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Form **990-PF** Department of the Treasury Internal Revenue Service

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

Do not enter Social Security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its separate instructions is at www irs gov/form990pf

For	calei	ndar year 2013 or tax year beginning	· · · · · · ·	, and ending		
Na	ne of	foundation			A Employer identificatio	n number
_		SE CHARITABLE FOUNDATION	<del>`</del>	· · · · · · · · · · · · · · · · · · ·	45-3630825	5
		and street (or P O box number if mail is not delivered to street $0$ BRUSH STREET, SUITE $4$	•	Room/suite	B Telephone number 313-961-05	500
	_	own, state or province, country, and ZIP or foreign		<del>_</del>	C If exemption application is	
		ROIT, MI 48226			Trexemption application is	pending, check here
G	heck	all that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organization	s, check here
		Final return	Amended return		2 Foreign organizations m	noting the 85% test
		Address change	Name change		Foreign organizations me check here and attach co	omputation
H (	_	type of organization: X Section 501(c)(3) e			E If private foundation sta	
<u> </u>		ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda		under section 507(b)(1	)(A), check here
		'	ting method: X Cash other (specify)	Accrual	F If the foundation is in a	
	<i>0111 1</i> ∙\$	Part II, col. (c), line 16) [Part I, col. (Part I, col.	umn (d) must be on cash i	basis )	under section 507(b)(1	)(b), check here
<u> </u>	rt I		(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
٠.,		Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	3,373.	1	N/A	\
	2	Check X If the foundation is not required to attach Sch. B				-
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	9,934.	9,934.		STATEMENT 1
		Gross rents	· · · · · · · · · · · · · · · · · · ·	Tangada 4-4-a		
		Net rental income or (loss)	247 402		REC	I-IV-D
ne	_	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 357,987.	347,493.			<del>                                     </del>
Revenue	b	assets on line 6a  Capital gain net income (from Part IV, line 2)		347,493.	<u>  ਬ੍ਰੀ ਅਹੁਪ</u>	<del>1 7/ 201¢   Q∥ −</del>
Re	7 8	Net short-term capital gain		347,433.		()
	9	Income modifications		-	OGE	
	-	Gross sales less returns and allowances	i A			
	Ι.	Less Cost of goods sold		•		,
	С	Gross profit or (loss)				,
	11	Other income	-5,714.	-5,545.		STATEMENT 2
	12	Total. Add lines 1 through 11	355,086.	351,882.		, ,
	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
	14 15	Other employee salaries and wages Pension plans, employee benefits				
ses		Legal fees				
		Accounting fees STMT 3	4,350.	2;175.		2,175.
ΕXD		Other professional fees				
Ş.	17	Interest				
trat	18	Taxes STMT 4	4,324.	877.		0.
nis	19	Depreciation and depletion		·		
Ę	20	Occupancy				
Αp	21	Travel, conferences, and meetings			<del> </del>	
a an	22 23	Printing and publications Other expenses STMT 5	47,164.	4,164.		0.
ţi	24	Total operating and administrative	7,104.	4,104.	<u> </u>	· · · · · ·
Operating and Administrative Expen		expenses. Add lines 13 through 23	12,838.	7,216.		2,175.
ŏ	25	Contributions, gifts, grants paid	308,585.			308,585.
		Total expenses and disbursements.				
		Add lines 24 and 25	321,423.	7,216.		310,760.
		Subtract line 26 from line 12:	, , , , , , ,			
		Excess of revenue over expenses and disbursements	33,663.	244 666	-	,
		Net investment income (if negative, enter -0-)	,	344,666.	N/A	
	C	Adjusted net income (if negative, enter -0-)	1 ' 1	1	I IN/W	

_		Balance Sheets   Attached schedules and amounts in the description column should be found of more amounts only	Beginning of year	End of	f year
LP	art	Balance Sneets column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
_	1	Cash - non-interest-bearing			
		Savings and temporary cash investments	1,193,339.	-2,957.	-2,957.
	3	Accounts receivable ► 10,000.			
	_	Less allowance for doubtful accounts		10,000.	10,000.
	4	Pledges receivable			
	1	Less; allowance for doubtful accounts			•
	5	Grants receivable	<del></del>	-	
	6	Receivables due from officers, directors, trustees, and other	· · ·		<del></del>
	ľ	disqualified persons			
	7				
		Less; allowance for doubtful accounts			-
ιo.	8	Inventories for sale or use			
Assets	l	Prepaid expenses and deferred charges			
Ass		Investments - U.S. and state government obligations	<del></del>		· · · · · · · · · · · · · · · · · · ·
	ı	Investments - corporate stock STMT 6	2,114.	1,013,371.	3,157,905.
	1	Investments - corporate bonds	2,111	1,013,371	3,137,3034
	1	·		<del></del>	<u> </u>
	l''	Investments - land, buildings, and equipment basis			
	1,2	Less accumulated depreciation Investments - mortgage loans			<u>.</u>
	13	amen 7	0.	204,286.	204,286.
	ı	Land, buildings, and equipment basis		204,200.	204,2001
	'*				
	1.	Less accumulated depreciation  Other assets (describe STATEMENT 8)	0.	553.	553.
		Total assets (to be completed by all filers - see the		333.	
	۱"	instructions. Also, see page 1, item 1)	1,195,453.	1,225,253.	3,369,787.
_	17		1,100,400	1,225,255	3,303,707
	18	Grants payable			•
	19	Deferred revenue			
Liabilities	l	· · · •			
Ē	20	Loans from officers, directors, trustees, and other disqualified persons			
Ľ:	21	Mortgages and other notes payable  Other liabilities (describe ► STATEMENT 9 )	3,863.	0.	
	22	Other haddinges (describe DIAIDMIN 5)	3,003.		•
	22	Total Schillitics (add lines 17 through 99)	3,863.	0.	• •
	23	Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here	3,003.		
		and complete lines 24 through 26 and lines 30 and 31.			
ces	24	Unrestricted			•
Š	25	Temporarily restricted			
Sala	26	the state of the s			•
ğ	20	Foundations that do not follow SFAS 117, check here			* <u>.</u>
μŢ		and complete lines 27 through 31.			
٥	97	Capital stock, trust principal, or current funds	1,240,313.	1,591,179.	
ets	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
ASS	29	Retained earnings, accumulated income, endowment, or other funds	-48,723.	-365,926.	•
Net Assets or Fund Baland	30	Total net assets or fund balances	1,191,590.	1,225,253.	
z	30	rotal net assets of fully balances		1,223,233.	
	21	Total liabilities and net assets/fund balances	1,195,453.	1,225,253.	
_			·	2,220,2001	
P	art	Analysis of Changes in Net Assets or Fund B	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		st agree with end-of-year figure reported on prior year's return)			1,191,590.
	•	r amount from Part I, line 27a		2	1,191,590.
		r increases not included in line 2 (itemize)	•	3	0.
		lines 1, 2, and 3	<del>.</del>	4	1,225,253.
		eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	1,225,253.
<u> </u>		, , , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·		Form <b>990-PF</b> (2013)

Page	:

