#### Form **990-PF**

# EXTENDED TO NOVEMBER 16, 2020 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. ► Go to www.irs gov/Form990PF for instructions and the latest information.

F0	rcale	ndar year 2019 or tax year beginning		, and ending		
		foundation SE FAMILY FOUNDATION (F	/K/A STACEY		A Employer identification	n number
		ROBERT MORSE FAMILY FO			82-6770075	5
		and street (or P O box number if mail is not delivered to street		Room/suite	B Telephone number	
		UE LLC, 325 COLUMBIA T		202	973-408-67	700
		own, state or province, country, and ZIP or foreign p RHAM PARK, NJ 079.32	ostal code		C If exemption application is p	pending, check here
G	Check	c all that apply: Initial return		rmer public charity	D 1. Foreign organization:	s, check here
		Address change	Amended return  Name change		Foreign organizations me check here and attach co	eeting the 85% test,
H	Check	type of organization: X Section 501(c)(3) ex		c 1\	1	
. Ē			Other taxable private founda	$() \nu$	E If private foundation sta under section 507(b)(1	
<b>₹</b> 🗔	Fair ma	arket value of all assets at end of year   J Accounti	<del></del>	Accrual	F If the foundation is in a	,, ,,
(	from F		ther (specify)		under section 507(b)(1	
	<u>►\$</u>	100,280. (Part I, colun	nn (d), must be on cash bas	s.)		
<u> </u>	art I	(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	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received	558,896.		N/A	
	2	Check If the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	95.	95.		STATEMENT 2
	1	Gross rents				1
	1 .	Net rental income or (loss)	-37,057.		·	STATEMENT 1
9	3 6	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 677,603.	-37,037.			DIAIEMENI I
Boyou	7	assets on line 6a O / / , O U S •  Capital gain net income (from Part IV, line 2)		569,824.	· · · · · · · · · · · · · · · · · · ·	
å	8	Net short-term capital gain		303,021.	DEOEN	-5
	9	Income modifications	-		RECEIV	<u>=</u> U
	10a	Gross sales less returns and allowances			<u></u>	
	b	Less Cost of goods sold			12 OCT 062	)20 <b>S</b>
	C	Gross profit or (loss)				<u> </u>
		Other income	534		L OGUEN.	3 1 7 7
_		Total Add lines 1 through 11	521,934.	569,919.		
	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
	14	Other employee salaries and wages Pension plans, employee benefits				
707	3 I	Legal fees				
7	) b	Accounting fees STMT 3	8,655.	0.		8,655.
- T	C	Other professional fees				0,000
	17	Interest				
ED MAY U 4 CU	18	Taxes STMT 4	4,000.	0.		0.
	19	Depreciation and depletion				
	20	Occupancy		··		
<b>#</b>	21	Travel, conferences, and meetings				
		Printing and publications Other expenses STMT 5	688.	0.		600
CA	23	Other expenses STMT 5 Total operating and administrative	000.			688.
GCANNED serating and Admin	24	expenses Add lines 13 through 23	13,343.	0.		9 343
(); ()	25	Contributions, gifts, grants paid	581,420.	·		9,343. 581,420.
	1	Total expenses and disbursements.	302,1200	,		332,1207
		Add lines 24 and 25	594,763.	0.		590,763.
	27	Subtract line 26 from line 12:				
	a	Excess of revenue over expenses and disbursements	-72,829.			
	b	Net investment income (if negative, enter -0-)		569,919.		
_		Adjusted net income (if negative, enter -0-)		•	N/A	p. 1
923	501 12	-17-19 LHA For Paperwork Reduction Act Notice	e, see instructions.		4 16	Form <b>990-PF</b> (2019)

AND ROBERT MORSE FAMILY FOUNDATION)

ΓĒ	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	·
느	\	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	16,920.	100,280.	100,280.
	2	Savings and temporary cash investments			
	3	Accounts receivable >	· · · · · · · · · · · · · · · · · · ·		
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶	_		i
		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			
ts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ä	10a	Investments - U.S and state government obligations		*···	
	b	Investments - corporate stock	156,189.	0.	0.
	٥	Investments - corporate bonds			
	11	tovestments - land, buildings, and equipment basis			1
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment; basis			
		Less accumulated depreciation			
	15	Other assets (describe ▶ )			-
	16	Total assets (to be completed by all filers - see the			
		instructions Also, see page 1, item I)	173,109.	100,280.	100,280.
	17	Accounts payable and accrued expenses		·	
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
jap		Mortgages and other notes payable			
_	22	Other liabilities (describe )			1
			_		
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow FASB ASC 958, check here			•
es		and complete lines 24, 25, 29, and 30.			
Balances	24	Net assets without donor restrictions			
Bal	25	Net assets with donor restrictions	- "		
Б		Foundations that do not follow FASB ASC 958, check here	ļ		
Ī		and complete lines 26 through 30.		_	
S O	26	Capital stock, trust principal, or current funds	0.	0.	
set	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	<u> </u>
As	28	Retained earnings, accumulated income, endowment, or other funds	173,109.	100,280.	<u> </u>
Net Assets or Fund	29	Total net assets or fund balances	173,109.	100,280.	<u> </u>
_		<b>-</b>	172 100	100 000	ı İ
	30	Total liabilities and net assets/fund balances	173,109.	100,280.	
Р	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	29		
	-	t agree with end-of-year figure reported on prior year's return)		1	173,109.
		amount from Part I, line 27a		2	-72,829.
		r increases not included in line 2 (itemize)	<del> </del>	3	0.
		ines 1, 2, and 3		4	100,280.
		eases not included in line 2 (itemize)	<del></del>	5	0.
6	Fotal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 29	] 6 ]	100,280.

