/ C?	F)
7	G /
(3.) U
1.	Form

D'IT		 -	romat Organization	Due	sinoso Inc		_		328	16718
56 Form	990-T	=>	empt Organization and proxy tax)					""	ОМВ	No 1545-0687
9		For cale	ndar year 2017 or other tax year begin			•	• -	20	G	0017
Depart	emer# of the Treasury		Go to www.irs.gov/Form990						4	
•	l Revenue Service	▶ Do	not enter SSN numbers on this form a	s it ma	y be made public	If your orga	anization is a 501	(c)(3)	Open to 501(c)(3	Public Inspection for Organizations Only
A _	Check box if address changed		Name of organization (Check bo	ox if nai	ne changed and se	e instruction	s)			fication number see instructions)
		_						(===	,	•
	empt under section	Deint	THE MAGIS CHARITABLE					٠, ,	060600	
X	501(C) Ø 3)	Print or	Number, street, and room or suite no	faPO	box, see instruction	ns			263533	ess activity codes
	408(e) 220(e)	1,700	POUNDAMION COURCE E	11 C	TIVEDCIDE	D.D.			nstructions)	less activity codes
-	408A530(a)		FOUNDATION SOURCE 50 City or town, state or province, country					-		
	529(a) ok value of all assets	1	WILMINGTON, DE 1980		= :	0000		5259	190	
	end of year	F Gro	up exemption number (See instructi							
	7,556,888.		ck organization type X 501			501(c) trust	401(a)	trust	Other trust
H D			rimary unrelated business activity							
			corporation a subsidiary in an affili					,	▶	Yes X No
			identifying number of the parent coi	-	•	•				
			FOUNDATION SOURCE			Telephor	ne number 🕨 8	00-839	-1754	
Par	t I Unrelated	Trade o	or Business Income		(A) Inco	me	(B) Expe	nses		(C) Net
1a^	Gross receipts or	sales								1
b	Less returns and allow	ances	c Balance ▶	1c						
2	Cost of goods so	ld (Sched	ule A, line 7)	2						-
3	Gross profit Sub	tract line	2 from line 1c	3	-					
4 a	Capital gain net i	ncome (a	ittach Schedule D)	4a						
b	Net gain (loss) (Fi	orm 4797,	Part II, line 17) (attach Form 4797)	4b		6,672.				<u>5,672.</u>
C	Capital loss dedu	iction for t	rusts	4c						
5	Income (loss) from	partnershi	ps and S corporations (attach statement)	5	-3	3,112.				-3,112.
6	Rent income (Sch	nedule C)		6						
7	Unrelated debt-fi	nanced in	come (Schedule E)	7						
8	Interest, annuities, roya	alties, and re	nts from controlled organizations (Schedule F)	8						<u> </u>
9	Investment income of	a section 50	1(c)(7), (9), or (17) organization (Schedule G)	9	ļ					
10	Exploited exempt	activity i	ncome (Schedule I)	10			_			
11	Advertising incor	ne (Sched	dule J)	11						
12	•		ctions, attach schedule)	12		5.60			 -	2.560
13			ough 12			2,560.	<u> </u>	/ C	f	2,560.
Par			Taken Elsewhere (See insti				•	(Except	tor cont	ributions,
			be directly connected with t					— T.:	7	
14	•		directors, and trustees (Schedule K)						_	
15									1	
16	=									
17										
18	•	•								
19			See instructions for limitation rules)							_
20 21						21				
22	Less depreciation	acii ruiii n claimed	on Schedule A and elsewhere on re		ED O	22a		22	<u> </u>	
23	•					.				
24	Contributions to	deferred	compensation plans	19	2018:[兴]:			· · · —		<u> </u>
25			s		1~1			· · · —		
26				CN						
27	Excess readershi	n costs (S	Schedule I)		<u> </u>					
28			schedule)							 .
29			es 14 through 28						1	
30			ole income before net operating							2,560.
31			ion (limited to the amount on line 3)						_	2,560.
32	, ,		e income before specific deduction							
22			rally \$1,000, but see line 33 instruc			•		22		

Unrelated business taxable income. Subtract line 33 from line 32 If line 33 is greater than line 32,

34

enter the smaller of zero or line 32.