Part IV Capital Gains a	and Losses for Tax on I	Investment	Income					
	the the kind(s) of property sold (e rehouse, or common stock, 200 sl		·	` P - F	w acquired Purchase Donation	(c) Date a (mo , da		(d) Date sold (mo , day, yr )
1a COMERICA BANK -	- ICIA - PUBLIC	LY TRADE	ED			,		
b SECURITIES				ļ	. D			
	– GARDNER – PUB	LICLY TE	RADED	<u> </u>				
d SECURITIES					P			
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis kpense of sale				ın or (loss (f) mınus (	
a								
b 349,373.			2,22	3.				347,150.
0.614			8,27	1				343.
d 8,614.		-	0,21	1.				243.
Complete only for assets showin	g gain in column (h) and owned by	L	оп 12/31/69		····	(I) Gains (Co	ol (h) gain	minus
	(j) Adjusted basis		cess of col (I)			òl´ (k), buṫ n		1 -0-) or
(i) F.M V as of 12/31/69	as of 12/31/69	overe	col (j), if any			LU5562 (		···))
a b							<u> </u>	347,150.
C								
d								343.
е	1,1	_]						
Capital gain net income or (net ca     Net short-term capital gain or (los	pital loss) { If (loss), enter- is) as defined in sections 1222(5) is	er in Part I, line 7 -0- in Part I, line 1 and (6)		}	2			347,493.
If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8	column (c)			<b> </b>	3		N/A	
Part V Qualification U	nder Section 4940(e) for	r Reduced	Tax on Net	Inve	stment Ir	come		
(For optional use by domestic private	foundations subject to the section	n 4940(a) tax on	net investment ir	rcome )				
If section 4940(d)(2) applies, leave th	nis part blank							
Was the foundation liable for the sect	tion 4042 tay on the distributable a	amount of any ve	ar in the hace ne	nod2				Yes X No
if "Yes," the foundation does not qual			-	iiou:				103 (25) 100
	each column for each year, see the			entries				
(a)  Base period years  Calendar year (or tax year beginnii	ng in) Adjusted qualifying d	Istributions	Net value of no			1 3	Distrit col (b) div	(d) oution ratio ided by col (c))
2012	1	92,009.		1,	768,66			.108561
2011		0.			88,23	9.	_	.000000
2010								
2009								
2008				_				
2 Total of line 1, column (d)						2	_	.108561
3 Average distribution ratio for the	5-year base period - divide the tota	il on line 2 by 5,	or by the number	r of year	S			054001
the foundation has been in exister	nce if less than 5 years					3		.054281
4 Enter the net value of noncharitab	ole-use assets for 2013 from Part )	K, line 5				4		2,635,407.
5 Multiply line 4 by line 3						5		143,053.
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)					6		3,447.
7 Add lines 5 and 6						7		146,500.
8 Enter qualifying distributions from If line 8 is equal to or greater than See the Part VI instructions	n Part XII, line 4	 ne <b>1b, and</b> comp		ng a 1%	tax rate	8		310,760.
- Goe the Latt At mottaching		•						000 DE (0040)