82-6770075

MORSE FAMILY FOUNDATION (F/K/A STACEY Form 990-PF (2019) AND ROBERT MORSE FAMILY FOUNDATION) 82-6770075 Page 3 Capital Gains and Losses for Tax on Investment Income Part IV (b) How acquired P - Purchase D - Donation (a) List and describe the kind(s) of property sold (for example, real estate, (c) Date acquired (d) Date sold (mo., day, yr.) (mó., day, yr.) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) PUBLICLY TRADED SECURITIES 1a þ C d е (g) Cost or other basis (h) Gain or (loss) (f) Depreciation allowed (e) Gross sales price (or allowable) plus expense of sale ((e) plus (f) minus (g)) 677,603 107,779 569,824. a b C d е Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or (j) Adjusted basis (k) Excess of col. (i) Losses (from col. (h)) (i) FMV as of 12/31/69 as of 12/31/69 over col. (j), if any 569,824. b C d е If gain, also enter in Part I, line 7 569,824. 2 Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7 2 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). N/A If (loss), enter -0- in Part I, line 8 Part V | Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank. Yes X No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part Enter the appropriate amount in each column for each year; see the instructions before making any entries. (a) Base period years Calendar year (or tax year beginning in) (d)
Distribution ratio
(col. (b) divided by col. (c)) (b) (c) Adjusted qualifying distributions Net value of noncharitable-use assets 2018 231,898 159,408 1.454745 5,000 9,385. .53276 2017 2016 2015 2014 1.987510 2 Total of line 1, column (d) 2 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years .993755 3 4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5 88,833.

5 Multiply line 4 by line 3

6 Enter 1% of net investment income (1% of Part I, line 27b)

 ${\bf 7}\quad {\bf Add\ lines\ 5\ and\ 6}$ 

8 Enter qualifying distributions from Part XII, line 4
If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

\_\_\_\_

5

6

7

8

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88,278.

5,699.

93,977.

590,763.

See the Part VI instructions.

MORSE FAMILY FOUNDATION (F/K/A STACEY

Form 990-PF (2019) AND ROBERT MORSE FAMILY FO		1-6770075 Page 4
Part VI Excise Tax Based on Investment Income (Section	n 4940(a), 4940(b), 4940(e), or 494	3 - see instructions)
1.a Exempt operating foundations described in section 4940(d)(2), check here	and enter "N/A" on line 1.	
Date of ruling or determination letter (attach copy of lett		
<b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V, check t	here 🕨 🔀 and enter 1%	5,699.
of Part I, line 27b		
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations,	enter 4% of Part I, line 12, col. (b)	
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations	only; others, enter -0-)	
3 Add lines 1 and 2	3	<del></del>
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations	s only; others, enter -0-)	
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter	-0	5,699.
6 Credits/Payments:		
a 2019 estimated tax payments and 2018 overpayment credited to 2019	6a 4,000.	
<b>b</b> Exempt foreign organizations - tax withheld at source	6b 0.	
c Tax paid with application for extension of time to file (Form 8868)	6c 4,000.	1
d Backup withholding erroneously withheld	6d 0.	_
7 Total credits and payments. Add lines 6a through 6d		
8 Enter any penalty for underpayment of estimated tax. Check here X if Form 222		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount ove		
11 Enter the amount of line 10 to be: Credited to 2020 estimated tax	2,262. Refunded ► 1	1 0.
Part VII-A Statements Regarding Activities		==
1a During the tax year, did the foundation attempt to influence any national, state, or local	cal legislation or did it participate or intervene in	Yes No
any political campaign?		1a X
b Did it spend more than \$100 during the year (either directly or indirectly) for politica		1b X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	copies of any materials published or	
distributed by the foundation in connection with the activities.		احباحبا
c Did the foundation file Form 1120-POL for this year?		1c X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed du		
(1) On the foundation. ► \$ 0. (2) On foundation m		
e Enter the reimbursement (if any) paid by the foundation during the year for political	expenditure tax imposed on foundation	
managers. ▶ \$ 0.		احید حساحیا
2 Has the foundation engaged in any activities that have not previously been reported	to the IRS?	2 X
If "Yes," attach a detailed description of the activities.		
3 Has the foundation made any changes, not previously reported to the IRS, in its gov		
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the chang		3 X X
4a Did the foundation have unrelated business gross income of \$1,000 or more during		
<ul><li>b If "Yes," has it filed a tax return on Form 990-T for this year?</li><li>5 Was there a liquidation, termination, dissolution, or substantial contraction during the</li></ul>		N/A 4b X
	ie year?	5 X
If "Yes," attach the statement required by General Instruction T	tradical adhasis	
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) sat	ished either:	
By language in the governing instrument, or      By state legislates that off about the second of the second		
By state legislation that effectively amends the governing instrument so that no management the appropriate vectors and the programment of th	andatory directions that conflict with the state law	
remain in the governing instrument?	- II an are lake Dook III and YeV and Dook VIV	6 X 7 X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes	s," complete Part II, col. (c), and Part XV	7 X
On Forter the atotal to which the foundation with the back to make the contract of the contrac		
8a Enter the states to which the foundation reports or with which it is registered. See in WY	structions.	
	to the Attenney Consul (codescents)	<del></del>
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		8b X
9 Is the foundation claiming status as a private operating foundation within the meaning 2019 or the try year beginning in 20103 Coa the victorians for Part XIV. It is		
year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Ye		9 X 10 X
10 Did any persons become substantial contributors during the tax year? if "Yes," attach	a schedule listing their names and addresses	Form <b>990-PF</b> (2019)

