EXTENDED TO NOVEMBER 15, 2018 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.

			irs.gov/Form990PF for instr C 13, 2017	ructions and and e .		DEC 31, 201	Open to Public Inspection 7
_		of foundation	, 13, 2017	, and e	iruing	A Employer identification	
		CEY AND ROBERT MORSE FA	YIIMA			TA Employer localinean	ואלוויטוו וול
		NDATION, C/O UNTRACHT E				82-677007	5
		and street (or P O box number if mail is not delivered to stree			Room/suite	B Telephone number	
3	325	COLUMBIA TURNPIKE			202	917-488-2	910
Cit	ty or t	town, state or province, country, and ZIP or foreign (postal code		·	C If exemption application is	pending, check here
		RHAM PARK, NJ 07932					
G	Chec	k all that apply:	Initial return of a fo	rmer public o	harity	D 1. Foreign organizatio	ns, check here
		Final return	Amended return			2	
		Address change	Name change			2. Foreign organizations r check here and attach	computation
H	_	k type of organization; X Section 501(c)(3) e			1)4	E If private foundation s	tatus was terminated
<u> </u>		ection 4947(a)(1) nonexempt charitable trust	Other taxable private founda		0	under section 507(b)(1)(A), check here
		arket value of all assets at end of year J Account	=	Accr	ual	F If the foundation is in	
			ther (specify)			under section 507(b)(1)(B), check here
	<u>-\$</u>	253,522. (Part I, colui					
P	art	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)	(a) Revenue and expenses per books		vestment ome	(c) Adjusted net income	(d) Disbursements for charitable purposes
	T •		258,632.			N/A	(cash basis only)
9	1 2	Contributions, gifts, grants, etc., received Check it the foundation is not required to attach Sch. B	430,034.			N/A	
2019	3	Interest on savings and temporary		' -		 	
. ~! F~:	4	cash investments Dividends and interest from securities					+
63	1 .	a Gross rents			-		
m ·	1.	Net rental income or (loss)				 	
FEB.	6:	Net gain or (loss) from sale of assets not on line 10	-100.				STATEMENT 1
_ ?	,	Gross sales price for all 258,522.	,				
直し _下 Revenue	7	Capital gain net income (from Part IV, line 2)		22	0,187.		
Z	8	Net short-term capital gain					
SCANNEL Revei	9	Income modifications					
Ö	102	Gross sales loss roturns a and allowances		Mile es i h	CHI M THE CA	, som of the proper	11 <u>57 91</u> 1394
S	1	I Less Cost of goods sold					
	(c Gross profit or (loss)				ļ	
	11		050 530		0 107	· -	
	12		258,532.		0,187.		
	13	Compensation of officers, directors, trustees, etc	0.		0.	·	0.
	14	- · · • • · · · · · · · · · · · · · · ·					
S	10	Pension plans, employee benefits a Legal fees		R	ECEN	/FD	
)Sus	108	a Legarrees 5 Accounting fees			LOLI	70	
Expenses	- `	Cother professional fees		8 1	INV 20	100	
ē E	17				OV 2 0	2018	
ativ	18	Taxes					
istr	19	Depreciation and depletion			GDEN	. UT	
ä	20	·				<u></u>	
Adi	21						
Ē	22	Printing and publications					
Operating and Administrative	23		10.		0.		0.
atin	24	•					
per		expenses. Add lines 13 through 23	10.		0.	·	0.
Ō	25	Contributions, gifts, grants paid	5,000.				5,000.
	1	Total expenses and disbursements.					
_		Add lines 24 and 25	5,010.		0.	,	5,000.
	27	Subtract line 26 from line 12:					
	a	2 Excess of revenue over expenses and disbursements	253,522.				
	t	Net investment income (if negative, enter -0-)		22	0,187.		
		Adjusted net income (if negative, enter -0-)				N/A	
				_			5 000 BH

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2017)

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FOUNDATI	ON	C/0 I	איים א כאייו	EARLV	T.T.C

Form 990-PF (2017) 82-6770075 Page 2 Beginning of year End of year Balance Sheets Attached schedules and amounts in the description column should be for end-of year amounts only (b) Book Value (c) Fair Market Value (a) Book Value 181,136. 181,136. 1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Accounts receivable Less: allowance for doubtful accounts 4 Pledges receivable ▶ Less: allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated degreciation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment: basis Less accumulated depreciation 72,386. 72,386. O. STATEMENT 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 0. 253,522 253,522. instructions. Also, see page 1, item I) 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. 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. Vet Assets or 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. 27 Capital stock, trust principal, or current funds 0. 28 Paid-in or capital surplus, or land, bldg., and equipment fund 0. 253,522. 29 Retained earnings, accumulated income, endowment, or other funds 0. 253,522 30 Total net assets or fund balances 253,522 0. 31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3

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253,522.