Rar	t III	Tax Computation							
35		zations Taxable as Corporations. See	instructions for tax com	putatio	n Controlled gr	oup			
	_	s (sections 1561 and 1563) check here	_		-				
а		our share of the \$50,000, \$25,000, and \$9		ackets	(in that order)				
-	(1)[\$	(2) \$	(3) \$						
h		ganization's share of (1) Additional 5% tax (not		\$					
~	(2) Add	tional 3% tax (not more than \$100,000)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$					
	Income	tax on the amount on line 34				▶ 35c			
36	Trusts		tructions for tax compl			1-			
	the amo	ount on line 34 from Tax rate schedule or	Schedule D (Form 10	041)		▶ 36	j		
37		ax. See instructions				1			
38	-	ive minimum tax				I			
39		Non-Compliant Facility Income. See instructions							
40		dd lines 37, 38 and 39 to line 35c or 36, which							
Par	t IV	Tax and Payments			•	•			
		tax credit (corporations attach Form 1118, trus	ts attach Form 1116)	41a					
		redits (see instructions)			-				
		business credit Attach Form 3800 (see instruct							
d	Credit for	or prior year minimum tax (attach Form 8801 or	8827)	41d					
e	Total cr	edits. Add lines 41a through 41d				41e			
42		t line 41e from line 40							
43	Other tax	kes Check if from Form 4255 Form 8611	Form 8697 Form 886	66 🔙	Other (attach sched	ule) . 43			
44	Total ta	x. Add lines 42 and 43				44			0.
45 a		its A 2016 overpayment credited to 2017							
		itimated tax payments							
		osited with Form 8868							
		organizations Tax paid or withheld at source (si							
		withholding (see instructions)							
f		or small employer health insurance premiums (A							
g	Other c	redits and payments Form 24	39						
	F	orm 4136 Other	Total ▶	45g					
46		ayments Add lines 45a through 45g				46			
47	Estimat	ed tax penalty (see instructions) Check if Form	2220 is attached			47			
48	Tax due	. If line 46 is less than the total of lines 44 and	47, enter amount owed			. ▶ 48			
49	Overpa	yment. If line 46 is larger than the total of lines	44 and 47, enter amount overp	aid		. ▶ 49			
50	Enter the	amount of line 49 you want Credited to 2018 esting	nated tax		Refunde	d ► 50			
Par		Statements Regarding Certain Ac							
51	At any	time during the 2017 calendar year, did	the organization have an ir	nterest	in or a signatu	re or other	authority	Yes	No
		financial account (bank, securities, or oth			-				
	FinCEN	Form 114, Report of Foreign Bank and	Financial Accounts If YES	3, ente	er the name of	the foreig	n country		
	here 🕨								X
52	During f	the tax year, did the organization receive a distr	ibution from, or was it the gra	ntor of	, or transferor to, a	foreign trus	st?		Х
	If YES, s	ee instructions for other forms the organization	may have to file						
53		ne amount of tax-exempt interest received or acc						إ	Ļ
	tn	nder penalties of perjury I declare that I have examined to be correct, and complete Declaration of preparer (other than to	his return, including accompanying so xpayer) is based on all information of wh	hedules : ich prepa	and statements, and to arer has any knowledge	the best of	my knowledge	and beli	ief, it is
Sigi	ر ا	John Mullman		esida		May the	IRS discuss	this i	return
Her	_		1/1/10		~~		preparer sh		7
	S	gnature of/officer	Date Title	— 		(see instruc	tions)? X Ye	es	No
Paid	1	Print/Type preparer's name	Preparer's signature		ate	Check	If PTIN		
	arer	JEFFREY D HASKELL	JEFFREY D HASKELL		11/06/2018	self-employe			U
	Only	Firm's name FOUNDATION SOURCE	010		11040		5103983		
		Firm's address ► ONE HOLLOW LN, STE	212, LAKE SUCCESS	, NY	11042	Phone no	800-839		
							Form 99	3U-1	(2017)

Page 3

Schedule A - Cost of Go	oods Sold. En	ter method	of invento	ry valuation	>		
1 Inventory at beginning of y						ar	6
2 Purchases	2					ld. Subtract line	
3 Cost of labor	3			6 from	line 5 En	ter here and in	
4a Additional section 263A co	osts			Part I, line	2		7
(attach schedule)	4a			8 Do the	rules of	section 263A (w	vith respect to Yes No
b Other costs (attach schedu	ile) . 4b					or acquired for	
5 Total. Add lines 1 through				to the org	anization?		X_
Schedule C - Rent Income (see instructions)	e (From Real P	roperty a	nd Persor	nal Property	Leased V	Vith Real Prope	rty)
1 Description of property							
(1)					_		
(2)							
(3)		1					
(4)							
	2 Rent recei	ved or accrue	ed			_	
(a) From personal property (if the for personal property is more th more than 50%)	an 10% but not	percenta	ige of rent for	personal property personal property based on profit of	y exceeds		rectly connected with the income (a) and 2(b) (attach schedule)
(1)							
(2)							
(3)							
(4)							
Total		Total				(b) Total deduction	-ma
(c) Total income. Add totals of chere and on page 1, Part I, line 6	, ,					Enter here and or Part I, line 6, colu	n page 1,
			e instruction	ons)			
	2 Gross income from or debt-financed property allocable to debt-financed property						
1 Description of del	ot-financed property	2 Gross income from or allocable to debt-financed property allocable to debt-financed (a) Straight line depreciation (b) Other deductions					
	2 Gross income from or allocable to debt-financed property tion of debt-financed property allocable to debt-financed property (a) Straight line depreciation (b) Other deductions						
(1)							
(2)							
(3)	·- <u></u>						
(4)					ļ		
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5 Average adju of or alloca debt-financed (attach sche	ble to property	4 0	Column divided column 5		income reportable n 2 x column 6)	8 Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)				%			
(2)				%			
(3)				%			
(4)				%			
Totals					Enter her Part I, lir	re and on page 1, ne 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)
Total dividends-received deduct	nons included in co	olumn 8				▶	