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### MORSE FAMILY FOUNDATION (F/K/A STACEY

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Part 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?			
If "Yes," attach statement. See instructions	12		Х
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
Website address ► N/A			
14 The books are in care of ► THE FOUNDATION  Telephone no. ► 973-40	8-6	700	
Located at ►C/O UE LLC, 325 COLUMBIA TURNPIKE, FLORHAM PARK, ZIP+4 ►07			
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			П
and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
securities, or other financial account in a foreign country?	16	163	X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	"		<del>^</del>
foreign country			
Part VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a During the year, did the foundation (either directly or indirectly):		165	140
		•	1
			}
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)  a disqualified person?  Yes X No			~ ==
			1
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes X No			
(5) Transfer any income or assets to a disqualified person (or make any of either available			
for the benefit or use of a disqualified person)?			
(6) Agree to pay money or property to a government official? (Exception, Check "No"			
if the foundation agreed to make a grant to or to employ the official for a period after			
termination of government service, if terminating within 90 days.)			
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
Organizations relying on a current notice regarding disaster assistance, check here			- [
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
before the first day of the tax year beginning in 2019?	1c		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			ı
defined in section 4942(j)(3) or 4942(j)(5)):			
a At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			
6d and 6e) for tax year(s) beginning before 2019?			
If "Yes," list the years ,,,,,,,,,,		1	
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
statement - see instructions ) 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
<b>&gt;</b>			
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	1		1
during the year?			
b If "Yes," did it have excess business holdings in 2019 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			l
of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,	il		
Schedule C, to determine if the foundation had excess business holdings in 2019.) N/A	3b		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		X
For	m <b>990</b>	)-PF (	(2019)

Fait VII-B   Statements Regarding Activities for William	Form 4/20 Iviay be	nequirea (contin	uea)	IVI N-			
5a During the year, did the foundation pay or incur any amount to:				Yes No			
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es 🗶 No				
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indir						
any voter registration drive?	_		es X No				
(3) Provide a grant to an individual for travel, study, or other similar purposes		Y	es 🗶 No				
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section		( <del></del>				
4945(d)(4)(A)? See instructions							
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for							
the prevention of cruelty to children or animals?							
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un		in Regulations	-  -				
section 53.4945 or in a current notice regarding disaster assistance? See insti			N/A	5b			
Organizations relying on a current notice regarding disaster assistance, check							
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption							
expenditure responsibility for the grant?	T,	I/A Y	es L No				
If "Yes," attach the statement required by Regulations section 53.4945-5(d).							
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		<b>□</b>				
a personal benefit contract?		Y	es 🗶 No 📙	6b X			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?		<u> </u>	6b X			
If "Yes" to 6b, file Form 8870.			es X No				
7a At any time during the tax year, was the foundation a party to a prohibited tax		Y:		7.			
b If "Yes," did the foundation receive any proceeds or have any net income attrib			N/A	7b			
8 Is the foundation subject to the section 4960 tax on payment(s) of more than a	\$ 1,000,000 in remuneration o		es X No				
Part VIII Information About Officers, Directors, Trust	oos Foundation Ma						
Paid Employees, and Contractors	lees, Fouridation Mia	magers, migni	y				
1 List all officers, directors, trustees, and foundation managers and	their compensation.						
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to	(e) Expense account, other			
(a) Name and address	to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	account, other			
STACEY C. MORSE	TRUSTEE		compensation				
C/O UE LLC, 325 COLUMBIA TURNPIKE							
FLORHAM PARK, NJ 07932	1.00	0.	0.	0.			
ROBERT R. MORSE	TRUSTEE	1					
C/O UE LLC, 325 COLUMBIA TURNPIKE							
FLORHAM PARK, NJ 07932	1.00	0.	0.	0.			
		İ					
2 Compensation of five highest-paid employees (other than those in		enter "NONE."	F 7 8				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances			
NONE		ï					
· · · · · · · · · · · · · · · · · · ·				<u> </u>			
Total number of other employees paid over \$50,000			<u> </u>	990-PF (2019)			
			FORM	33U-PP (70110)			

Part VIII Information About Officers, Directors, Trustees, Foun Paid Employees, and Contractors (continued)	dation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, et	nter "NONE."	_
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		(4)
·		
Total number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities	,,	<u>▶</u> 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant st number of organizations and other beneficiaries served, conferences convened, research papers p	atistical information such as the produced, etc.	Expenses
1 <u>N/A</u>		
2		
3		
4		
Part IV.P. Common of December Polated Investments		
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
1 N/A		, , , , , , , , , , , , , , , , , , ,
2		
All other program-related investments. See instructions.	,	
Total. Add lines 1 through 3		0.
		Form <b>990-PF</b> (2019)

