANY COM NEW $\overline{\mathtt{P}}$ 01/09/1211/28/12 g 300 SHS. SCOTTS MIRACLE GRO COMPANY P 07/06/1106/27/12 SHS. TORO COMPANY 07/06/1103/27/12 h 200 P 1 200 SHS. WALGREEN COMPANY P 01/09/1203/08/12 100 SHS. LINCOLN NATL CORPORATION IND P 10/27/1111/01/12 200 SHS. RAYTHEON COMPANY COM NEW P 04/20/1111/28/12 100 SHS. AIR PRODUCTS & CHEMICALS 04/29/0909/27/12 m 100 FLOWSERVE CORPORATION 05/13/1008/16/12 SHS. P n 300 SHS. GRACO INCORPORATED 06/04/1003/15/12 P o 300 SHS. GRANITE CONSTR INCORPORATED 10/07/08/09/20/12 P (g) Cost or other basis (f) Depreciation allowed (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) -363. 8,261. 8,624. а 15,600. 12,000. 3,600. b 6,115. 4,785. 1,330. С 56,775. 58,188. -1,413. d 28,388. 28,875. -487.е 14,448. 16,637. 2,189. 11,938. 15,150. -3,212.g 14,302. 12,312. 1,990. h 6,542. 6.648. -106. 2,549. 2,158. 391. 11,091 9,716. 1,375. k 8,261 1,793. 6,468. 1 12,971. 11,328. 1,643. m 6,198. 15,600. 9,402. n 8,835. 8,811. 24. 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) (i) F.M.V. as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (1), if any -363. а 3,600. b 1,330. -1,413. d -487.е f 2,189. -3,212.g 1,990. h -106. 391. 1,375. k 1,793. 1 1,643. m 6,198. n 24. 0 { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } 2 Capital gain net income or (net capital loss) 2 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8

Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (d) Date sold (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo., day, yr.) (mo., day, yr.) SHS. ITT EDUCATIONAL SERVICES 10/01/1002/08/12 1a 200 \overline{P} b 400 SHS. ILLINOIS TOOL WKS INCORPORATED P 06/14/0709/17/12 SHS. LINCOLN NATL CORPORATION IND P 300 07/13/07|01/11/12 d 100 SHS. PRAXAIR INCORPORATED P 04/29/09|01/18/12 e 100 SHS. PRAXAIR INCORPORATED P 03/17/1003/02/12 SHS. VULCAN MATLS COMPANY P 300 02/11/08|09/10/12 g 200 SHS. WALGREEN COMPANY 11/03/0903/08/12 P 200 SHS. SCOTTS MIRACLE GRO COMPANY 01/09/1206/27/12 P 200 SHS. TORO COMPANY $\overline{\mathtt{P}}$ 01/09/1203/27/12 100 SHS. AIR PRODUCTS & CHEMICALS P 03/17/1009/27/12 100 SHS. FLOWSERVE CORPORATION P 08/25/1008/16/12 200 SHS. GRANITE CONSTR INCOROPRATED P 11/19/1009/20/12 300 SHS. LINCOLN NATL CORPORATION IND P 12/02/0911/01/12 n 200 WALGREEN COMPANY 04/13/1003/08/12 SHS. P COMPANY 11/19/1003/08/12 SHS. WALGREEN \overline{P} o 100 (g) Cost or other basis (h) Gain or (loss) (f) Depreciation allowed (e) Gross sales price (e) plus (f) minus (g) (or allowable) plus expense of sale 14,055. 13,453. 602. 24,460. 22,380. 2,080. b 7,647. 21,220. -13,573.C 7,216.d 10,950. 3,734. 11,000. 8,171. 2,829. е <u>20,971.</u> 12,486. -8,485.7,910. 6,542. -1,368.g 7,959 9,558. -1,599.h 14,302. 12,660. 1,642. 8,261. 7,607. 654. 12,971. 8,885. 4,086. k 5,890. 5,251. ١ 639. 7,647. 7,094. 553. m 6,542. 7,495. -953. n 3,271. 3,439. -168. 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h))
Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (ı) (i) F.M.V. as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (1), if any 602. a 2,080. b -13,573. C 3,734. d 2,829. е f -8,485.-1,368.g -1,599.h 1,642. 654. 4,086. k 639. 553. m -953. n -168. 0 { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } 2 Capital gain net income or (net capital loss) 5,625. 2 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8 N/A

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CASI	H INVESTMENTS	STATEMENT 1
SOURCE				AMOUNT
RAYMOND JAMES				11.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A		11.
FORM 990-PF DIVIDEND	S AND INTER	EST FROM SI	ECURITIES	STATEMENT 2
SOURCE	GROSS	AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
RAYMOND JAMES		13,289.	0.	13,289.
TOTAL TO FM 990-PF, PART I, I	N 4	13,289.	0.	13,289.
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM		
TAX PREPARATION FEES	1,825.		0.	0.
TO FORM 990-PF, PG 1, LN 16B	1,825.		0.	0.
FORM 990-PF C	THER PROFES	SIONAL FEES	S	STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM		
INVESTMENT MANAGEMENT FEES	7,369.	7,36	59.	0.
TO FORM 990-PF, PG 1, LN 16C	7,369.	7,36	59.	0.

FORM 990-PF	TAXES		STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM		
FOREIGN TAXES ON DIVIDENDS	29.	29.		0.	
TO FORM 990-PF, PG 1, LN 18	29.	29.	-	0.	
FORM 990-PF	CORPORAT	E STOCK	· · · · · · · · · · · · · · · · · · ·	STATEMENT 6	
DESCRIPTION		во	OK VALUE	FAIR MARKET VALUE	
RAYMOND JAMES - SECURITIES			501,065.	520,139.	
TOTAL TO FORM 990-PF, PART I	T.TNTP 10P		501,065.	520,139.	