Part VII   Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(c), or 4948 - see instructions)	Form 990-PF (2013) MORSE CHARITABLE FOUNDATION,			<u>45-363</u>			Page 4
Date of ruling or determination latter:  (attach copy of letter if necessary-see instructions) b Domestic bondations that meet the section 4940(e) requirements in Part V, check here    (b) Earl, Line 270  2 Tax under section 511 (demestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  2 Tax under section 511 (demestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  3 Add lines 1 and 2  5 Subtite A (mocrae) tax (demestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  5 Tax based on investment income. Subvact time 4 from time 3. It zero or less, enter -0-  5 Tax based on investment income. Subvact time 4 from time 3. It zero or less, enter -0-  5 Tax based on investment income. Subvact time 4 from time 3. It zero or less, enter -0-  5 Tax based on investment income. Subvact time 4 from time 3. It zero or less, enter -0-  6 Tax paid with application for extension of time to file (Form 8668)  6 Exempt foreign organizations: tax withheld at source  6 Tax paid with application for extension of time to file (Form 8668)  6 Exempt foreign organizations: tax withheld at source  6 Tax paid with application for extension of time to file (Form 8668)  7 Total credits and payments. Add lines 5a and 5s more than the 10s life (Form 8668)  8 Tax due. If the total of lines 5 and 8s is more than the 10s in 10s or 10s				948 - see	instru	ictio	ns)
Date of ruling or determination latter:  (attach copy of letter if necessary-see instructions) b Domestic bondations that meet the section 4940(e) requirements in Part V, check here    (b) Earl, Line 270  2 Tax under section 511 (demestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  2 Tax under section 511 (demestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  3 Add lines 1 and 2  5 Subtite A (mocrae) tax (demestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  5 Tax based on investment income. Subvact time 4 from time 3. It zero or less, enter -0-  5 Tax based on investment income. Subvact time 4 from time 3. It zero or less, enter -0-  5 Tax based on investment income. Subvact time 4 from time 3. It zero or less, enter -0-  5 Tax based on investment income. Subvact time 4 from time 3. It zero or less, enter -0-  6 Tax paid with application for extension of time to file (Form 8668)  6 Exempt foreign organizations: tax withheld at source  6 Tax paid with application for extension of time to file (Form 8668)  6 Exempt foreign organizations: tax withheld at source  6 Tax paid with application for extension of time to file (Form 8668)  7 Total credits and payments. Add lines 5a and 5s more than the 10s life (Form 8668)  8 Tax due. If the total of lines 5 and 8s is more than the 10s in 10s or 10s	1a Exempt operating foundations described in section 4940(d)(2), check here and e	nter "N/A" on lin	e 1.	1			
of Part I, line 27b  at All other domestic foundations enter 27k of line 27b. Exempt foreign organizations enter 4% of Part I, limin 12, col. (b).  2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  3 Add fines 1 and 2  5 Subtrite A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  5 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 9. It zero or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 9. It zero or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 9. It zero or less, enter -0-  6 Exempt foreign organizations -1 tax withheld at source  6 Tax paid with application for extension of time to file (Form 8868)  6 Backup withholding erroneously withheld  7 Total credits and psyments. Add lines 6s through 6d  8 Einter any penalty for indindrpayment or estimated tax. Provided to 2014 settle for 10 overpayment. If line 7 is more than the total or lines 5 and 8, enter the annound overpaid  10 overpayment. If line 7 is more than the total or lines 5 and 8, enter the annound overpaid  10 overpayment. If line 7 is more than the total or lines 5 and 8, enter the annound overpaid  10 overpayment. If line 7 is more than the total or lines 5 and 8, enter the annound overpaid  10 overpayment. If line 7 is more than the total or lines 5 and 8, enter the annound overpaid  10 overpayment. If line 7 is more than the total or lines 5 and 8, enter the annound overpaid  10 overpayment. If line 7 is more than the total or lines 5 and 8, enter the annound overpaid  10 overpayment. If line 7 is more than the total or lines 5 and 8, enter the annound overpaid  10 overpayment. If line 7 is more than the total or lines 5 and 8, enter the annound overpaid  10 overpayment. If line 7 is more than the total or lines 5 and 8, enter than 10 in lines 6 annound overpaid  11 overpayment.					,		_
of Part I, line 27b  • All other domestic foundations enter 2% of line 27b, Exempt foreign organizations enter 4% of Part I, line 12, col. (b).  2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  3 Add lines 1 and 2  5 Subtrite A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  5 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter -0-  5 Tex based on investment income. Subtract line 4 from line 3. It zero or less, enter -0-  5 Tex based on investment income. Subtract line 4 from line 3. It zero or less, enter -0-  5 Tex based on investment income. Subtract line 4 from line 3. It zero or less, enter -0-  5 Tex based on investment income. Subtract line 4 from line 3. It zero or less, enter -0-  5 Tex based on investment income. Subtract line 4 from line 3. It zero or less, enter -0-  6 Exempt foreign organizations: *Law Withheld at source  7 Total credits and payments. Add Innes 6s through 6 Exempt foreign during the source organization organizat	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	<b>X</b> and ent	er 1%	1		3,4	47.
e. All other domestic foundations enter 2% of fine 27b. Serent foreign organizators enter 4% of Part I, line 12, col. (b).  2			i I			•	
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2 3 3,447.  Add lines 1 and 2 3 3,447.  Subtitle A (microme) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on linestiment income. Subtract line 4 from line 3. It zero or less, enter -0- 5 Tax based on linestiment income. Subtract line 4 from line 3. It zero or less, enter -0- 5 Tax based on linestiment income. Subtract line 4 from line 3. It zero or less, enter -0- 5 Tax based on linestiment income. Subtract line 4 from line 3. It zero or less, enter -0- 6 B Credits/Paymants: 2 2013 estimated tax payments. Add lines 6 at brough 6 d Backup withhold at source 6 B Backup withhold and payments. Add lines 6a through 6d 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for indepayment of estimated tax. Check here [X] if form 2220 is attached 9 Tax due, If the total of lines 5 and 8 is more than line 7, enter amount every line 10 overpayment. If line 7 is more than the total or lines 5 and 8, enter the amount everyal 10 overpayment. If line 7 is more than the total or lines 5 and 8, enter the amount everyal 10 overpayment of line 10 to live. Toeffeld to 2014 destinated tax ≥ 553. Refunded ≥ 11 0.  Part VIII-A Statements Regarding Activities 10 overpayment. If line 7 is more than the total or lines 5 and 8, enter the amount everyal 10 overpayment of line 10 to live. Toeffeld to 2014 destinated tax ≥ 553. Refunded ≥ 11 0.  Part VIII-A Statements Regarding Activities 10 burling that wayer, did the boundation attempt to influence any nethonal, slate, or local legislation or did at participate or interviene in any political campaign?  b Did it spend more than \$100 during the year (either directly) or indepated purposes (see instructions for the definition)?  If the answer is "Yes" to 7 <sub>0</sub> or 1 <sub>0</sub> is attach a defended description of the activities.  C bid the foundation life form 1120-POL for this year?  If Yes, * attach the admitted descri	•	6 of Part I, line 1	2, col. (b).	' l			-
3 3, 447.  Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-  6 Credist/Payments.  2 2013 estimated tax payments and 2012 overpayment credited to 2013  8 Exempt foreign organizations - tax withheld at source  1 Tax pad with applicant for extension of time to life (form 8868)  8 Eactup withholding erroneously withheld  7 Total credits and payments. Add lines 5a through 8d  8 Enter any penalty for inderpayment of estimated tax. Check here □X   if form 2220 is attached  8   Tax dae. If this total of lines 5 and 8 is more than line 7, enter amount own  9 Tax due. If this total of lines 5 and 8 is more than line 7, enter amount own  10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  10 S53. Refunded □ 10 to 553. In elunded □ 10 to 553. In elund	•		, , , <sub>-</sub>	2		•	Õ.
4 Substite A (necome) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter-0-) 5 Tax based on investment income. Subract line 4 from line 3. It zero or less, enter 0-6 5 Tax based on investment income. Subract line 4 from line 3. It zero or less, enter 0-6 5 Tax based on investment income. Subract line 4 from line 3. It zero or less, enter 0-6 5 Tax based on investment income. Subract line 4 from line 3. It zero or less, enter 0-7 5 Tax based on line and subract line 4 from line 5. It zero or less, enter 0-7 6 Tax based on line and subract line 4 from line 5. It zero or less, enter 0-7 6 Tax based on line and subract line 4 from line 5. It zero or less, enter 0-7 6 Total credits and payments. Add lines 6a through 64 6 Enter any penalty for inderpayment of estimated tax. Check here □ I if zero 220 is attached 8 Enter any penalty for inderpayment of estimated tax. Check here □ I if zero 220 is attached 9 Tax due, If the total of lines 5 and 8, enter the amount owed 9 Tax due, If the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Dental the subract of line 10 be 10 certified to 2014 sets destinated tax. Payment of the subract line 10 be 10 certified to 2014 sets lines to 10 certified to 2014 sets lines to 10 certified to 2015 sets lines 11 certified to 10 certified to 2015 sets lines 11 certified to 10 certified to 2015 sets lines 11 certified to 10 certified to 2014 sets lines 11 certified to 10 certified to 2015 sets lines 11 certified to 10 certified to 2015 sets lines 11 certified to 10 certified to 2015 sets lines 11 certified to 10 certified to 2014 sets lines 11 certified to 10 certified to 2015 sets lines 11 certified to 10 certified to 2015 sets lines 11 certified to 10 certified to 10 certified to 2015 sets lines 11 certified to 2015 sets lines 11 certified to 2015 sets lines 11 certif	• • • • • • • • • • • • • • • • • • • •	,	İ	3		3,4	<del>47.</del>
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-  6 Credits/Payments:  a 2013 estimated tax payments and 2012 overpayment credited to 2013  6 Exempt foreign organizations - tax withheld at source  7 Tax paid with application for extension of time to file (Form 8888)  6 Backup withholding erroneously withheld  7 Total credits and payments. Add lines 6a through 6d  7 Total credits and payments. Add lines 6a through 6d  7 Total credits and payments. Add lines 6a through 6d  7 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  7 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  8 Enter the amount of line 10 to be; Credited to 2014 estimated tax. ♦  9 Tax VIII-A Statements Regarding Activities  10 Overpayment. It line 7 is more than the total of lines 5 and 8, enter the amount overpaid  10 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  10 Overpayment. It line 7 is more than the total of lines 5 and 8, enter the amount overpaid  10 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  11 Enter the amount of line 10 to be; Credited to 2014 estimated tax. ♦  12 Fart VIII-A Statements Regarding Activities  13 Tax VIII-A Statements Regarding Activities  14 Dold it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?  15 If the answer is 'Yes' to 7g or 7g, attached a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.  16 Did the foundation file form 1120-POL for the year?  17 On the foundation file form 1120-POL for the year?  18 Enter the reimbursement (if any) tax on political expenditures (section 4955) imposed during the year?  19 Tax State of the statement required by General Instruction Tox on the path of the activities.  19 Tax Statement Register of the activities.  10 Tax Statement Register o	• • •	others enter -0-)	İ				0.
6 Credits/Payments:  a 2013 estimated tax payments and 2012 overpayment credited to 2013  b Exempt foreign organizations - tax withheld at source  of ax paid with application for extension of time to file (Form 8868)  d Backup withfoling errorinously withheld  7 Total credits and payments. Add lines 6a through 6d  8 Enter any penalty for inderpayment of estimated tax. Check here		, ,				3.4	47.
a 2013 astumated tax payments and 2012 overpayment credited to 2013 b Exempt foreign organizations - Tax withheld at source c Tax paid with application for extension of time to tile (Form 8868) d Backup withholding erroneously withheld d Total credits and payments. Add lines Sa through 6d Enter any penalty for underpayment of estimated tax. Check here		•					<del></del> ,
b Exempt foreign organizations - lax withheld at source  1 Tax pad with application for extension of time to file (Form 8888)  8		6a	4.000	;		•	
C Tax paid with application for extension of time to file (Form 8868)  6 Backup withholding erroneously withheld  7 Total credits and payments. Add lines 6s aftorugh 6d  8 Enter any penalty for underpayment of estimated tax. Check here ☑ If Form 2220 is attached  9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owed  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 2014 estimated tax ▶ 553. Refunded ▼ 11 0.  Part VII-6 Statements Regarding Activities  12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did if participate or intervene in any political campagin?  12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did if participate or intervene in any political campagin?  13 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did if participate or intervene in any political campagin?  14 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did if participate or intervene in any political campaging.  15 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did if participate or intervene in any political campaging.  15 During the tax year of the activities.  16 Did the oundation file Form 1120-POL for this year?  17 Cold the foundation and any political purposes (see instructions for the definition)?  18 During the tax year, and the description of the activities.  19 During the tax year, and the foundation file form the political expenditure tax imposed on foundation managers. ▼ 0.  20 Cold to foundation and any political purposes of any materials published or distributed by the foundation networks of the activities.  21 During the found	• • • • • • • • • • • • • • • • • • • •			. 1			
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b If "Yes," has it filed a tax return on Form 990-T for this year?  5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?  6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:  • By language in the governing instrument, or  • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?  7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV  7 X  8a Enter the states to which the foundation reports or with which it is registered (see instructions)  FL, MI  b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)  of each state as required by General Instruction G? If "No," attach explanation  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 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV  9 X  10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses  10 X	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	ies			3		
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N/A

Yes X No

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

Form 4720, to determine if the foundation had excess business holdings in 2013.)