5 Decreases not included in line 2 (itemize)

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Form 990-PF (2017) FOUNDATION, C/O UNTRACHT EARLY LLC

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		of property sold (for example)			T(b)	How acquir	ed	(c) Date acquired	(d) Date sold
2-story brick warehouse, or common stock, 200 shs. MLC Co.)			<u> </u>	- Purchase - Donation		(mo., day, yr.)	(mó., day, yr.)		
1a LGI HOMES, INC	•			_	<u> </u>	D	1	1/07/13	12/21/17
<u>b</u>					╀				
d					╁╌			_	
e		 	-		†			.	
(e) Gross sales price	(f) D	epreciation allowed (or allowable)		st or other basis expense of sale				(h) Gain or (loss ((e) plus (f) minus	
a 258,522.				38,33	35.				220,187.
b									
C									
<u>d</u>			<u>. </u>						
Complete only for assets showin	o oain in c	olumn (h) and owned by 1	the foundation	n on 12/31/69.			(1)	Gains (Col. (h) gain	miniis
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) E>	cess of col. (i)			còl. ((k), but not less tha Losses (from col. (n -0-) or
a									220,187.
b	-	·							
C									
<u>d</u>								 	
e			L		<u> </u>				
2 Capital gain net income or (net ca	pital loss)	$\begin{cases} \text{ If gain, also enter} \\ \text{ If (loss), enter -0-} \end{cases}$	n Part I, line in Part I, line	7 : 7	}	2			220,187.
3 Net short-term capital gain or (los			ıd (6):		اد				
If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8	column (c).			 	اوا		N/A	
	nder S	ection 4940(e) for	Reduced	Tax on Net	linv	estmen	it Inco		
(For optional use by domestic private	foundatio	ns subject to the section 4	1940(a) tax or	net investment ir	ncome	e.)			N/A
If section 4940(d)(2) applies, leave th	ue nart hla	nk							
, , , , , , ,									
Was the foundation liable for the sect If "Yes," the foundation doesn't qualifi				-	riod?				Yes No
1 Enter the appropriate amount in a					entries				
(a)		(b)			(c)			District	(d)
Base periód years Calendar year (or tax year beginnir	ng in)	Adjusted qualifying dis	tributions	Net value of no			assets	(col. (b) div	outión ratio vided by col. (c))
2016									
2015								<u> </u>	
2014					_			ļ	
2013				-				 -	
2012		·····		 .				 -	
2 Total of line 1, column (d)								2	
3 Average distribution ratio for the 5	-year base	e period - divide the total o	on line 2 by 5.	0, or by the numb	er of	years			··· · · · · · · · · · · · · · · · · ·
the foundation has been in exister	ice if less t	han 5 years						3	
4 Enter the net value of noncharitab	le-use ass	ets for 2017 from Part X,	line 5					4	
5 Multiply line 4 by line 3								5	. <u></u> _
6 Enter 1% of net investment incom	ie (1% of F	Part I, line 27b)						6	
7 Add lines 5 and 6								7	
8 Enter qualifying distributions from	Part VII I	ine 4						8	
If line 8 is equal to or greater than See the Part VI instructions.	•		1b, and comp	olete that part usin	ng a 1'	% tax rate.			
702521 01 02 19				<u></u> -					orm 990-PF (2017)