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1F	Minimum Investment Return (All domestic foundations must comple	te this part. Foreign four	ndations, se	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purpor	ses:		•
a	Average monthly fair market value of securities		1a	37,852.
b	Average of monthly cash balances			37,852. 52,334.
c	Fair market value of all other assets		1c	
d	d Total (add lines 1a, b, and c)		1d	90,186.
e	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation)	0.		
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	90,186.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instruction	ons)	4	1,353.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>,</b>	5	88,833.
6	Minimum investment return. Enter 5% of line 5		6	4,442.
ĮF,	Part: XII Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private foreign organizations, check here   ☐ and do not complete this part.)	te operating foundations an	d certain	
1	Minimum investment return from Part X, line 6		1	4,442.
2a	Tax on investment income for 2019 from Part VI, line 5	5,699.		
b	Income tax for 2019. (This does not include the tax from Part VI.)			
C	Add lines 2a and 2b		2c	5,699.
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.
	PartiXIII Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		10	500 763
	a Expenses, contributions, gifts, etc total from Part I, column (d), line 26 b Program-related investments - total from Part IX-B		1a	590,763.
2 2		200	1b 2	<u> </u>
3	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purpo Amounts set aside for specific charitable projects that satisfy the:	J262		
_				
_	a Suitability test (prior IRS approval required)		3a   3b	
_ b		4		590,763.
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line	ne 4	4	330,103.
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	5,699.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		6	585,064.
U	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	a whather the foundation o		
	4940(e) reduction of tax in those years.	ig wilether the loundation (	ווו זטו כאווונגען	e seriidii

Form **990-PF** (2019)

Part XIII Undistributed Income (see instructions) (a) (b) (c) (d) Corpus Years prior to 2018 2018 2019 1 Distributable amount for 2019 from Part XI, 0. 2 Undistributed income, if any, as of the end of 2019 0 a Enter amount for 2018 only b Total for prior years: 0 3 Excess distributions carryover, if any, to 2019: a From 2014 **b** From 2015 c From 2016 5,000. d From 2017 223,928. e From 2018 f Total of lines 3a through e 228,928. 4 Qualifying distributions for 2019 from 590,763 Part XII, line 4: ►\$ a Applied to 2018, but not more than line 2a 0 b Applied to undistributed income of prior 0 years (Election required - see instructions) c Treated as distributions out of corpus 0 (Election required - see instructions) d Applied to 2019 distributable amount 0. 590,763. e Remaining amount distributed out of corpus Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount 0. 0. must be shown in column (a)) 6 Enter the net total of each column as indicated below: 819,691 a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract 0 line 4b from line 2b 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 0. assessed d Subtract line 6c from line 6b. Taxable 0. amount - see instructions e Undistributed income for 2018. Subtract line 0 . 4a from line 2a. Taxable amount - see instr. f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must 0. be distributed in 2020 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 0 8 Excess distributions carryover from 2014 0 not applied on line 5 or line 7 Excess distributions carryover to 2020. 819,691 Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2015 b Excess from 2016 5,000. c Excess from 2017 223,928. d Excess from 2018 590,763 e Excess from 2019

923581 12-17-19

### MORSE FAMILY FOUNDATION (F/K/A STACEY

AND ROBERT MORSE FAMILY FOUNDATION) Form 990-PF (2019) 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 2019, enter the date of the ruling <4942(1)(5) b Check box to indicate whether the foundation is a private operating foundation described in section 4942(1)(3) or Tax year Prior 3 years 2 a Enter the lesser of the adjusted net (a) 2019 (b) 2018 (c) 2017 (d) 2016 (e) Total income from Part I or the minimum investment return from Part X for each year listed **b** 85% of line 2a c Qualifying distributions from Part XII, line 4, for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon. a "Assets" alternative test - enter: (1) Value of all assets (2) Value of assets qualifying under section 4942(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 séction 4942(j)(3)(B)(iii) 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 🕨 💹 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:

Form **990-PF** (2019)

AND ROBERT MORSE FAMILY FOUNDATION) 82-6770075 Form 990-PF (2019) Page 11 Part XV Supplementary Information (continued) 3. Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation status of Purpose of grant or contribution show any relationship to Amount any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year ALEX'S LEMONADE STAND FOUNDATION NONE PUBLIC CHARITY GENERAL UNRESTRICTED 111 PRESIDENTIAL BLVD, SUITE 203 BALA CYNWYD, PA 19004 5,000. ANDREW MOREHOUSE TRUST ASSOCIATION NONE PUBLIC CHARITY GENERAL UNRESTRICTED INC 1 CENTURY TOWER WIGGIN B DANA POBOX NEW HAVEN, CT 06508 54. BREARLEY SCHOOL NONE PUBLIC CHARITY GENERAL UNRESTRICTED 610 EAST 83RD STREET NEW YORK, NY 10028 2,300. BROOKLYN MUSEUM NONE PUBLIC CHARITY GENERAL UNRESTRICTED 200 EASTERN PARKWAY BROOKLYN, NY 11238 1,500. CENTER FOR THE ARTS NONE PUBLIC CHARITY GENERAL UNRESTRICTED P.O. BOX 860 JACKSON, WY 10024 5,796. SEE CONTINUATION SHEET(S) Total **▶** 3a 581,420. b Approved for future payment NONE

٥.