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 2013?

b If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

Form **990-PF** (2013)

3b 4a

during the year?

orm 990-PF (2013) MORSE CHARITABLE FOUNDAT			45-36308	25	Page 6
Part VII-B   Statements Regarding Activities for Which	Form 4720 May Be	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:					I
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	es X No		1.
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indi	rectly,		, .	
any voter registration drive?			es X No .		1
(3) Provide a grant to an individual for travel, study, or other similar purposes	37	Y	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization			- 1.		-
509(a)(1), (2), or (3), or section 4940(d)(2)?		Y	es X No	<b>"</b>   ^	
(5) Provide for any purpose other than religious, charitable, scientific, literary	or educational purposes, or		];		1
the prevention of cruelty to children or animals?	, or outcomer purposes, or		es X No .		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described			1.	
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h		•	<b>▶</b> □		<del> </del>
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		sined	· -	'	٠
expenditure responsibility for the grant?		_ /	es 🔲 No		
		.,		·  -	
If "Yes," attach the statement required by Regulations section 53 494			İ		1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		es X No		1
a personal benefit contract?	arnonal honofit contract?	۱۱ لـــا .		. " 66	x
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			00	<del>  ^</del> -
If "Yes" to 6b, file Form 8870.	. h . lh h		es X No		<b>′</b> .
7a At any time during the tax year, was the foundation a party to a prohibited tax s		10			┼
b If "Yes," did the foundation receive any proceeds or have any net income attrib				7b	Ь
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	anagers, Higni	y		
1 List all officers, directors, trustees, foundation managers and their	acompanyation				
1 List all officers, directors, a distees, foundation finanagers and their		(c) Compensation	(d) Contributions to	(a) Ev	nense
(a) Name and address —	(b) Title, and average hours per week devoted to position	(If not paid, _ enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	account allowa	pense t, other_ ances
PETER C. MORSE	PRESIDENT & I	DIRECTOR			
2000 BRUSH STREET, SUITE 440					
DETROIT, MI 48226-2251	0.25	0.	0.		0.
MARTHA F. MORSE	VICE PRESIDEN	T & DIREC	TOR		
2000 BRUSH STREET, SUITE 440					
DETROIT, MI 48226-2251	0.25	0.	0.		0.
DAVID M. HEMPSTEAD	SECRETARY & I	IRECTOR			
1901 ST. ANTOINE STREET, 6TH FLOOR					
DETROIT, MI 48226	0.25	0.	0.		0.
RODNEY P. WOOD	TREASURER				
2000 BRUSH STREET, SUITE 440					
DETROIT, MI 48226-2251	0.50	0.	0.		0.
2 Compensation of five highest-paid employees (other than those inc					
	(b) Title and average		(d) Contributions to employee benefit plans and deferred	(e) Exp	pense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred	account allowa	
NONE	develor to position	<del> </del>	compensation	2	
HONE					
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	4				
	L	1	<del></del>	L	0
Total number of other employees paid over \$50,000	·	····	Form	000 DE	
			Form	990-PF	(2013)

Part VIII   Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (contrued)  3 Five highest-paid independent contractors for professional services. If none, enter "NONE."  (a) Name and address of each person paid more than \$50,000 (b) Type of service  (c) Compensation  NONE    Compensation   Co	Form 990-PF (2013) MORSE CHARITABLE FOUNDATION, INC.	45-3	630825	Page 7
(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   Total number of others receiving over \$50,000 for professional services   Total number of others receiving over \$50,000 for professional services   Total number of organizations and other beneficiaries served, conferences convened, research pagers produced, etc.   Expenses	Part VIII Information About Officers, Directors, Trustees, Foundation Managers, High Paid Employees, and Contractors (continued)	ly		
NONE  Total number of others receiving over \$50,000 for professional services  ▶ 0  Part IX-A   Summary of Direct Charitable Activities  List the foundation is four largest direct charitable activities    N/A	3 Five highest-paid independent contractors for professional services. If none, enter "NONE."			<del></del>
Total number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organization's and other beneficiaries served, conferences converred, research papers produced, etc.    N/A		rvice	(c) Com	pensation
Part IX-A   Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.  N/A  Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount  N/A  All other program-related investments. See instructions.  All other program-related investments. See instructions.	NONE			
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All other program-related investments. See instructions.  Second			Amount	
All other program-related investments. See instructions.  Total. Add lines 1 through 3	1 N/A			
All other program-related investments. See instructions.  Total. Add lines 1 through 3				
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Total. Add lines 1 through 3 • 0 •	2			
Total. Add lines 1 through 3 • 0 •				
Total. Add lines 1 through 3				
Total. Add lines 1 through 3	All other program-related investments. See instructions.			
	3			
	Total Add lines 1 through 3	<del></del>	. ———	Ο.
			Form <b>990-F</b>	

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndation	s, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	•	<del> </del>
a	Average monthly fair market value of securities	1a	1,946,617.
Ь	Average of monthly cash balances	1b	1,946,617. 728,923.
C	Fair market value of all other assets	1c	
đ	Total (add lines 1a, b, and c)	1d	2,675,540.
е	Reduction claimed for blockage or other factors reported on lines 1a and	, "	
	1c (attach detailed explanation)   1e   0 •	7	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	2,675,540.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	40,133.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,635,407.
6	Minimum investment return. Enter 5% of line 5	6	131,770.
P	art XI   Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	d certair	1
	foreign organizations check here   and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	131,770.
2a	Tax on investment income for 2013 from Part VI, line 5 2a 3, 447.	( ', '	
b	Income tax for 2013. (This does not include the tax from Part VI )	· '	
C	Add lines 2a and 2b	2c	3,447.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	128,323.
4	Recoveries of amounts treated as qualifying distributions .	4	0.
5	Add lines 3 and 4	5	128,323.
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	128,323.
P	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	310,760.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
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	310,760.
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	3,447. 307,313.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	307,313.
	Note. The amount on line 6 will be used in Part V. column (h), in subsequent years when calculating whether the foundation of	malifies :	for the section

Form **990-PF** (2013)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI,	,			
line 7				128,323.
2 Undistributed income, if any, as of the end of 2013			<del></del>	
a Enter amount for 2012 only			0.	-
<b>b</b> Total for prior years:				
		0.		,
3 Excess distributions carryover, if any, to 2013:				
a From 2008				
<b>b</b> From 2009				
c From 2010	•			
dFrom 2011				
eFrom 2012 106,890.	106.000			
f Total of lines 3a through e	106,890.	<del></del>	<del> </del>	
4 Qualifying distributions for 2013 from	ı.			
Part XII, line 4: ►\$ 310,760.		•	0	,
a Applied to 2012, but not more than line 2a	-	·	0.	·
b Applied to undistributed income of prior	1	0.		-
years (Election required - see instructions)	<del> </del>			<del></del>
c Treated as distributions out of corpus	0.	1		
(Election required - see instructions)  d Applied to 2013 distributable amount	0.			128,323.
e Remaining amount distributed out of corpus	182,437.			120,525.
5 Excess distributions carryover applied to 2013	0.			0
(If an amount appears in column (d), the same amount			11	
must be shown in column (a) )  6 Enter the net total of each column as			_	
indicated below:		·	. "	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	289,327.			
b Prior years' undistributed income. Subtract				-
line 4b from line 2b		0.		- <u>-</u> .
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	' <u>'</u>			· -
assessed	<u> </u>	0.		
d Subtract line 6c from line 6b. Taxable			,	-
amount - see instructions		0.	· · · · · · · · · · · · · · · · · · ·	<u> </u>
e Undistributed income for 2012. Subtract line	عر د	Í		,
4a from line 2a. Taxable amount - see instr.		·	0.	
f Undistributed income for 2013. Subtract			٠.	
lines 4d and 5 from line 1. This amount must be distributed in 2014	-			0.
7 Amounts treated as distributions out of		,		0.
corpus to satisfy requirements imposed by	ļ		m.	
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2008				
not applied on line 5 or line 7	0.		,	
9 Excess distributions carryover to 2014.			<del></del>	<del></del>
Subtract lines 7 and 8 from line 6a	289,327.			-
10 Analysis of line 9;				
a Excess from 2009				
b Excess from 2010		•		
c Excess from 2011	<i>j.</i>			
d Excess from 2012 106,890.	1	-		
e Excess from 2013 182,437.	r			<u> </u>
				Form 000 DE (0010)

Part XIV   Private Operating F	HARITABLE F		A. auestion 9)	N/A	30825 Page 10
1 a If the foundation has received a ruling o	<del></del>		7,4,4200	24/12	
foundation, and the ruling is effective fo					
b Check box to indicate whether the found	•	-	n section	4942(j)(3) or 49	342(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	ig loundation described in	Prior 3 years	10 12(j)(0) 011	12(1)(0)
income from Part I or the minimum	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
investment return from Part X for	(-)	(-/	····	<del>                                     </del>	· · · · · · · · · · · · · · · · · · ·
each year listed					
b 85% of line 2a				<del></del>	
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not				<del>                                     </del>	<del></del>
	1	1			
used directly for active conduct of					
exempt activities e Qualifying distributions made directly				<del>                                     </del>	
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon:					
a "Assets" alternative test - enter: (1) Value of all assets		İ			
(1) Value of all assets (2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)  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:	<del></del>	<del></del>			
• •					
<ol> <li>Total support other than gross investment income (interest,</li> </ol>					
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)					ļ
(3) Largest amount of support from					
an exempt organization				1	<u> </u>
(4) Gross investment income  Part XV, Supplementary Info	rmation (Comple	to this part only	if the foundation	had \$5,000 or m	ore in assets
at any time during t			ii tiic iodiidation	, maa <del>40,000 o</del> r m	010 111 433013
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh			ributions received by the	foundation before the clo	se of any tax
year (but only if they have contributed n	nore than \$5,000). (See s	ection 507(d)(2).)			
PETER C. MORSE					
b List any managers of the foundation wh			or an equally large portion	on of the ownership of a p	artnership or
other entity) of which the foundation ha	s a 10% or greater interes	st			
NONE					
2 Information Regarding Contribut	ion, Grant, Gift, Loan,	, Scholarship, etc., Pr	ograms:		· · · · ·
		to preselected charitable (			
the foundation makes gifts, grants, etc.	(see instructions) to indiv	viduals or organizations u	nder other conditions, co	omplete items 2a, b, c, and	1 d.
a The name, address, and telephone num	ber or e-mail address of t	the person to whom apple	cations should be addres	ssed:	
SEE STATEMENT 10					
<b>b</b> The form in which applications should b	e submitted and information	tion and materials they sh	iould include;		
c Any submission deadlines:					
<u> </u>					
d Any restrictions or limitations on award	s, such as by geographica	al areas, charitable fields,	kinds of institutions, or o	otner factors:	

3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
GEORGETOWN UNIVERSITY	NO INDIVIDUALS	PUBLIC CHARITY		
BOX 0734			ALLIANCE	15 000
WASHINGTON, DC 20073-0734 .				15,000
CHILDREN'S HOSPITAL OF PHILADELPHIA 34TH STREET AND CIVIC CENTER BLVD PHILADELPHIA, PA 19104-4399	NO INDIVIDUALS	PUBLIC CHARITY	TERM FELLOWSHIP IN THE DIVISION OF PULMONOLOGY	75,000
JUPITER ISLAND MEDICAL CLINIC, INC	NO INDIVIDUALS	PUBLIC CHARITY	PROGRAM SERVICES	4.000
HOBE SOUND, FL 33455				4,000
				-
PAOLI HOSPITAL FOUNDATION 255 WEST LANCASTER AVENUE	NO INDIVIDUALS	PUBLIC CHARITY	PROGRAM SERVICES	
PAOLI, PA 19301				10,000
THE INSTITUTE OF RESPONSIBLE CITIZENSHIP 1227 25TH STREET, NW, 6TH FLOOR	NO INDIVIDUALS	PUBLIC CHARITY	PROGRAM SERVICES	
WASHINGTON, DC 20037				18,000
	NTINUATION SHEE	ET(S)	. ► 3a	807,220
<b>b</b> Approved for future payment			·	
BOYS & GIRLS CLUBS OF AMERICA 1275 PEACHTREE ST NE ATLANTA, GA 30309	NO INDIVIDUALS	PUBLIC CHARITY	PROGRAM SERVICES	2,000,780
				· , _
CHILDREN'S HOSPITAL OF PHILADELPHIA 34TH STREET AND CIVIC CENTER BLVD PHILADELPHIA, PA 19104-4399	NO INDIVIDUALS	PUBLIC CHARITY	TERM FELLOWSHIP IN THE DIVISION OF PULMONOLOGY	323,186
Total			► 3b	2,323,966

Form 990-PF (2013)

ter gross amounts unless otherwise indicated.	Unrelated t	usiness income		y section 512, 513, or 514	(e)
	(a) Business	- (b)	(C) Exclu- sion	(d)	Related or exempt
Program service revenue:	code	Amount	code	Amount	function income
a	_				
b	_			-	
<u> </u>	_				
d	_				<del></del>
e	_		+		_
T	_				
g Fees and contracts from government agencies			1		
Membership dues and assessments			<del></del>		
Interest on savings and temporary cash					
investments			14	9,934.	
Dividends and interest from securities	<del>-</del>	- 3 6 7 -		3,334.	; · -·
Net rental income or (loss) from real estate:		<u>-                                    </u>	1, -		
a Debt-financed property	-		+ + -		
<ul> <li>b Not debt-financed property</li> <li>Net rental income or (loss) from personal</li> </ul>	-		+ +		
property			1		
Other investment income	<del>                                     </del>		14	-5,714.	
Gain or (loss) from sales of assets other			+	3,7124	
than inventory			18	347,493.	
Net income or (loss) from special events			+	011,71200	
Gross profit or (loss) from sales of inventory			1	-	<del></del>
Other revenue:		<del></del>	1		
a					
b			1		
c	_	· · · · ·			•
d					
е	-  i				
Subtotal. Add columns (b), (d), and (e)	7.,	0	. 2.5	351,713.	(
Total. Add line 12, columns (b), (d), and (e)	••			13	351,713
ee worksheet in line 13 instructions to verify calculations.	)				
Part XVI-B Relationship of Activities	to the Accom	polishment of F	xempt P	urnoses	
Tioladoliship of Activities		iphomnom of E			
ine No. Explain below how each activity for which in				importantly to the accomp	lishment of
the foundation's exempt purposes (other the	an by providing funds	for such purposes).			
		<u>.</u>	_		<u>–</u>
			-		

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

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of							Y	es I	No	
the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?										
a Transfers from the reporting foundation to a noncharitable exempt organization of:								1. 1		
	(1) Cash	h			_			1a(1)		X
	(2) Othe	er assets					-	1a(2)		X
b	Other tra	nsactions:								
	(1) Sale	s of assets to a noncharital	ble exempt organizat	ion				1b(1)		X
	(2) Puro	chases of assets from a no	ncharitable exempt o	rganization				1b(2)		X
	(3) Rent	tal of facilities, equipment,	or other assets					1b(3)		X
	(4) Rein	nbursement arrangements						1b(4)		<u>X</u>
	<b>(5)</b> Loar	ns or loan guarantees	-					1b(5)		X
		ormance of services or me	-	-				1b(6)		X
	_	of facilities, equipment, ma						10		X
đ					dule. Column (b) should alv				S,	
					ed less than fair market valu	e in any transaction	or snaring arrangement, sr	ow in		
(a).		(d) the value of the goods, (b) Amount involved			e exempt organization	(d) Description	of transfers, transactions, and s	2000		
(a)L	ine no	(b) Amount involved	(c) Name of	N/A	e exempt organization	(u) Description	or transfers, transactions, and s	naring arrain	gements	<u> </u>
		<del></del>	·	IV/A					,	
						<u> </u>	•			
	<del></del>					<del>                                     </del>				
							<del></del>			
	<del></del>							-		
		<del> </del>		<del></del>		-				
						<u> </u>				
									-	_
							- '.'			
							· · · · · · · · · · · · · · · · · · ·			
2a		<del>-</del>	-		or more tax-exempt organi	zations described	_	_		
		n 501(c) of the Code (other		(3)) or in sect	tion 527?		L.	_ Yes	X	No
b	If "Yes," o	complete the following sch			L (b) Time of automorphism	<del>/</del>	(a) December of relationsh	<u> </u>	<del></del>	
		(a) Name of org	anization	····	(b) Type of organization	***	(c) Description of relationsh	ιp		
		N/A				<u></u>				
		·	<del></del>	····						
	Unde	er penalties of policy, I declare	that I have examined this	s return, ıncludır	ng accompanying schedules and	statements, and to the	best of my knowledge	the IRS dis	cupe this	
Si	gn and t	belief, it is true, correst, and cor	nplete Declaration of pre	eparer (other tha	n taxpayer) is based on all inform	nation of which prepare	retur	n with the p	reparer	
He		4 118411VI	me		11/5/14	PRESII		Yes	$\Box$	No
	Sig	nature of officer or trustee			Date	Title				
-		Print/Type preparer's na	ime	Preparer's s	ignature ,	Date	Check If PTIN	_		
				١,	$\Lambda \ \ \ \cdot$		self- employed			
Pa	iid	W. MICHAEL	PERKINS	μ.	Helkens	41414		0826		
	eparer		LLC				Firm's EIN ► 26-30	1440	8	
Us	se Only									
		Firm's address ► 20		-						
		DE	TROIT, MI	48226	<u> </u>		Phone no. 313-96			
							Fo	rm <b>990-</b>	PF (2	013)

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.

▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www irs gov/form990 ·

OMB No 1545-0047

Name of the organization

Employer identification number

	MORSE	CHARI	TABLE FOUN	DATION,	INC.		45-3630825	
Organization t	/pe(check one)					"		
Filers of:	Secti	on:						
Form 990 or 99	0-EZ	501(c)(	) (enter number) org	ganization				
		4947(a)(1) n	onexempt charitable	e trust <b>not</b> trea	ated as a private fo	oundation		
		527 political	organization					
Form 990-PF	X	501(c)(3) ex	empt private founda	ation				
		4947(a)(1) n	onexempt charitable	e trust treated	as a private found	lation		
		501(c)(3) tax	able private founda	ation				
Note. Only a se	-		eneral Rule or a Special Rule		the General Rule a	and a Special Ru	ile. See instructions.	
General Rule								
	organization filing F outor. Complete Par		0-EZ, or 990-PF tha	it received, dui	ring the year, \$5,0	00 or more (ın m	oney or property) from any one	
Special Rules								
509(a)	(1) and 170(b)(1)(A)(	(vı) and recei		ontributor, dur	ing the year, a cor	ntribution of the	julations under sections greater of (1) \$5,000 or (2) 2%	
total c	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, chantable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.							
contrib If this purpos	outions for use <i>exclu</i> box is checked, ent se. Do not complete	usively for rel er here the t e any of the p	igious, charitable, e otal contributions th	tc., purposes, nat were receiv neral Rule app	but these contribited during the yea blies to this organi	utions did not to r for an exclusive	ibutor, during the year, tal to more than \$1,000. ely religious, charitable, etc, t received nonexclusively \$	
							B (Form 990, 990-EZ, or 990-PF), orm 990-PF, Part I, line 2, to	
			ents of Schedule B (			50-LZ 01 011 115 F	omi 950-FF, Fait I, IIII <del>e</del> 2, 10	

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) (2013)

Name of organization

Employer identification number

	MORSE	CHARITABLE	FOUNDATION,	INC.
--	-------	------------	-------------	------

45-3630825

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PETER C. MORSE  2000 BRUSH STREET, SUITE 440  DETROIT, MI 48226-2251	\$3,373.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	\ \tag{\tag{\tag{\tag{\tag{\tag{\tag{	\$	Person Payroli Noncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		- \$	Person Payroli Noncash (Complete Part II for noncash contributions.)

Employer identification number

#### MORSE CHARITABLE FOUNDATION, INC.

45-3630825

Part II	Noncash Property (see instructions). Use duplicate copies of Part II	of additional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	50,000 SHS BANKRATE 8,487 SHS SERVICENOW INC	\$ 1,227,215.	12/19/13
(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
23453 10-24		Schedule B (Form 9	90, 990-EZ, or 990-PF) (201

Employer identification number Name of organization MORSE CHARITABLE FOUNDATION, 45-3630825 INC. 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) Part III 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 (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 (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (c) Use of gift (d) Description of how gift is held from (b) Purpose of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Part XV Supplementary Information	l			
3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
BOYS & GIRLS CLUB OF HOOD COUNTY PO BOX 9 GRANBURY, TX 76049	NO INDIVIDUALS	PUBLIC CHARITY	PROGRAM SERVICES	10,000.
BAKER INDUSTRIES 184 PENNSYLVANIA AVENUE MALVERN, PA 19355-2864	NO INDIVIDUALS	PUBLIC CHARITY	PROGRAM SERVICES	2,500.
COMMONWEALTH FOUNDATION 225 STATE STREET, SUITE 302 HARRISBURG, PA 17101	NO INDIVIDUALS	PUBLIC CHARITY	PROGRAM SERVICES	10,000.
BOYS & GIRLS CLUBS OF MARTIN COUNTY, INC PO BOX 910, 11500 SE LARES AVENUE HOBE SOUND, .FL 33475	NO INDIVIDUALS	PUBLIC CHARITY	PROGRAM SERVICES	5,000.
CHILDREN'S SCHOLARSHIP FUND PHILADELPHIA 100 SOUTH BROAD STREET, SUITE 1200 PHILADELPHIA, PA 19110	NO INDIVIDUALS	PUBLIC CHARITY	PROGRAM SERVICES	15,000.
THE AMERICAN SPECTATOR FOUNDATION 1611 NORTH KENT STREET, SUITE 901 ARLINGTON, VA 22209	NO INDIVIDUALS	PUBLIC CHARITY	PROGRAM SERVICES	6,000.
STATE POLICY NETWORK 1655 N FT MYER DRIVE, SUITE 360 ARLINGTON, VA 22209	NO INDIVIDUALS	PUBLIC CHARITY	PROGRAM SERVICES	5,000.
CATHOLIC RELIEF SERVICES 228 W LEXINGTON STREET BALTIMORE, MD 21201-3443	NO INDIVIDUALS	PUBLIC CHARITY	PROGRAM SERVICES	10,000.
PHILANTHROPY ROUND TABLE 1730 M STREET NW, SUITE 601 WASHINGTON, DC 20036	NO INDIVIDUALS	PUBLIC CHARITY	PROGRAM SERVICES	5,000.
THE ACADEMY OF MUSIC ONE SOUTH BROAD STREET, 14TH FLOOR PHILADELPHIA, PA 19107	O INDIVIDUALS	PUBLIC CHARITY	RESTORATION FUND	5,000.
Total from continuation sheets				685,220.

Part XV Supplementary Information				
3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
BOYS & GIRLS CLUBS OF AMERICA	NŌ INDIVIDUALS	PUBLIC CHARITY	CELEBRATION TOURNAMENT	
1275 PEACHTREE ST NE			[	
ATLANTA, GA 30309				15,000.
BRANDYWINE CONSERVANCY PO BOX 141	NO INDIVIDUALS	PUBLIC CHARITY	PROGRAM SERVICES	
CHADDS FORD, PA 19317				10,000.
EVERGLADES FOUNDATION 18001 OLD CUTLER ROAD, SUITE 625	NO INDIVIDUALS	PUBLIC CHARITY	RESTORATION AND PRESERVATION EFFORTS	
PALMETTO BAY, FL 33157				2,500.
FREE LIBRARY OF PHILADELPHIA 1901 VINE STREET, SUITE 111	NO INDIVIDUALS	PUBLIC CHARITY	PROGRAM SERVICES	
PHILADELPHIA, PA 19103				2,000.
GEORGETOWN UNIVERSITY BOX 0734 WASHINGTON, DC 20073-0734	NO INDIVIDUALS	- PUBLIC CHARITY	MAIN CAMPUS GEORGETOWN FUND	40,000.
			-	
THE HEARTLAND INSTITUTE ONE SOUTH WACKER DRIVE #2740 CHICAGO, IL 60606	NO INDIVIDUALS	PUBLIC CHARITY	PROGRAM SERVICES	1,500.
HOBE SOUND COMMUNITY CHEST, INC PO BOX 511	NO INDIVIDUALS	PUBLIC CHARITY	PROGRAM SERVICES	
HOBE SOUND, FL 33475-0511				5,000.
STANFORD UNIVERSITY 326 GALVEZ STREET	NO INDIVIDUALS	PUBLIC CHARITY	THE HOOVER INSTITUTION	F 000
STANFORD, CA 94305-6105	_	<del> </del>		5,000.
MANHATTAN INSTITUTE 52 VANDERBILT AVENUE NEW YORK, NY 10017	NO INDIVIDUALS	PUBLIC CHARITY	POLICY RESEARCH	4,000.
CURE ALZHEIMER'S FUND	NO INDIVIDUALS	PUBLIC CHARITY	PROGRAM SERVICES	
34 WASHINGTON STREET, SUITE 200 WELLESLEY HILLS, MA 02481 Total from continuation sheets	<u> </u>			15,000.

3 Grants and Contributions Paid During the \	rear (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	status of recipient	Contribution	711100111
		}		
UPITER MEDICAL CENTER FOUNDATION	NO INDIVIDUALS	PUBLIC CHARITY	PROGRAM SERVICES	
.210 S OLD DIXIE HIGHWAY				
UPITER, FL 33458	_			7,50
VERGLADES FOUNDATION 8001 OLD CUTLER ROAD, SUITE 625	NO INDIVIDUALS	PUBLIC CHARITY	RESTORATION AND PRESERVATION EFFORTS	
ALMETTO BAY, FL 33157			PRESERVATION EFFORTS	5,00
· · · · · · · · · · · · · · · · · · ·				
OYS & GIRLS CLUBS OF AMERICA	NO INDIVIDUALS	PUBLIC CHARITY	PROGRAM SERVICES	
275 PEACHTREE ST NE				
TLANTA, GA 30309				499,22
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	+			
		-		
And the same of th				
	1			
			!	
Total from continuation sheets		<u></u>		

FORM 990-PF	DIVIDENDS	AND INTER	EST	FROM SECU	URITIES	SI	PATEMENT	1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND		(A) REVENUE PER BOOKS	(B) NET INVE MENT INC		(C) ADJUST NET INC	
COMERICA BANK - CUSTODY COMERICA BANK -	93.		0.	93	3.	93.		
GARDNER COMERICA BANK -	9,244.		0.	- 9,244	9,2	44.		
ICIA	597.		0.	597	5	97.		
TO PART I, LINE 4	9,934.		0.	9,934	9,9	34.		
FORM 990-PF		OTHER I	NCOM	IE		SI	PATEMENT	2
DESCRIPTION			REV		(B) NET INVEST MENT INCOM		(C) ADJUSTEI NET INCOM	
FROM K-1 - LIMITLES HOLDINGS, LLC	S MOBILE			-5,714.	-5,54			
TOTAL TO FORM 990-P	F, PART I,	LINE 11		-5,714.	-5,54	5. ========		
FORM 990-PF		ACCOUNTI	NG F	EES		SI	CATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS			(C) ADJUSTE NET INCO	D	(D) CHARITAI PURPOSI	
ACCOUNTING FEES		4,350.	· -	2,175.			2,17	75.
TO FORM 990-PF, PG	 1, LN 16B	4,350.		2,175.	• —		2,17	75.

FORM 990-PF	TAX	ES		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
FEDERAL EXCISE TAX FOREIGN TAX	3,447. 877.	0 877		0.
TO FORM 990-PF, PG 1, LN 18	4,324.	877	•	0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
INVESTMENT FEES - COMERICA BANK - ICIA INVESTMENT FEES - COMERICA BANK - CUSTODY	686.	686		0.
BANK - GARDNER	3,323.	3,323	•	0.
TO FORM 990-PF, PG 1, LN 23	4,164.	4,164	•	0.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 6
DESCRIPTION		В	OOK VALUE	FAIR MARKET VALUE
116,505 UNITS BANKRATE INC 875 UNITS ALTRIA GROUP 1,025 UNITS BERSHIRE HATHAWAY 125 UNITS BROWN FORMAN CORP ( 300 UNITS BROWN FORMAN CORP ( 275 UNITS COMCAST CORP SPECIA 200 UNITS MARTIN MARIETTA MAY 100 UNITS MASTERCARD INC - CI 1,250 UNITS PHILIP MORRIS INY 85 UNITS SCRIPPS NETWORKS INY 1,280 UNITS UNILEVER N V NEW 1,625 UNITS WELLS FARGO & CO 525 UNITS ANHEUSER-BUSCH INBI 625 UNITS BRITISH AMERICAN TO 745 UNITS CIE FINANCIERE RICH	5P ORD	2,679. 31,955. 112,385. 8,941. 21,228. 11,833. 20,058. 57,368. 115,864. 6,350. 52,899. 63,479. 51,176. 34,793. 64,793.	2,090,100. 33,591. 121,524. 9,221. 22,671. 13,717. 19,988. 83,546. 108,913. 7,345. 51,494. 73,775. 55,892. 33,609. 74,386.	

MORSE CHARITABLE FOUNDATION, IN	NC.		45-3630825
1,000 UNITS DIAGEO PLC 28 101/108 1,150 UNITS HEINEKEN HOLDINGS NV 1,600 UNITS NESTLE SA REP RG SH A 550 UNITS PERNOD RICARD 1,400 UNITS SABMILLER PLC	30,446. 70,405. 114,104. 67,018. 75,597.	33,125. 72,868. 117,478. 62,758. 71,904.	
TOTAL TO FORM 990-PF, PART II, LI	1,013,371.	3,157,905.	
FORM 990-PF 07	THER INVESTMENTS		STATEMENT 7
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
LIMITLESS MOBILE HOLDINGS, LLC - 0.6531120% INTEREST	COST	204,286.	204,286.
TOTAL TO FORM 990-PF, PART II, LI	INE 13	204,286.	204,286.
FORM 990-PF	OTHER ASSETS		STATEMENT 8
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
FEDERAL EXCISE TAX RECEIVABLE	0.	553.	553.
TO FORM 990-PF, PART II, LINE 15	0.	553.	553.
FORM 990-PF OT	HER LIABILITIES		STATEMENT 9
DESCRIPTION		BOY AMOUNT	EOY AMOUNT
FEDERAL EXCISE TAX ACCRUED		3,863.	0.
TOTAL TO FORM 990-PF, PART II, LI	INE 22	3,863.	0.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 10

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

DAVID M. HEMPSTEAD

1901 ST. ANTOINE STREET, 6TH FLOOR

DETROIT, MI 48226

TELEPHONE NUMBER

313-259-7777

#### FORM AND CONTENT OF APPLICATIONS

BRIEF LETTER, FINANCIAL STATEMENT, COPY OF IRS LETTER DETERMINING TAX STATUS (UNLESS ALREADY LISTED IN CUMULATIVE LIST).

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

AWARDS GENERALLY LIMITED TO CHARITABLE ORGANIZATIONS ALREADY FAVORABLY KNOWN TO, AND OF INTEREST TO, THE SUBSTANTIAL CONTRIBUTORS OF THIS FOUNDATION. NO GRANTS TO INDIVIDUALS.

#### GENERAL EXPLANATION

STATEMENT 11

FORM/LINE IDENTIFIER AND DESCRIPTION/RETURN REFERENCE

PART VII-B, QUESTION 1A(3) - SERVICES ACCEPTED FROM A DISQUALIFIED PERSON

#### **EXPLANATION:**

FE, LLC (2000 BRUSH ST., SUITE 440, DETROIT, MI 48226-2251), IS A BUSINESS OFFICE MAINTAINED FOR, AND AT THE EXPENSE OF, VARIOUS MEMBERS OF THE MORSE FAMILY WHO, WITH RESPECT TO THIS FUND, ARE "DISQUALIFIED PERSONS", INCLUDING PARTICULARLY PETER C. MORSE AND MARTHA F. MORSE.

FE, LLC SUPPLIES ACCOUNTING SERVICES AND OFFICE SERVICES (COLLECTING INCOME, DISTRIBUTION OF CONTRIBUTIONS, MAINTENANCE OF ACCOUNTS AND RECORDS, HANDLING CORRESPONDENCE, PREPARATION OF TAX RETURNS AND ANNUAL REPORTS, AND SIMILAR MATTERS) PERTAINING TO THE OFFICE OF THE TREASURER. SUCH SERVICES ARE PERFORMED BY RODNEY P. WOOD AND BY OTHERS IN FE, LLC UNDER HIS SUPERVISION. NO COMPENSATION IS PAID BY THE MORSE CHARITABLE FOUNDATION, INC. DIRECTLY TO RODNEY P. WOOD AS COMPENSATION FOR HIS SERVICES IN ANY OF THE CAPACITIES LISTED ABOVE OR OTHERWISE. IN 2013, \$4,350 WAS PAID BY THE MORSE CHARITABLE FOUNDATION, INC. TO FE, LLC FOR ALL THE SERVICES REFERRED TO IN THIS -PARAGRAPH.

#### GENERAL EXPLANATION

STATEMENT 12

FORM/LINE IDENTIFIER AND DESCRIPTION/RETURN REFERENCE

PART VII-B, QUESTION 1A(4) - COMPENSATION PAID TO A DISQUALIFIED PERSON

#### **EXPLANATION:**

DAVID M. HEMPSTEAD, LISTED AS SECRETARY, IS A PARTNER IN THE LAW FIRM OF BODMAN LLP, 1901 ST. ANTOINE STREET, 6TH FLOOR, DETROIT, MICHIGAN 48226, WHICH FIRM ACTS AS THE ATTORNEYS FOR THE MORSE CHARITABLE FOUNDATION, INC. MR. HEMPSTEAD IS THE PERSON IN THE FIRM PRINCIPALLY CONCERNED WITH SUCH LEGAL SERVICES TO THE FUND, BUT OTHERS IN THE FIRM ALSO RENDER LEGAL SERVICES TO THE FUND UNDER HIS SUPERVISION. THE TIME SPENT BY MR. HEMPSTEAD STRICTLY IN THE LISTED OFFICIAL CAPACITIES CANNOT READILY BE SEPARATED FROM THAT SPENT IN PERFORMING THE LEGAL SERVICES REFERRED TO. DURING 2013, THE MORSE CHARITABLE FOUNDATION, INC. DID NOT PAY ANY SAID ATTORNEY FEES (AND EXPENSES) FOR THE SERVICES REFERRED TO IN THIS PARAGRAGH.

## Form **8868** (Rev January 2014)

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Department of the Treasury Internal Revenue Service

instructions.

# Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs gov/form8868 •

OMB No. 1545-1709

If you are filing for an Automatic 3-Month Extension, complet	e only Pa	rt I and check this box		▶	X
If you are filing for an Additional (Not Automatic) 3-Month Ext	ension, c	omplete only Part II (on page 2 of t	his form).		
so not complete rait in almose -		tic 3-month extension on a previous			
Electronic filing (e-file) . You can electronically file Form 8868 if y					
required to file Form 990-T), or an additional (not automatic) 3-mor	ith extens	ion of time. You can electronically fi	ie Form 88	368 to request an ex	tension
of time to file any of the forms listed in Part I or Part II with the exc	eption of	Form 8870, Information Return for 1	ransfers A	Associated With Cei	taın
Personal Benefit Contracts, which must be sent to the IRS in paper	er format	(see instructions). For more details o	n the elec	tronic filing of this f	orm,
visit www.irs gov/efile and click on e-file for Charities & Nonprofits					
Part I Automatic 3-Month Extension of Time					
A corporation required to file Form 990-T and requesting an autom	natic 6-mo	inth extension - check this box and o	complete		
Part I only				▶	
All other corporations (including 1120-C filers), partnerships, REMI	Cs, and to	rusts must use Form 7004 to reques	t an exten:	sion of time	
to file income tax returns.			Enter file	r's identifying num	ber
Type or Name of exempt organization or other filer, see instruc	ctions		Employer	identification numb	er (EIN) or
print					
MORSE CHARITABLE FOUNDATION	I, INC	C •		45-363082	
tue date for Number, street, and room or suite no. If a P.O. box, se	_	tions.	Social sec	curity number (SSN)	<i>)</i>
Illing your 2000 BRUSH STREET, SUITE 44	<u>. 0</u>				
nstructions City, town or post office, state, and ZIP code. For a fo	reign add	ress, see instructions			
DETROIT, MI 48226					
Enter the Return code for the return that this application is for (file	a separa	te application for each return)			0 4
Application	Return	Application			Return
ls For	Code	Is For Co			Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)			07
Form 990-BL	02	Form 1041-A	1-A 08		
Form 4720 (individual)	03	Form 4720 (other than individual)	ual) 09		
Form 990-PF	04	Form 5227			10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T (trust other than above)	06	Form 8870			12
RODNEY P. WOOD					_
• The books are in the care of ▶ 2000 BRUSH STRE	ET,	SUITE 440 - DETROI	r, MI	48226-225	1
Telephone No. ► 313-961-0500		Fax No. 🕨			
<ul> <li>If the organization does not have an office or place of business</li> </ul>	in the Ur	ited States, check this box			
If this is for a Group Return, enter the organization's four digit (		<del></del>			
oox ▶ . If it is for part of the group, check this box ▶				ers the extension is	for
1 I request an automatic 3-month (6 months for a corporation	required t	to file Form 990-T) extension of time	untıl		
AUGUST 15, 2014 , to file the exempt	organiza	tion return for the organization name	ed above.	The extension	
is for the organization's return for:					
$\blacktriangleright X$ calendar year $2013$ or					
tax year beginning	, an	d ending		_ ·	
2 If the tax year entered in line 1 is for less than 12 months, cl	neck reas	on	Final return	า	
Change in accounting period			<del></del>	_	
3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6069,	enter the tentative tax, less any		11	440
nonrefundable credits. See instructions.			3a	\$ 4	,000
b If this application is for Forms 990-PF, 990-T, 4720, or 6069,	, enter any	refundable credits and			0.00
estimated tax payments made. Include any prior year overp	ayment al	lowed as a credit	3b	\$ 4	,000.
c Balance due. Subtract line 3b from line 3a. Include your page	yment wit	h this form, if required,			_
by using EFTPS (Electronic Federal Tax Payment System) S			3c	\$	0.
Caution. If you are going to make an electronic funds withdrawal	(dırect de	bit) with this Form 8868, see Form 8	453-ЕО аг	id Form 8879-EO for	payment