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Part VI Excise Tax Based on Investment Income (Section 4		or 4948 ·	see instruct	tions)
1a Exempt operating foundations described in section 4940(d)(2), check here	nd enter "N/A" on line 1.			1
Date of ruling or determination letter: (attach copy of letter if	necessary-see instructions)			1
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here		1	4	,404.
of Part I, line 27b				
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter	er 4% of Part I, line 12, col. (b).			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only	y; others, enter -0-)	2		0.
3 Add lines 1 and 2	,	3	4	,404.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations on	lv: others, enter -0-)	4		0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	,	5	4	,404.
6 Credits/Payments;			<u>-</u> -	
a 2017 estimated tax payments and 2016 overpayment credited to 2017	6a	0.		1
b Exempt foreign organizations - tax withheld at source	6b	0.		1
c Tax paid with application for extension of time to file (Form 8868)		0.		ļ
d Backup withholding erroneously withheld		0.		1
7 Total credits and payments. Add lines 6a through 6d		7		0.
8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is	attached	8		$\frac{-3\cdot}{78\cdot}$
	SEE STATEMENT 4	▶ 9	4	,482.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpain		10		7 1021
11 Enter the amount of line 10 to be: Credited to 2018 estimated tax	Refunded	· —		
Part VII-A Statements Regarding Activities	[Helulueu	111		
1a During the tax year, did the foundation attempt to influence any national, state, or local l	egiclation or did it participate or inter	vene in	T	es No
	egistation of the it participate of inter	ACHE III	1a	X
any political campaign?	reases? Con the instructions for the	dafinition	1b	$\frac{x}{x}$
b Did it spend more than \$100 during the year (either directly or indirectly) for political pu		uemmuon	- ''' -	
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and cop	ies of any materials published of			
distributed by the foundation in connection with the activities.			- 	_ <u>_</u>
c Did the foundation file Form 1120-POL for this year?	Mar areas		1c	 ^
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during		^		
(1) On the foundation. > \$ (2) On foundation mana		<u>0.</u>		1 1
e Enter the reimbursement (if any) paid by the foundation during the year for political exp	enditure tax imposed on foundation			i !
managers. ▶ \$0.	1.1000		- 	$-\frac{1}{x}$
2 Has the foundation engaged in any activities that have not previously been reported to t	ne IKS?		2	- -^ -
If "Yes," attach a detailed description of the activities.				1 1
3 Has the foundation made any changes, not previously reported to the IRS, in its govern	ing instrument, articles of incorporati	on, or		_ <u></u>
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3	$\frac{\Lambda}{X}$
4a Did the foundation have unrelated business gross income of \$1,000 or more during the	year?	NT	/3 4a	
b If "Yes," has it filed a tax return on Form 990-T for this year?		IA	/A 4b	X
5 Was there a liquidation, termination, dissolution, or substantial contraction during the y	eary		5	- -
If "Yes," attach the statement required by General Instruction T				1 1
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied	ed either:			1 1
By language in the governing instrument, or				
 By state legislation that effectively amends the governing instrument so that no mand 	latory 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? If "Yes," c	omplete Part II, col. (c), and Part XV		7 2	X
			1 1	1 1
8a Enter the states to which the foundation reports or with which it is registered. See instru	ictions. >			
WY	 _			1
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	he Attorney General (or designate)			_
of each state as required by General Instruction G? If "No," attach explanation			8b 2	<u>x</u>
9 Is the foundation claiming status as a private operating foundation within the meaning of		calendar	-	_
year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes,"	complete Part XIV		9	X C
10 Did any persons become substantial contributors during the tax year? if "Yes," attach a sc	hedule listing their names and addresses	STMT		
			Form 990-F	PF (2017)

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FOUNDATION, C/O UNTRACHT EARLY LLC

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Pa	art VII-A Statements Regarding Activities (continued)		-	
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?		1	
-	If "Yes," attach statement, See instructions	12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	 -
	Website address ► N/A	10	1	
14	The books are in care of ► ROBERT R. MORSE Telephone no. ►917-	488-2	910	
• •	Located at ▶ P.O. BOX 1234, WILSON, WY			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		·	T
	and enter the amount of tax-exempt interest received or accrued during the year	N	I/A	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,			No
10	securities, or other financial account in a foreign country?	16	103	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	10	<u> </u>	
Ps	foreign country ► art VII-B Statements Regarding Activities for Which Form 4720 May Be Required		_	<u></u>
<u></u>			Voc	No
1.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. a During the year, did the foundation (either directly or indirectly):	-	163	140
10				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		ł	1 1
			ł	1 1
				1 1
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?		ļ	
		'	ł	1
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		ł	
	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.)			, 1
		'	İ	ii
C	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	-,-		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A Organizations relying on a current notice regarding disaster assistance, check here	16		├
	organizations for my different months regarding abasis, about an organization and the manufacture of the man	1	ļ	1
(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		·	X
_	before the first day of the tax year beginning in 2017?	1c		<u> </u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
ε	a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning		ļ)]
	before 2017?	'		
	If "Yes," list the years		1	
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect		ļ	
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach		·	
	statement - see instructions.) N/A	2b		 -
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	- 1	l	} }
_	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		İ	
3 a	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year? Yes X No		ł	
b	b if "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after			1
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,		 -	
	Form 4720, to determine if the foundation had excess business holdings in 2017.) N/A	3b	ļ	
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	 	X
Ò	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	ļ- <u></u> -	 	لپا
	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b	<u> </u>	X (0047)
		Form 99	U-PF	(2017)

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Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be I	Required (continu	ued)				
5a During the year, did the foundation pay or incur any amount to:				1	Yes	No	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	es 🔀 No		\neg	\neg	
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire	ectly,					
any voter registration drive?							
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	s 🗓 No				
(4) Provide a grant to an organization other than a charitable, etc., organizatio							
4945(d)(4)(A)? See instructions			s X No	}	J	J	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			1	- 1	ŀ	
the prevention of cruelty to children or animals?			s X No	1			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described i						
section 53.4945 or in a current notice regarding disaster assistance? See instri	·		N/A	5b	<u> </u>		
Organizations relying on a current notice regarding disaster assistance, check l			▶ □	$\neg \uparrow$	\neg		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		ined	_			i	
expenditure responsibility for the grant?			s 🔲 No	ĺ	İ	ļ	
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	nav premiums on				i		
a personal benefit contract?	pay promiding on	□ v _e	s X No		ľ	- 1	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	serconal henefit contract?			6b		$\overline{\mathbf{x}}$	
If "Yes" to 6b, file Form 8870.	rersonal belieff contract?		ŀ				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	holter transaction?		s X No	- {	ł		
		16	N/A	7b	\dashv	!	
Part VIII Information About Officers, Directors, Trust		nogoro Highly		70			
Paid Employees, and Contractors	ees, roundation wa	magers, mignij	,				
List all officers, directors, trustees, and foundation managers and t	heir compensation.						
	,	(c) Compensation	(d) Contributions to	T (e) Expe	ense	
(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	ačo	count, Ilowan	other ces	
STACEY C. MORSE	TRUSTEE	Cittor 0 /	compensation	+			
P.O. BOX 1234	I						
WILSON, WY 83014	5.00	0.	0			0.	
	TRUSTEE	 		+-			
P.O. BOX 1234	TRODIDE						
WILSON, WY 83014	5.00	0.	0			0.	
WILDON, WI 03011	3.00			Ή—			
]			
				+			
	'						
2 Compensation of five highest-paid employees (other than those inc	l cluded on line 1). If none.	enter "NONE."		Щ.			
			(d) Contributions to	(e	Expe	ense	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deterred	i acc	count, Ilowan	other	
NONE	acvoted to position		compensation	+-	101741	-	
NONE							
		 		+-			
		{		1			
	ļ			+			
	1			1			
		 		+-			
				+			
]		1			
	<u> </u>	<u> </u>					
Total number of other employees paid over \$50,000				-000	D=	0	
			Forn	n 990 -	-PF (2017)	

STACEY AND ROBERT MORSE FAMILY Form 990-PF (2017) FOUNDATION, C/O UNTRACHT EARLY LLC 82-6770075 Page 7 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) 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 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 **Expenses** 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

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Total. Add lines 1 through 3

All other program-related investments. See instructions.

Form 990-PF (2017)

P	art·X Minimum Investment Return (All domestic foundations must complete this part. Foreign f	oundations, see	instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
	Average monthly fair market value of securities	1a	0.
	Average of monthly cash balances	10	8,933.
	Fair market value of all other assets	10	595.
d	Total (add lines 1a, b, and c)	1d	9,528.
	Reduction claimed for blockage or other factors reported on lines 1a and		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	9,528.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	143.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	9,385.
6	Minimum investment return Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	24.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations foreign organizations, check here ▶ ☐ and do not complete this part.)	and certain	
1	Minimum investment return from Part X, line 6	1	24.
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	4,404.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	0.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5_	0.
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	0.
.P	art XII; Qualifying Distributions (see instructions)	I	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		F 000
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	5,000.
	Program-related investments - total from Part IX-B	1b	<u>U•</u>
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:		
	Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3b	F 000
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	5,000.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	5,000.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	on qualifies for the	section

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(a) (b) (c) (d) 2016 2016 2017 1 Distributable amount for 2017 from Part XI, Inn 7 2 Undersonaid ricene, I am, as of the oet of tash 1 a finite amount for 2016 only b fool for prior years. 5 Enter amount for 2016 only b fool for prior years. 5 Excess distributions carryover, if am, to 2017. 8 From 2019 6 From 2016 6 From 2016 6 From 2016 6 From 2016 6 From 2016 7 Out of years and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year and year	Part XIII Undistributed income	see instructions)			
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d Excess from 2016	1	1 1	!	•	
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e excess from 201/ 5,000 • I	e Excess from 2017 5,000	.]	ı		

FOUNDATION, C/O UNTRACHT EARLY LLC Form 990-PF (2017) 82-6770075 Page 10 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 2017, 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 2 a Enter the lesser of the adjusted net-Prior 3 years Tax year (e) Total (a) 2017 (b) 2016 (c) 2015 (d) 2014 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(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; (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).) STACEY C. MORSE 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., to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number or email address 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:

Part XV Supplementary Information	n (continued)			
3 Grants and Contributions Paid During the	Year or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	, and an
a Paid during the year				
MEMORIAL SLOAN KETTERING CANCER CENTER	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
1275 YORK AVE				
NEW YORK, NY 10065	 	 	 	5,000.
,				
				<u> </u>
	·	·	-	
		ļ		
		 		
Total			▶ 3a	5,000.
b Approved for future payment				
NONE				
	l'			
		 		
		}	1	
				l
Total			▶ 3b	0.
			F	orm 990-PF (2017)

FOUNDATION,	C/O UNTRACI	HT EARLY L	LC	82-6	770075 Page 12
Part XVI-A Analysis of Income-P	Producing Activitie	es			
Enter gross amounts unless otherwise indicated.	Unrelated t	usiness income		oy section 512, 513, or 514	(e)
	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion code	Amount	function income
a					
b					
c					
d					
e					
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income			1		
8 Gain or (loss) from sales of assets other			 		
than inventory			18	-100.	
9 Net income or (loss) from special events			 		
10 Gross profit or (loss) from sales of inventory		·			
11 Other revenue:			 		· ,
•					
b			T		· · · · · · · · · · · · · · · · · · ·
	J J		 		
d			T		
e		-	11-		· -
12 Subtotal. Add columns (b), (d), and (e)		0		-100.	0.
13 Total. Add line 12, columns (b), (d), and (e)	· · · ·			13	-100.
(See worksheet in line 13 instructions to verify calculat	ions.)				
Part XVI-B Relationship of Activi	ities to the Accom	plishment of E	xempt P	urposes	· <u> </u>
Line No. Explain below how each activity for wh	ich income is renorted in c	olumn (e) of Part X\/I-	A contribute	I importantly to the accomp	hishment of
the foundation's exempt purposes (oth			A CONTRIBUTE	importantly to the accomp	mannent of
(var					
		· · · · · · · · · · · · · · · · · · ·			
					
					
					
					
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Form **990-PF** (2017)

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Form 990-PF (2017)

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13

FOUNDATION, C/O UNTRACHT EARLY LLC 82-6770075 Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations Part XVII

1 Did the or	ganization directly or indir	rectly engage in any	of the followin	g with any other organi	zation desc	cribed in secti	on 501(c)		Yes	No
(other tha	n section 501(c)(3) organ	iizations) or in sectio	on 527, relating	g to political organizatio	ns?					
a Transfers	from the reporting founda	ation to a noncharita	ible exempt or	ganization of:						
(1) Cash								1a(1)		X
(2) Other	assets							1a(2)		<u>X</u>
b Other tran	sactions:									
(1) Sales	of assets to a noncharital	ble exempt organiza	tion					1b(1)		X
(2) Purch	nases of assets from a noi	ncharitable exempt i	organization					1b(2)		X
(3) Renta	al of facilities, equipment,	or other assets						15(3)		X
(4) Reim	bursement arrangements							1b(4)		X
(5) Loan:	s or loan guarantees							1b(5)		X
• •	rmance of services or me	•	•					1b(6)		X
_	f facilities, equipment, ma			•				1c		X
	wer to any of the above is	•	_	• •	-		_	-	ets,	
	s given by the reporting fo			ed less than fair market	value in an	y transaction	or sharing arrangem	ent, show in		
	(h) Amount revolved			avamet arganization		(d) p				
(a)Line no	(b) Amount involved	(c) Name o		exempt organization		(U) Description	of transfers, transactions	, and sharing arr	angeme	nts
			N/A							
										—
								 		
		<u> </u>								
	 	 				··· ··· ·		-		
										
_		<u> </u>								
										
	· · · · · · · · · · · · · · · · · · ·			_ -						
		 _								
										
			 _							
										
2a Is the four	ndation directly or indirect	l	related to one	or more tax-exempt or	nanizations	described				
	501(c) (other than section	=		or more tax exemption	gamzanono	400011000		Yes	X] No
	omplete the following sche		, , , , , , , , , , , , , , , , , , ,							
b 11 100, 00	(a) Name of org			(b) Type of organizati	on		(c) Description of rela	tionship		
	N/A						<u>`</u>			
	<u> </u>									
	· · · · · · · · · · · · · · · · · · ·									
					 					
	penalties of perjury, I declare t							May the IRS o	iscuss t	nis .
Sign and be	elief, it is true, correct, and com	nplete Declaration of pr	reparer (other than	n taxpayer) is based on all in	nformation of	which preparer	has any knowledge	return with the shown below	prepare	er i
Here	x Kouta	L WIMSE		111/15/	18	TRUSTE	Έ	X Yes		No
Sign	ature of officer or trustee			Date	Tı	tie				
	Print/Type preparer's na	ıme	Preparer's si	gnature	Date	Т	Check if P	TIN		
							self- employed			
Paid	DAVID S. U	NTRACHT	DAVID	S. UNTRACH	т 11/	09/18]	P00161	568	
Preparer	Firm's name ► UN'T						Firm's EIN ▶ 22			
Use Only										
Ĭ	Firm's address ► 32	5 COLUMBI	A TURN	PIKE, SUIT	E 202			•		
		ORHAM PAR		-			Phone no. 973	-408-6	700	
			· ·				· · · · · · · · · · · · · · · · · · ·	Form 990		2017)

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. Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

Employer identification number

STACEY AND ROBERT MORSE FAMILY FOUNDATION, C/O UNTRACHT EARLY LLC 82-6770075 Organization type (check one) Filers of: Section: Form 990 or 990-EZ ____ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) 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), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions 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 year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file 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) (2017)

Name of organization . STACEY AND ROBERT MORSE FAMILY FOUNDATION, C/O UNTRACHT EARLY LLC Employer identification number

82-6770075

Part I	Contributors (see instructions) Use duplicate copies of Part I if	f additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	STACEY C. MORSE PO BOX 1234 WILSON, WY 83014	\$\$.	Person X Payroll
(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 Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Onnocash 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
723452 11-0		\$	Person Payroll Noncash (Complete Part II for noncash contributions) 990, 990-EZ, or 990-PF) (2017)

Name of organization

STACEY AND ROBERT MORSE FAMILY
FOUNDATION, C/O UNTRACHT EARLY LLC

Employer identification number

82-6770075

art II Nor	ncash Property (see instructions). Use duplicate copies of Pa	art 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
	85 SHS LGI HOMES, INC.		
		\$ 258,622.	12/20/17
(a) No. rom 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
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(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
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(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
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Name of or	ganization Y AND ROBERT MORSE FAMI	T V	Employer identification number
FOUND	ATION, C/O UNTRACHT EAR	LY LLC	82-6770075
Radill	Exclusively religious, charitable, etc., cont the year from any one contributor. Complete completing Part III, enter the total of exclusively religious. Use duplicate copies of Part III if addition.	Olumns (a) through (e) and the follow s, charitable, etc., contributions of \$1,000 or le	ng line entry. For organizations
(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, ar	nd ZIP + 4	82-6770075 ad in section 501(c)(7), (8), or (10) that total more than \$1,000 for lowing line entry. For organizations or less for the year (Enter this into once) \$
-(-) No.			
(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, ar	id 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, ar	nd 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, ar	nd ZIP + 4	Relationship of transferor to transferee
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FORM 990-PF	LIST		TANTIAL CO		ORS		STAT	EMENT	5
NAME OF CONTRIBUTOR			ADDRESS						
STACEY C. MORSE			P.O. BOX WILSON,		4				
FORM 990-PF		LATE	PAYMENT E	ENALTY			STAT	EMENT	6
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