**▶** 3b

Total

# MORSE FAMILY FOUNDATION (F/K/A STACEY AND ROBERT MORSE FAMILY FOUNDATION)

Part XV Supplementary Information 3 Grants and Contributions Paid During the Y				
. Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	,louit
CHILDREN'S BRAIN TUMOR FOUNDATION,	NONE	DIIDI TO CUADIMY	GENERAL UNRESTRICTED	
INC	NONE	FORDIC CHARTII	SENERAL ONRESTRICTED	
1460 BROADWAY				
NEW YORK, NY 10036				500
		,		
CLIMB WYOMING	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
1001 W 31ST STREET ·				
CHEYENNE, WY 82001				1,000
COLLEGIATE SCHOOL INC	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
260 WEST 78TH STREET	,			
NEW YORK, NY 10024				2,500
COMMUNITY FOUNDATION OF JACKSON HOLE	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
P.O. BOX 574				•
JACKSON, WY 83001				33,000
COVENANT HOUSE	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
461 EIGHTH AVENUE				
NEW YORK, NY 10001				1,135
CREATIVE TIME, INC	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
59 EAST 4TH STREET, 6TH FLOOR		,		
NEW YORK, NY 10003	<u> </u>			1,000
		Ì		
CURE FOR BLINDNESS INC	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
1680 MICHIGAN AVE STE 700				
MIAMI BEACH, FL 33139				500
DANCERS' WORKSHOP	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
240 S. GLENWOOD, 2ND FLOOR JACKSON, WY 83001				EOO
OACKSON, WI 03001	-	·-		500
DEERFIELD ACADEMY 7 BOYDEN LANE	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
/ BOYDEN LANE DEERFIELD, MA 01342				2 750
				2,750
FRIENDS OF PATHWAYS	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
20 E SIMPSON AVE JACKSON, WY 83001				500
Total from continuation sheets	<u> </u>	1	l	566,770

3 Grants and Contributions Paid During the Y				
. Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
00.1VD ####################################				
GRAND TETON NATIONAL PARK FOUNDATION P.O. BOX 249	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
MOOSE, WY 83012			,	5,00
HABITAT FOR HUMANITY GREATER TETON	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
AREA				
850 W. BROADWAY JACKSON, WY 83001				99
HARLEM RBI DBA DREAM	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
1991 SECOND AVENUE				
NEW YORK, NY 10029				2,50
HARVARD UNIVERSITY	NONE	DUDI TO GUADITHY	DENERAL INDEGRATORES	
124 MOUNT AUBURN STREET	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
CAMBRIDGE, MA 02138-5795				205,00
JACKSON HOLE HISTORICAL SOCIETY AND	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
MUSEUM				
PO BOX 1005 JACKSON, WY 83001				EO
SILKBON, NI USUUI	<u> </u>			50
JACKSON HOLE LAND TRUST	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
185 E HANSEN AVE				
JACKSON, WY 83001	-			1,00
MEMORIAL SLOAN KETTERING CANCER	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
CENTER				
1275 YORK AVE NEW YORK, NY 10065				45
USEUM OF THE CITY OF NY	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
L220 5TH AVE NEW YORK, NY 10029				2 50
1014, 11 10025				2,50
NETWORK FOR GOOD, INC.	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
1140 CONNECTICUT AVE NW, STE 700				
WASHINGTON, DC 20036				50
NEW YORK WEILL CORNELL MEDICAL CENTER	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
FUND, INC				
575 LEXINGTON AVE, 9TH FL NEW YORK, NY 10022				30
Total from continuation sheets				

Part XV Supplementary Informati				
3 Grants and Contributions Paid During th				
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	CONTRIBUTION	
PARK AVENUE ARMORY	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
643 PARK AVENUE NEW YORK, NY 10065				2 500
				2,500
PAYPAL GIVING FUND	NONE	PUBLIC CHARTTY	GENERAL UNRESTRICTED	
1250 I STREET NW, SUITE 1202	[10-1-2			
WASHINGTON, DC 20005				55
PREP FOR PREP	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
328 W 71ST ST				
NEW YORK, NY 10023				5,000.
BUODE TOTAND BOAD BYINNERG	NOVE.			
RHODE ISLAND ROAD RUNNERS 173 HEIDI DR	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
PORTSMOUTH, RI 02871				151,
ROBIN HOOD FOUNDATION	NONE	DIIBI.TC CHARTTY	GENERAL UNRESTRICTED	
826 BROADWAY, 9TH FLOOR	NONE	FOBBLE CHARTIT	SEMERAL UNRESTRICTED	
NEW YORK, NY 10003				127.
SACRED HEART UNIVERSITY	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
5151 PARK AVE				
FAIRFIELD, CT 06825				300.
SCHOOL OF AMERICAN BALLET INC 70 LINCOLN CENTER PLAZA	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
NEW YORK, NY 10023				84,850.
SCO FAMILY OF SERVICES	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
96 S. 9TH ST				
BROOKLYN, NY 11249				100.
anna an nua-				
SEEDS OF PEACE 370 LEXINGTON AVE STE 1201	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
NEW YORK, NY 10017				1,035.
				-,,
SHATTERPROOF	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
101 MERRITT 7 1ST FLOOR				
NORWALK, CT 06851				630.
Total from continuation sheets			1	

Part XV Supplementary Information  Grants and Contributions Paid During the				
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	Amount
TETON COUNTY SEARCH AND RESCUE	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
FOUNDATION				
PO BOX 1063				
JACKSON, WY 83001				1,000
TETON RAPTOR CENTER	NONE	DITRITO CUARTINA	GENERAL UNRESTRICTED	
PO BOX 1805,5050 W. HWY 22	HONE	FODEIC CHARITI	SENERAL UNRESTRICTED	
WILSON, WY 83014				500
TETON YOUTH & FAMILY SERVICES	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
PO BOX 2631 JACKSON, WY 83001				1,000
,				1,000
THE DOE FUND	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
232 EAST 84TH STREET				
NEW YORK, NY 10028	<del> </del>	-		16,000
THE FOUNDATION FOR A MINDFUL SOCIETY	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
INC				
1776 I ST. NW 9TH FL				
WASHINGTON, DC 20006				1,000
TUFTS UNIVERSITY	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
80 GEORGE STREET, SUITE 100-3 MEDFORD, MA 02155				70,000
,	· · · · -			,
WHITNEY MUSEUM OF AMERICAN ART	NONE	DIIBLIC CUARTOV	GENERAL UNRESTRICTED	
99 GANSEVOORT ST	NONE	FOBBIC CHARIII	GENERAL UNRESTRICTED	
NEW YORK, NY 10014				15,000
WORLD WILDLIFE FUND, INC	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
1250 24TH ST NW				
WASHINGTON, DC 20037		-		100
YALE UNIVERSITY	NONE	DUDI TO OVERTON	CEMEDAL INDECEDIOS	
PO BOX 2038	NONE	FUBLIC CHARITY	GENERAL UNRESTRICTED	
NEW HAVEN, CT 06521-2038				104,845
YELLOWSTONE FOREVER	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
PO BOX 117				205
YELLOWSTONE NATIONAL PARK, WY 82190  Total from continuation sheets				285

# MORSE FAMILY FOUNDATION (F/K/A STACEY AND ROBERT MORSE FAMILY FOUNDATION)

Part XV   Supplementary Information				
3 Grants and Contributions Paid During the Y	ear (Continuation)			
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	
YOUTH INC	NONE	PUBLIC CHARITY	GENERAL UNRESTRICTED	
535 8TH AVENUE, SUITE 1400				
NEW YORK, NY 10018		<del></del>	· · · · · ·	167.
			· <del></del>	<u> </u>
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				`
Total from continuation sheets	1	L		<del> </del>

82-6770075 Page 12

Enter gross amounts unless otherwise indicated.	Uniterateu	business income		Excluded by section 512, 513, or 514 (e)	
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a	code		1000		
b					
	_				
· · · · · · · · · · · · · · · · · · ·	<del></del>		1		
d e					
f	<del></del>		t		
g Fees and contracts from government agencies			t		
2 Membership dues and assessments					
3 Interest on savings and temporary cash					····
investments					
4 Dividends and interest from securities			14	95.	
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			Ĺ l		
8 Gain or (loss) from sales of assets other					
than inventory			18	-37,057.	
9 Net income or (loss) from special events			l l		
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a	_				
b	_				
C					
d					
e	_			26.060	
2 Subtotal. Add columns (b), (d), and (e)		0.		-36,962.	36 06
3 Total. Add line 12, columns (b), (d), and (e)	- \			13	-36,962
See worksheet in line 13 instructions to verify calculations	5.)		(omn	Durnosas	
	es to the Acco	mnlishment of Fr		i uiposes	
Part XVI-B Relationship of Activitie			•	utad (maartaatly to the secom	nlighment of
Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which	income is reported in	column (e) of Part XVI-A	•	uted importantly to the accom	plishment of
Part XVI-B Relationship of Activitie	income is reported in	column (e) of Part XVI-A	•	uted importantly to the accom	plishment of
Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which	income is reported in	column (e) of Part XVI-A	•	uted importantly to the accom	plishment of
Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which	income is reported in	column (e) of Part XVI-A	•	uted importantly to the accom	plishment of
Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which	income is reported in	column (e) of Part XVI-A	•	uted importantly to the accom	plishment of
Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which	income is reported in	column (e) of Part XVI-A	•	uted importantly to the accom	plishment of
Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which	income is reported in	column (e) of Part XVI-A	•	uted importantly to the accom	plishment of
Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which	income is reported in	column (e) of Part XVI-A	•	uted importantly to the accom	plishment of
Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which	income is reported in	column (e) of Part XVI-A	•	uted importantly to the accom	plishment of
Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which	income is reported in	column (e) of Part XVI-A	•	uted importantly to the accom	plishment of
Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which	income is reported in	column (e) of Part XVI-A	•	uted importantly to the accom	plishment of
Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which	income is reported in	column (e) of Part XVI-A	•	uted importantly to the accom	plishment of
Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which	income is reported in	column (e) of Part XVI-A	•	uted importantly to the accom	plishment of
Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which	income is reported in	column (e) of Part XVI-A	•	uted importantly to the accom	plishment of
Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which	income is reported in	column (e) of Part XVI-A	•	uted importantly to the accom	plishment of
Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which	income is reported in	column (e) of Part XVI-A	•	uted importantly to the accom	plishment of
Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which	income is reported in	column (e) of Part XVI-A	•	uted importantly to the accom	plishment of
Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which	income is reported in	column (e) of Part XVI-A	•	uted importantly to the accom	plishment of
Part XVI-B Relationship of Activitie  Line No. Explain below how each activity for which	income is reported in	column (e) of Part XVI-A	•	uted importantly to the accom	plishment of

Part AVII	Information H Exempt Orgai		isters to a	and Transactions	and Relations	hips With Nonch	aritable	•	
1 Did the d	<del></del>		of the follows	ng with any other organiza	tion described in sec	tion 501(c)		Yes	No
				g to political organizations		11011 00 1(0)			
· ·	s from the reporting found	•		• .	,				1
(1) Casi	, ,			ga			1a(1)		X
(2) Othe							1a(2)	$\vdash$	X
<b>b</b> Other tra							1.5(-/		
(1) Sale	s of assets to a noncharit	able exempt organiza	ation				1b(1)		X
	chases of assets from a ne						1b(2)		X
• •	tal of facilities, equipment	•	o. gaa				1b(3)		X
	nbursement arrangements	•					1b(4)		X
	ns or loan guarantees						1b(5)		X
	ormance of services or m	embership or fundra	ising solicitatio	ons			1b(6)		X
	of facilities, equipment, m	-	-				1c		X
		-		edule. Column (b) should a	always show the fair	market value of the goods		ets.	
				ed less than fair market va				,	
	d) the value of the goods,						•		
(a)Line no	(b) Amount involved	(c) Name o	f noncharitabl	e exempt organization	(d) Descriptio	n of transfers, transactions, an	nd sharing ar	rangeme	nts
			N/A	-					
								-	
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		1		· · ·		· · · · · · · · · · · · · · · · · · ·			
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ın section	indation directly or indirectly or indirectly 501(c) (other than section omplete the following sch	on 501(c)(3)) or in se		or more tax-exempt organ	nizations described		Yes	X	] No
	(a) Name of or			(b) Type of organization	<u> </u>	(c) Description of relation	nship		
	N/A	-			<u> </u>		· · · · · · · · · · · · · · · · · · ·		
		<del></del>			_				
					·				
-				<del></del>	<del> </del>				
Sign Here	r penalties of perjury, I declare elief, it is true, correct, and co	that I have examined the mplete Declaration of profile Muldon	is return, includir reparer (other tha	ng accompanying schedules an in taxpayer) is based on all info	d statements, and to the rmation of which prepare TRUST!	r has any knowledge	May the IRS of eturn with the hown below	prepare	er 🖠
Sig	nature of officer or trustee			Date 7	Title				
	Print/Type preparer's n	ame	Preparer's s	ignature	Date	Check if PTIN	l		
<b>5</b>	_					self- employed			
Paid	DAVID S. U			S. UNTRACHT	09/08/20		00161		
Preparer	Firm's name VNT	'RACHT EAR	STA FFC			Firm's EIN ► 22-3	37548	56	
Use Only	F								
				PIKE, SUITE	202				
	j FI	ORHAM PAR	KK, NJ	07932		Phone no. 973-4			
							Form <b>990</b>	)-PF(	2019)

#### 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.

➤ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2019

Name of the organization

MORSE FAMILY FOUNDATION (F/K/A STACEY AND ROBERT MORSE FAMILY FOUNDATION)

Employer identification number

82-6770075

Organization type (check one)							
Filers of	:	Section:					
Form 99	0 or 990-EZ	501(c)( ) (enter number) organization					
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
		527 political organization					
Form 99	0-PF	X 501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
	-	covered by the <b>General Rule</b> or a <b>Special Rule</b> .  7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions					
General	Rule						
X		filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special	Rules						
	sections 509(a)(1) a any one contributo	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 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 r, 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; line 1 Complete Parts I and II					
	year, total contribu	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the ty to children or animals. Complete Parts I, II, and III.					
	year, contributions is checked, enter h purpose Don't cor	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box were the total contributions that were received during the year for an exclusively religious, charitable, etc., inplete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively e, etc., contributions totaling \$5,000 or more during the year.					
but it mi	ust answer "No" on	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), 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 the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).					

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Name of organization

MORSE FAMILY FOUNDATION (F/K/A STACEY AND ROBERT MORSE FAMILY FOUNDATION)

Employer identification number

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	al space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	STACEY C. MORSE  C/O UE LLC, 325 COLUMBIA TURNPIKE  FLORHAM PARK, NJ 07932	\$136,415.	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
2	STACEY C. MORSE  C/O UE LLC, 325 COLUMBIA TURNPIKE  FLORHAM PARK, NJ 07932	\$	Person Payroll Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	STACEY C. MORSE  C/O UE LLC, 325 COLUMBIA TURNPIKE  FLORHAM PARK, NJ 07932	\$ 76,154.	Person Payroll Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	STACEY C. MORSE  C/O UE LLC, 325 COLUMBIA TURNPIKE  FLORHAM PARK, NJ 07932	\$ 78,829.	Person Payroll Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	STACEY C. MORSE  C/O UE LLC, 325 COLUMBIA TURNPIKE  FLORHAM PARK, NJ 07932	\$ <u>148,155.</u>	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
6	STACEY C. MORSE  C/O UE LLC, 325 COLUMBIA TURNPIKE  FLORHAM PARK, NJ 07932	\$ 105,387.	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization MORSE FAMILY FOUNDATION (F/K/A STACEY AND ROBERT MORSE FAMILY FOUNDATION)

Employer identification number

Part I	Contributors (see instructions) Use duplicate copies of Part I if addition	al space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	ROBERT R. MORSE  C/O UE LLC, 325 COLUMBIA TURNPIKE  FLORHAM PARK, NJ 07932	\$\$	Person X 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 Payroll Oncash (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
		\$	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 Payroll Noncash (Complete Part II for noncash contributions)

Name of organization MORSE FAMILY FOUNDATION (F/K/A STACEY AND ROBERT MORSE FAMILY FOUNDATION)

Employer identification number

Part II	Noncash Property (see instructions) Use duplicate copies of F	Part II if additional space is needed	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	394.000 SHS. NETFLIX INC.		
$\frac{1}{2}$			
Ì		136,415.	05/14/19
(a) No.	(b)	(c)	(d)
rom Part I	Description of noncash property given	FMV (or estimate) (See instructions)	Date received
	132.000 SHS. OKTA INC CL A.		
$\frac{2}{}$		<del></del>	
		\$ 13,531.	05/14/19
(a) No.	(b)	(c)	(d)
rom art I	Description of noncash property given	FMV (or estimate) (See instructions)	Date received
	2230.000 SHS. ENPHASE ENERGY.		<del>_</del>
3		<del></del>	
		\$ 76,154.	08/22/19
(a) No.	(b)	(c)	(d)
rom art I	Description of noncash property given	FMV (or estimate) (See instructions)	Date received
	585 SHS. OKTA INC CL A.		
$\frac{4}{}$		<del></del>	
		\$ 78,829.	08/22/19
(a)		(c)	
No.	(b)  Description of noncash property given	FMV (or estimate) (See instructions)	(d) Date received
art I	2125.000 SHS. LGI HOMES, INC.	, ,	
_5			
		\$\$	12/30/19
(a)		(c)	
No. rom art I	(b)  Description of noncash property given	FMV (or estimate) (See instructions )	(d) Date received
	910.000 SHS. OKTA INC CL A.		
6			
		\$105,387.	12/30/19

Name of organization

**Employer identification number** 

### MORSE FAMILY FOUNDATION (F/K/A STACEY

Part III	OBERT MORSE FAMILY FOUN		82-6770075 section 501(c)(7), (8), or (10) that total more than \$1,000 for the y					
	from any one contributor. Complete columns (a)	a) through (e) and the following line er	intry. For organizations					
	completing Part III, enter the total of exclusively religious,	, charitable, etc., contributions of \$1,000 or	r less for the year (Enterthis info once)					
7-1 M-	Use duplicate copies of Part III if additiona	l space is needed						
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
Part I	(b) Furpose of gift	(c) Use of gift	(d) Description of now gift is field					
<del></del>								
		(a) Transfer of di						
ļ	(e) Transfer of gift							
	<b>7</b>	1710						
	Transferee's name, address, a	ind ZIP + 4	Relationship of transferor to transferee					
(a) No. from	(h) D	(-)	400					
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
		İ						
··· <del>·</del>								
		L						
		(e) Transfer of git	π					
}	Transferee's name, address, a	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, a	ind ZIP + 4	Relationship of transferor to transferee					
ļ								
(a) No. from		1						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
			······································					
i								
			<u> </u>					
		(e) Transfer of git	ft					
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee					
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		ı						

FORM 990-PF	GAIN OR	(LOSS) FRO	M SALE O	F ASSE	TS	STA	TEMENT
(A) DESCRIPTION OF PROP	PERTY			MANN ACQUI		ATE JIRED	DATE SOL
MORGAN STANLEY - PU	JBLICLY TRA	DED SECURIT	IES 1	PURCHA	SED		
(B) GROSS		C) T OR E	(D) XPENSE OI	<b>.</b>	(E)		(F)
	CE OTHER		SALE		EPREC.	GAIN	OR LOSS
677,6	503.	714,660.	(	0.	0.		-37,057
CAPITAL GAINS DIVII	ENDS FROM	PART IV					0
TOTAL TO FORM 990-E	PF, PART I,	LINE 6A			•		-37,057
				1			
FORM 990-PF	DIVIDEND	S AND INTER	EST FROM	SECUR	ITIES	STA	TEMENT
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVI	A) ENUE BOOKS			(C) ADJUSTED NET INCOM
MORGAN STANLEY	95	•	0.	95.		95.	
TO PART I, LINE 4	95	•	0.	95.		95.	,, , , , , , , , , , , , , , , , , , , ,
							· ···
FORM 990-PF		ACCOUNTI	NG FEES			STA	TEMENT
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTE NET INCO		(D) CHARITABLI PURPOSES
ACCOUNTING FEES	_	8,655.		0.			8,655
TO FORM 990-PF, PG	1, LN 16B	8,655.		0.			8,655
	_	<del></del>					· · · · · · · · · · · · · · · · · · ·

FORM 990-PF	TAX	ES	FATEMENT 4	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FEDERAL EXCISE TAXES	4,000.	0.		0.
TO FORM 990-PF, PG 1, LN 18	4,000.	0.		0.
FORM 990-PF	OTHER EXPENSES		STATEMENT	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PROCESSING FEES ADMINISTRATIVE EXPENSES	22. 666.	0.		
TO FORM 990-PF, PG 1, LN 23	688.	0.	1.70	688.