Schedule F - Interest, Annu	iities, Royaities			olled Org			itions (see	Instruction	15)	
1 Name of controlled organization	2. Employer identification numb	er 3 Ne	et unrelated s) (see instr	income	4 Total		ed included	column 4 tha in the control on's gross inc	lling	6 Deductions directly connected with income in column 5
(1)									\longrightarrow	
(2)									\longrightarrow	
(3)									\longrightarrow	
(4)										
Nonexempt Controlled Organiz					_	140	and of anti-ma	0.45-04.10		Doductions directly
7 Taxable Income	8 Net unrelated in (loss) (see instruc	l.		al of specific nents made		ıncl	Part of column uded in the cor nization's gross	ntrolling		Deductions directly nected with income in column 10
(1)										
(2)										
(3)										
(4)							d columns 5 a	-140		d columns 6 and 11
Totals	come of a Sec		:)(7), (9), or (17 3 Deduc		Pai		ructions)		er here and on page 1, nt I, line 8, column (B)
1 Description of income	2. Amount of	income		directly cor (attach sch	nected			l-asides schedule)	_	and set-asides (col 3 plus col 4)
(1)						-				
(2)	 -								-+	
(3) (4)									-+	<u> </u>
Totals ▶ Schedule I - Exploited Exe	Enter here and Part I, line 9, c	olumn (A)	er Than	Adverti	sing In	come	(see instru	ctions)		Enter here and on page 1 Part I, line 9, column (B)
1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expens directly connected production unrelate business in	ses fi	4 Net incorrom unrelator business 2 minus colf a gain, colf 5 three	ne (loss) led trade (column lumn 3) ompute	5 G from is no	ross income activity that of unrelated less income	6 Expen attributat column	ble to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)	_					-				
(2)		I on Enter here and on Enter here								
(3)						-				
(4)		***								
	Enter here and on page 1, Part I, line 10, col (A)		arti,			L	-	1,, ,,		Enter here and on page 1, Part II, line 26
Totals ▶ Schedule J - Advertising In	nomo (aca instr	· · ot·ono)								<u> </u>
Part I Income From Per			oncolida	ated Bar	eie .					
Part Income From Fer	louicais Report	leu on a Ci	JIISOIIU	ateu Da)i3	· ·		1		
1 Name of periodical	2 Gross advertising income	3 Directadvertising		4 Adver gain or (los 2 minus c a gain, co cols 5 thre	ss) (col ol 3) If mpute		Circulation income	6 Reade costs	•	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)										
(2)										7
(3)										7
(4)										1
<u>-</u>			-							
Totals (carry to Part II, line (5))										Form 990-T (2017

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1) (2) (3)						
Totals from Part I ▶ Totals, Part II (lines 1-5) ▶	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)		-		Enter here and on page 1, Part II, line 27

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2 Title	3 Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	•
Total. Enter here and on page 1, Part II, line 14			

Form 990-T (2017)

Part I, Line 5 (990-T) - Income/(Loss) from Partnerships and S Corporations

<u>Name</u>	<u>Gross lı</u>	ncome/(Loss)	<u>Deduc</u>	ctions	Inco	me/(Loss)
CHENIERE ENERGY PARTNERS, LP ENERGY TRANSFER EQUITY LP	\$ \$	(1,393) (1,719)	\$ \$	-	\$ \$	(1,393) (1,719)
Total					\$	(3,112)

The Magis Charitable Foundation Taxable Year Ending December 31, 2017

Part II, Line 31 (990-T) - Net Operating Loss Carryover

			Amount of								Cumulative
	Beginning Loss Period	Ending Loss Period	Net Operating	Amount Used In Prior Years /	Adjustment Under Sec		Amount Available	Amount Used This	Expiring	_ 6)	Unused Net Operating
Carryover Period	(M/D/YYYY)	(M/D/YYYY)	Loss	Carrybacks	170(d)(2)(B)	Adjustments	This Year	Year	Losses	for Carryover	Loss
20th Preceding Period											
19th Preceding Period											
18th Preceding Period										,	
17th Preceding Period											
16th Preceding Period											
15th Preceding Period											
14th Preceding Period											
13th Preceding Penod							!				
12th Preceding Period											
11th Preceding Period											
10th Preceding Period											
9th Preceding Period											
8th Preceding Period											
7th Preceding Period											
6th Preceding Period											
5th Preceding Period											:
4th Preceding Period											
3rd Preceding Period											
2nd Preceding Period	1/1/2015	12/31/2015	5,257				5,257	2,560		2,697	2,697
1st Preceding Period	1/1/2016	12/31/2016	6,526				6,526			6,526	9,223
Current Period	1/1/2017	12/31/2017	-				•			-	9,223

2,560

Total Net Operating Loss Used This Year:

2,560

Taxable Income Before Net Operating Loss: