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Department of the Treasury

ON EXTENSION TO 11/15/2010

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

Note The foundation may be able to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0052

Internal Re	venue Service Note The foundation may be	e able to use a copy of this	return to satisfy state repo	rting requirements.	
For caler	ndar year 2009, or tax year beginning		, and ending		
G Check	call that apply: Initial return	Initial return of a fo	rmer public charity	Final return	
	Amended return	Address chang	ge 🔲	Name change	
Use the	Name of foundation			A Employer identification r	number
label	RESTANTAGE OF THE STATE OF THE	H FAMILY FOU	NDATION		
Otherwi	la (a. ==================================	MITH, LLP		22-6919366	
print	Number and street (or P O box number if mail is not de	livered to street address)	Room/suite	B Telephone number	
or typ			1100	215-947-210	00
See Spe				C If exemption application is per	nding, check here
Instructi	ons HUNTINGDON VALLEY, PA	19006		D 1 Foreign organizations,	
H Check	k type of organization X Section 501(c)(3) ex			Foreign organizations meet check here and attach com	ting the 85% test,
		Other taxable private founda	ition		
	arket value of all assets at end of year J Accounting	ng method: X Cash	Accrual	E If private foundation statu under section 507(b)(1)(i	
	·	her (specify)		F If the foundation is in a 60	•
\$	2,024,357. (Part I, colui		pasis)	under section 507(b)(1)(1	
Part I	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
1	Contributions, gifts, grants, etc., received	100,600.		N/A	· · · · · · · · · · · · · · · · · · ·
2	Check if the foundation is not required to attach Sch. B				
3	Interest on savings and temporary cash investments	19,947.	19,947.		STATEMENT 1
4	Dividends and interest from securities	19,852.	19,852.		STATEMENT 2
	Gross rents				
	Net rental income or (loss)				
இ _ல 6a	Net gain or (loss) from sale of assets not on line 10	<247,180.	>		
∌ ≝ ₽	Gross sales price for all assets on line 6a 1,242,466.				
Revenu 7	Capital gain net income (from Part IV, line 2)		<u> </u>		
≥ " 8	Net short-term capital gain ECEIVED				
9 10a 10a 11 12	Income modifications Gross sales less returns	ال ا			
10a	and allowances	SO			····
<u> </u>	Less Cost of goods sold 1909 0 0 2010				
§ °	Gross profit or (las s))	IRS			
] 11	8 11 N N ≒ 7 17 3 C 8 − 10 N N N N N N N N N N N N N N N N N N	105 701			
0)	Total Add lines athrough the Law of	<106,781.			
13	Compensation of officers, directors, trustees, etc	0.	0.		0.
14	Other employee salaries and wages		 		
S 15	Pension plans, employee benefits				
<u>ور</u> 16a	Legal fees			<u> </u>	
9 1	Accounting fees				
<u>ய்</u> 9	Other professional fees		· -		
.≨ 1/	Interest	2 524	110		
and Administrative Expens 12 0 11 18 12 15 15 15 15 15 15 15 15 15 15 15 15 15	Taxes STMT 3	2,534.	112.		0.
19 iji	Depreciation and depletion				
E 20	Occupancy				
₹ 21	Travel, conferences, and meetings				
E 22	Printing and publications Other expenses STMT 4	260.	10.		250
gi 23	·	200.		 	250.
Operating 52	Total operating and administrative expenses. Add lines 13 through 23	2,794.	122.		250.
이 "	Contributions, gifts, grants paid	128,934.	144.	 	128,934.
	Total expenses and disbursements	120,334.			120,334.
20	Add lines 24 and 25	131,728.	122.	1	129,184.
07	Subtract line 26 from line 12.	131,120.	144.		147,104.
		<238,509.			
	A Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	<u> </u>	39,677.	+	
	C Adjusted net income (if negative, enter -0-)		37,011.	N/A	
923501	LUA For Privacy Act and Panaryork Poduction	Ant Nation and the instruc	·	11/17	Form 900-PF (2000)

YVONNE & MICHAEL MARSH FAMILY FOUNDATION

Form 990-PF (2009)

For	m 99	0-PF(2009) C/O PRESSMAN CIOCCA	SMITH,	LLP	2:	2-6919366 Pag	ge 2
Б	art	Balance Sheets Attached schedules and amounts in the description		Beginning of year	Er	nd of year	
	art	column should be for end-of-year amounts only		(a) Book Value	(b) Book Value	(c) Fair Market Value	_
	1	Cash - non-interest-bearing					
	2	Savings and temporary cash investments		248,235.	806,70	6. 806,706	<u>5 .</u>
	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	ŀ				
	7	Other notes and loans receivable					_
		Less: allowance for doubtful accounts					
Ø	8	Inventories for sale or use					
Assets	9	Prepaid expenses and deferred charges					
As	10a	Investments - U.S. and state government obligations					_
	l		6	849,597.	423,24	4. 473,916	<u> </u>
	l	Investments - corporate bonds STMT		44,550.	44,550		
	l	Investments - land, buildings, and equipment basis	<i>'</i>	11/3301	11/00	01/550	<u></u>
	''	Less accumulated depreciation					
	12	Investments - mortgage loans					-
	13	Investments - other STMT	ρ 💳	1,072,095.	616,859	9. 681,785	
	14	Land, buildings, and equipment: basis ►	` 	1/0/2/0331	010,03.	001,703	<u></u>
	'	Less accumulated depreciation					
	15	Other assets (describe					—
	13	Other assets (describe >	'				
	16	Total assets (to be completed by all filers)		2,214,477.	1,891,359	9. 2,024,357	7.
_	17	Accounts payable and accrued expenses			1,001,00.	2,021,33,	·
	18	Grants payable				_	
S	19	Deferred revenue					
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons					
ë	21	Mortgages and other notes payable					
Ë	į.	Other liabilities (describe	,				
						\neg	
	23	Total liabilities (add lines 17 through 22)		0.	(0.	
		Foundations that follow SFAS 117, check here					
		and complete lines 24 through 26 and lines 30 and 31					
ces	24	Unrestricted					
lan	25	Temporarily restricted					
Ba	26	Permanently restricted					
Fund Balances		Foundations that do not follow SFAS 117, check here	X				
ρĒ		and complete lines 27 through 31.					
ţ	27	Capital stock, trust principal, or current funds		0.		0.	
Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund		0.		0.	
ţ	29	Retained earnings, accumulated income, endowment, or other fun	ds	2,214,477.	1,891,35		
Net	30	Total net assets or fund balances		2,214,477.	1,891,35	<u>9.</u>	
				0 014 455	4 004 05		
_	31	Total liabilities and net assets/fund balances		2,214,477.	1,891,35	9.1	—
P	art	III Analysis of Changes in Net Assets or Fu	nd Balar	nces			
<u> </u>	Tota	net assets or fund balances at beginning of year - Part II, column (a). line 30				—
•		st agree with end-of-year figure reported on prior year's return)	u),o oo			1 2,214,477	7.
2		r amount from Part I, line 27a				2 <238,509	
3		r increases not included in line 2 (itemize)			ļ		0.
		lines 1, 2, and 3				4 1,975,968	
		eases not included in line 2 (itemize)		SEE STA	ATEMENT 5	5 84,609	
		net assets or fund balances at end of year (line 4 minus line 5) - Pa	art II, column			6 1,891,359	
						Form 990-PF (200	

22-6919366

Page 3

Part IV Capital Gains	and Lo	sses for Tax on Ir	vestment	Income						
		ind(s) of property sold (e.g or common stock, 200 sh			(b) i	low acc - Purch - Donat	quired (ase tion	c) Date acquir (mo., day, yr.		(d) Date sold (mo., day, yr.)
1a SEE ATTACHED S	CHED	ULE				I	7 9	ARIOUS	3	VARIOUS
b SEE ATTACHED S	CHED	ULE				I	7 9	ARIOUS	3	VARIOUS
<u>c</u>										
<u>d</u>					ļ					
<u>e</u>					<u> </u>					
(e) Gross sales price	(1)	Depreciation allowed (or allowable)		t or other basis xpense of sale				(h) Gain or (e) plus (f) m		g)
a 809,686.				892,87						<83,184.
b 432,780.				596,77	6.					<163,996.
<u>C</u>										
d		· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·			-··			
Complete only for assets shown	ות מצוח וח	column (h) and owned by	the foundation	on 12/31/60	-		40.4	20.00 (0-1 (1)		
Complete only for assets shown							(I) (col. (Gains (Col. (h) k), but not les	ı gain s thai	minus 1 -0-) or
(i) F.M.V as of 12/31/69		(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (1), if any				Losses (from		
a				(),				·		<83,184.
b										<163,104.
C				· · · · · · · · · · · · · · · · · · ·						<u> </u>
d										
e						-				
2 Capital gain net income or (net ca	pital loss	If gain, also enter If (loss), enter -0			}	2				<247,180.
3 Net short-term capital gain or (los	s) as det						-			
If gain, also enter in Part I, line 8,	,	` '	.0 (0).)					
If (loss), enter -0- in Part I, line 8 Part V Qualification U		Section 4940(e) for				3		N	1/A	
If section 4940(d)(2) applies, leave the Was the foundation liable for the sec if "Yes," the foundation does not qual	tion 4942 lify under	tax on the distributable am	mplete this pa	rt.						Yes X No
1 Enter the appropriate amount in	each colu	mn for each year; see instr	uctions before	making any entrie	es					(4)
(a) Base period years Calendar year (or tax year beginni	ng in)	(b) Adjusted qualifying dis		Net value of no		ıtable-u		(col. (Distrib b) div	(d) ution ratio ided by col. (c))
2008			6,002.		2	,034	1,503.			.037357
2007			4,377.		1		7,173.			.040605
2006			8,465.				744.			.032467
2005			9,508. 3,798.				5,598.			.127091
2004			3,190.			400	5,163.			.152110
2 Total of line 1, column (d)	C b.a		h 0 b 5	h - . h h -				2		.389630
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years					3		.077926			
4 Enter the net value of noncharitati	ole-use as	sets for 2009 from Part X,	line 5					4		1,756,249.
5 Multiply line 4 by line 3					5		136,857.			
6 Enter 1% of net investment income (1% of Part I, line 27b)					6		397.			
7 Add lines 5 and 6		•						7		137,254.
8 Enter qualifying distributions from	n Part XII	line 4						8		129,184.
If line 8 is equal to or greater than See the Part VI instructions.			1b, and comp	lete that part usin	g a 19	% tax ra	ite.			147,104.
923521 02-02-10									F	orm 990-PF (2009)

YVONNE & MICHAEL MARSH FAMILY FOUNDATION Form 990-PF (2009) C/O PRESSMAN CIOCCA SMITH, LLP 22-6919366 Page 4 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) Part VI 1a Exempt operating foundations described in section 4940(d)(2), check here
and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🛄 and enter 1% 794. 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-) Add lines 1 and 2 3 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) Tax based on investment income Subtract line 4 from line 3 If zero or less, enter -0-5 1,300 a 2009 estimated tax payments and 2008 overpayment credited to 2009 6a b Exempt foreign organizations - tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) 60 d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 7 1,300. Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached 8 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed 9 497. 10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 11 Enter the amount of line 10 to be: Credited to 2010 estimated tax Part VII-A | Statements Regarding Activities No Yes 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in Х any political campaign? 1a b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? X 1b If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? X 1c d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation. > \$ 0 . (2) On foundation managers. ► \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation 0. managers. > \$ 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? X 2 If "Yes," attach a detailed description of the activities 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a N/A b If "Yes," has it filed a tax return on Form 990-T for this year? 4b X 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: . By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? Х 7 Did the foundation have at least \$5,000 in assets at any time during the year? X 7 If "Yes," complete Part II, col (c), and Part XV 8a Enter the states to which the foundation reports or with which it is registered (see instructions) NY 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 Х 8b 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(1)(3) or 4942(1)(5) for calendar

year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

YVONNE & MICHAEL MARSH FAMILY FOUNDATION Form 990-PF (2009) C/O PRESSMAN CIOCCA SMITH, LLP 22-6919366 Page 5 Part VII-A | Statements Regarding Activities (continued) 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) X 11 12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008? 12 X 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A 14 The books are in care of ▶ PRESSMAN CIOCCA SMITH, LLP Telephone no. \triangleright (215) 947-2100 Located at ► 1800 BYBERRY ROAD, SUITE 1100, HUNTINGDON VALLEY, ZIP+4 ▶19006-3523 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year N/A 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): Yes X No (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) Yes X No a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No Yes X No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available Yes X No 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 Yes X No 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 page 20 of the instructions)? N/A1b 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 2009? X 1c 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)). a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? Yes X No If "Yes," list the years 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. 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time 🗌 Yes 🕱 No during the year? b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after

May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2009.)

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

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

Form **990-PF** (2009)

X

3b

4a

N/A

YVONNE & MICHAEL MARSH FAMILY FOUNDATION Form 990sPF (2009) C/O PRESSMAN CIOCCA SMITH, LLP 22-6919366 Page 6 Part VII-B. Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? Yes X No (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? N/A 5b Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained N/A Yes [expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945-5(d) 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes X No b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Х 6b If "Yes" to 6b, file Form 8870. Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? 7b N/A Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (c) Compensation (d) Contributions to employee benefit plans and deferred (b) Title, and average (e) Expense account, other allowances hours per week devoted to position (If not paid, enter -0-) (a) Name and address compensation YVONNE V. MARSH TRUSTEE 101 CENTRAL PARK WEST, APT 18B NEW YORK, NY 10023 0.25 0 0. 0. MICHAEL C. MARSH TRUSTEE 101 CENTRAL PARK WEST, APT 18B NEW YORK, NY 10023 0.25 0 0. 0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deferred compensation (b) Title, and average hours per week devoted to position (e) Expense account, other (c) Compensation (a) Name and address of each employee paid more than \$50,000 allowances NONE

Form **990-PF** (2009)

Total number of other employees paid over \$50,000

Form 990-PF (2009) C/O PRESSMAN CIOCCA SMITH, LLP		19366 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundat 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 statistic number of organizations and other beneficiaries served, conferences convened, research papers produced to the conference of the convened of th		Expenses
1N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on I	nes 1 and 2.	Amount
1 N/A		

Form **990-PF** (2009)

All other program-related investments. See instructions.

Total. Add lines 1 through 3

Page 8

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	1,422,837.
b	Average of monthly cash balances	1b	1,422,837. 360,157.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	1,782,994.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) le 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,782,994.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	26,745.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,756,249.
6	Minimum investment return Enter 5% of line 5	6	87,812.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here in and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	87,812.
2a	Tax on investment income for 2009 from Part VI, line 5		
ь	Income tax for 2009. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	794.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	87,018.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	87,018.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7_</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	87,018.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	129,184.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	129,184.
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	129,184.
	Note. The amount on line 6 will be used in Part V. column (h), in subsequent years when calculating whether the foundation of	undifice fo	r the coetion

Form **990-PF** (2009)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instruction

Corpus Years prior to 2008 2008 2009 1 Distributable amount for 2009 from Part XI, line 7		· · · · · · · · · · · · · · · · · · ·			
1 Distributable amount for 2009 from Part XI, Inne 7 2 Undistributed income, if any, as of the end of 2009 a Enter amount for 2008 only b Total for prior years:			(b) Years prior to 2008		
Inne 7 2 Undistributed income, if any, as of the end of 2009 a Enter amount for 2008 only 0 0 b Total for prior years:	Distributable amount for 2009 from Part XI	33.723			
2 Undistributed income, if any, as of the end of 2009 a Enter amount for 2008 only b Total for prior years: 3 Excess distributions carryover, if any, to 2009. a From 2004 b From 2005 49, 357. e From 2006 d From 2007 e From 2008 4 Total of lines 3a through e 4 Qualifying distributions for 2009 from Part XII, line 4: ▶ \$ 129, 184. a Applied to 2008, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Freated as distributions out of corpus (Election required - see instructions) d Applied to 2009 distributable amount e Remaining amount distributed out of corpus 5 Excess distributions carryover, applied to 2009 (if an amount appears in column (d), the same amount must be shown in column (d). 5 Excess distributions carryover, applied to 2009 (if an amount appears in column (d), the same amount must be shown in column (d). 5 Excess distributions carryover, applied to 2009 (if an amount appears in column (d), the same amount must be shown in column (d). 5 Excess distributions carryover, applied to 2009 (if an amount appears in column (d), the same amount must be shown in column (d). 5 Excess distributions carryover, applied to 2009 (if an amount appears in column (d), the same amount must be shown in column (d). 5 Excess distributions carryover, applied to 2009 (if an amount appears in column (d), the same amount must be shown in column (d). 5 Excess distributions carryover, applied to 2009 (if an amount appears in column (d), the same amount must be shown in column (d). 5 Excess distributions carryover, applied to 2009 (if an amount appears in column (d), the same amount must be shown in column (d). 5 Excess distributions carryover applied to 2009 (if an amount appears in column (d), the same amount must be shown in column (d).					87.018.
a Enter amount for 2008 only b Total for prior years: 3 Excess distributions carryover, if any, to 2009. a From 2004	· · · · · · · · · · · · · · · · · · ·	-			0,7010.
S Excess distributions carryover, if any, to 2009. a From 2004				0.	
3 Excess distributions carryover, if any, to 2009. a From 2004	b Total for prior years:				
a From 2004	,,		0.		
b From 2005 c From 2006 d From 2007 e From 2008 f Total of lines 3a through e 4 Qualifying distributions for 2009 from Part XII, line 4: \(\)	3 Excess distributions carryover, if any, to 2009.				-
c From 2006 d From 2007 e From 2008 f Total of lines 3a through e 4 Qualifying distributions for 2009 from Part XII, line 4: ▶\$ 129,184. a Applied to 2008, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2009 distributable amount e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2009 off an amount appears in column (d), the same amount must be shown in column (d), the same amount must be shown in column (d), the same amount must be shown in column (d), the same amount must be shown in column (d). 6 Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract		į			
d From 2007 e From 2008 f Total of lines 3a through e 4 Qualifying distributions for 2009 from Part XII, line 4: ▶\$ 129,184. a Applied to 2008, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2009 distributable amount e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2009 (if an amount appears in column (d), the same amount must be shown in column (d). the same amount must be shown in column (d). 6 Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract	b From 2005 49,357.				
e From 2008 f Total of lines 3a through e 4	c From 2006				
f Total of lines 3a through e 4 Qualifying distributions for 2009 from Part XII, line 4: ▶ \$ 129,184. a Applied to 2008, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2009 distributable amount e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2009 (if an amount appears in column (d), the same amount must be shown in column (a) 6 Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract	d From 2007				
4 Qualifying distributions for 2009 from Part XII, line 4: ►\$ 129,184. a Applied to 2008, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2009 distributable amount e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2009 (If an amount appears in column (a), the same amount must be shown in column (a)) 6 Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract	-				
Part XII, line 4: ► \$ 129,184. a Applied to 2008, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2009 distributable amount e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a)) 6 Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract	_	100,847.	-		
a Applied to 2008, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2009 distributable amount e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a)) 6 Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract					
b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2009 distributable amount e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2009 (If an amount appears in column (a)) 6 Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract				•	
years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2009 distributable amount e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2009 (If an amount appears in column (a), the same amount must be shown in column (a)) 6 Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract	To the state of th			0.	
c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2009 distributable amount e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2009 (If an amount appears in column (a), the same amount must be shown in column (a)) 6 Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract	to the state of th		0		
(Election required - see instructions) d Applied to 2009 distributable amount e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2009 (If an amount appears in column (a), the same amount must be shown in column (a), the same amount must be shown in column (a) as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract	· ·		<u> </u>		
d Applied to 2009 distributable amount e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a)) 6 Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract	-	0			
e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a)) 6 Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract	` ' '	0.		··········	07 010
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a)) 6 Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract	· · ·	12 166			07,010.
(If an amount appears in column (d), the same amount must be shown in column (a)) 6 Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract	_				0.
indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract	(If an amount appears in column (d), the same amount				<u> </u>
b Prior years' undistributed income. Subtract					
	a Corpus Add lines 3f, 4c, and 4e Subtract line 5	143,013.			
line 4b from line 2b	line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which	undistributed income for which a notice of				
the section 4942(a) tax has been previously assessed O •			0.		
d Subtract line 6c from line 6b Taxable	d Subtract line 6c from line 6b Taxable				
amount - see instructions 0 .	amount - see instructions		0.		
e Undistributed income for 2008. Subtract line	e Undistributed income for 2008. Subtract line		-		
4a from line 2a Taxable amount - see instr.	F-			0.	
f Undistributed income for 2009. Subtract					
lines 4d and 5 from line 1. This amount must					•
	F		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		0.
7 Amounts treated as distributions out of	l l				
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) 0 •	I	0			
8 Excess distributions carryover from 2004		0.			
not applied on line 5 or line 7 51,490.	l l	51.490.			
9 Excess distributions carryover to 2010		31/1501			
Subtract lines 7 and 8 from line 6a 91,523.		91.523.			
10 Analysis of line 9:	F	3273231		···	
a Excess from 2005 49,357.					
b Excess from 2006					
c Excess from 2007	c Excess from 2007				
d Excess from 2008					
e Excess from 2009 42,166.	e Excess from 2009 42,166.				

YVONNE & MICHAEL MARSH FAMILY FOUNDATION Form 990-PF (2009) C/O PRESSMAN CIOCCA SMITH, LLP 22-6919366 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 2009, enter the date of the ruling b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5) Prior 3 years 2 a Enter the lesser of the adjusted net Tax year (a) 2009 (b) 2008 (c) 2007 (d) 2006(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 section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization (4) Gross investment income Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see the 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).) SEE STATEMENT 9 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. Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here LX if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If

NONE

the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

- a The name, address, and telephone number 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:

YVONNE & MICHAEL MARSH FAMILY FOUNDATION Form 990-PF (2009) C/O PRESSMAN CIOCCA SMITH, LLP 22-6919366 Page 11 Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation status of recipient Purpose of grant or contribution show any relationship to any foundation manager or substantial contributor Amount Name and address (home or business) a Paid during the year SEE STATEMENT 10 128,934. Total **b** Approved for future payment

otal 02-02-10		 	 ► 3b	0 D-PF (2009
			 —	
			į	
	1			
NONE				
370370			i	

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelated	business income	Exclude	d 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
	Code				
ab	-		 		
C					
d					
e			 -		
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	19,947.	
4 Dividends and interest from securities			14	19,852.	
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	<u></u>				
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	<247,180.	>
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b			ļ		
c			<u> </u>		
d					
e				005 004	
12 Subtotal. Add columns (b), (d), and (e)		0.		<207,381.	> 0.
13 Total Add line 12, columns (b), (d), and (e)				13	<207,381.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities t	o the Acco	mplishment of Ex	cempt	Purposes	
Line No. Explain below how each activity for which inco	me is reported in	column (e) of Part XVI-A	contribut	ted importantly to the accom	iplishment of
the foundation's exempt purposes (other than				, , , , , , , , , , , , , , , , , , , ,	
923621 02-02-10				-	Form 990-PF (2009)

YVONNE & MICHAEL MARSH FAMILY FOUNDATION

Form 990-PF (2009)

orm 990-PF (200	09) C/O PRESSMAN	CIOCCA SMITH		22-6919366	Page 13
Part XVII	Information Regarding To	ransfers To and Tran	sactions and Relationsh	sips With Noncharitable	
	Exempt Organizations				

1	Did the	e organization directly or indir	rectly engage in any of the followi	ing with any other organizatior	described in section 501(c) of		Yes	No
	the Co	de (other than section 501(c))(3) organizations) or in section 5	527, relating to political organiz	zations?			
a	Transf	ers from the reporting founda	ation to a noncharitable exempt o	rganization of:				
	(1) Ca	ash				1a(1)		X
	(2) O	ther assets				1a(2)		X
b	Other 1	transactions:						
	(1) Sa	ales of assets to a noncharital	ble exempt organization			1b(1)		X
	(2) Pi	urchases of assets from a nor	ncharitable exempt organization			1b(2)		X
	(3) R	ental of facilities, equipment, (or other assets			1b(3)		X
	٠,	eimbursement arrangements				1b(4)		X X X
	٠,	oans or loan guarantees				1b(5)		<u>X</u>
	٠,		mbership or fundraising solicitati			1b(6)		X
C			iling lists, other assets, or paid en			1c		<u>X</u>
d					ays show the fair market value of the goods.		ets,	
					in any transaction or sharing arrangement,	show in		
			other assets, or services received		T (n			
a)	Line no	(b) Amount involved	(c) Name of noncharitab	ie exempt organization	(d) Description of transfers, transactions, and	d sharing ari	rangeme	nts
_			N/A					
								
_		···· ···						
			<u> </u>	<u> </u>				
_								
_		··· -· · · · · · · · · · · · · · · · ·						
				_				
-					· · · · · · · · · · · · · · · · · · ·			
		#	·					
								
	ls the	foundation directly or indirect	tly affiliated with, or related to, on	e or more tax-exempt organiza	ations described			
			r than section 501(c)(3)) or in sec		1.0013 003011500	Yes	X] No
h		," complete the following sch		0.1011 021	ı	165	_43	טאו ר
_		(a) Name of org		(b) Type of organization	(c) Description of relation	ship		
_		N/A		1,7,7				
					nts, and to the best of my knowledge and belief, it i	s true, corre	ct,	
	and com	plete Declaration of preparer (othe	er than taxpayer or fiduciary) is based or	n all information of which preparer h	as any knowledge	1 1		
	\ _	Who		102810	TRUSTEE / Wohn!	///a	18	
	Sig	nature of officer or trustee		Date	Title			
֓֞֜֞֜֞֜֞֜֞֜֓֓֓֓֓֞֜֞֜֓֓֓֓֡֓֓֓֡֓֡֓֡֡֡֜֞֜֡֓֡֓	,,]	Preparer's	<u></u>	Da		rer's identify	ying nun	nber
5	무실한	signature V		/	self- employed ► □	6992	<i></i>	
	Paid Preparer's Use Only		SMAN CIOCCA SM		5' EIN ► 23.258	3115		
	- Pre		BYBERRY ROAD S					
		address, and ZIP code HUNT	INGDON VALLEY,	PA 19006-3523		<u> 947 – </u>		
					F	orm 990	-PF	2009)

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, 990-EZ, or 990-PF.

OMB No 1545-0047

2009

Employer identification number

YVONNE & MICHAEL MARSH FAMILY FOUNDATION C/O PRESSMAN CIOCCA SMITH, LLP 22-6919366 Organization type (check one) Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-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 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, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF),

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 line 2 of its Form 990-PF, to certify

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

that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Name of organization

YVONNE & MICHAEL MARSH FAMILY FOUNDATION C/O PRESSMAN CIOCCA SMITH, LLP

Employer identification number

22-6919366

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	MARSH CAPITAL INVESTORS LLC 101 CENTRAL PARK WEST APT. 18B NEW YORK, NY 10023	\$100,600.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Name of organization

YVONNE & MICHAEL MARSH FAMILY FOUNDATION

Employer identification number

C/O PRESSMAN CIOCCA SMITH, LLP

22-6919366

art II	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	17,572 SHS TENET HEALTHCARE CORP		
		\$ <u>100,600.</u>	09/15/10
(a) No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—			

FORM 990-PF INTEREST ON SAV	INGS A	ND TEM	PORARY C	ASH IN	NVESTMENTS	STATEMENT	1
SOURCE						AMOUNT	
JP MORGAN - BROKERAGE 3008 JP MORGAN - CHECKING						19,9	42.
TOTAL TO FORM 990-PF, PART I	, LINE	3, CO	LUMN A			19,9	47.
FORM 990-PF DIVIDENT	DS AND	INTER	EST FROM	SECUF	RITIES	STATEMENT	2
SOURCE		GROSS	AMOUNT		TAL GAINS	COLUMN (A	۲)
JP MORGAN - BROKERAGE 3008			19,852.		0.	19,8	52.
TOTAL TO FM 990-PF, PART I,	LN 4		19,852.		0.	19,8	52.
FORM 990-PF		TAX	ES			STATEMENT	3
DESCRIPTION	EXPE	A) INSES BOOKS	(B) NET INV MENT IN				
FEDERAL EXCISE TAX FOREIGN INCOME TAX		2,422.		0. 112.			0.
TO FORM 990-PF, PG 1, LN 18		2,534.		112.			0.
FORM 990-PF	C	THER E	XPENSES			STATEMENT	4
DESCRIPTION	EXPE	A) ENSES BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOM		
NY FILING FEES INTEREST EXPENSE		250. 10.		0. 10.		2	50.
TO FORM 990-PF, PG 1, LN 23		260.		10.		2	50.

FORM 990-PF OTHER DECREASES II	N NET ASSETS OR F	UND BALANCES	STATEMENT	5
DESCRIPTION			AMOUNT	
EXCESS OF FAIR MARKET VALUE OVER STOCK	COST BASIS OF CO	NTRIBUTED	84,60	09.
TOTAL TO FORM 990-PF, PART III, 1	LINE 5		84,60	09.
FORM 990-PF (CORPORATE STOCK		STATEMENT	6
DESCRIPTION		BOOK VALUE	FAIR MARKET	r
2500 SHS CISCO SYSTEMS 2100 SHS ISHARES S&P GLOBAL ENERGE S357 JPM US LARGE CAP CORE PLUS 8000 SHS JPMORGAN CHASE & CO 248 SHS BARRICK GOLD CORP 400 SHS GENERAL ELECTRIC CO	GY	59,800. 51,289. 101,571. 200,000. 5,332. 5,252.	59,85 74,92 97,40 225,92 9,70 6,05	28. 00. 20.
TOTAL TO FORM 990-PF, PART II, L	INE 10B	423,244.	473,92	16.
FORM 990-PF	CORPORATE BONDS		STATEMENT	7
DESCRIPTION		BOOK VALUE	FAIR MARKET	Г
EDUCATION MANAGEMENT LCC 8 3/4%		44,550.	61,9	50.
TOTAL TO FORM 990-PF, PART II, L	INE 10C	44,550.	61,9	50.
FORM 990-PF O	THER INVESTMENTS		STATEMENT	8
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKE	r
SEE SCHEDULE ATTACHED	COST	616,859.	681,78	85.
TOTAL TO FORM 990-PF, PART II, L	INE 13	616,859.	681,78	85.

YVONNE & MICHAEL MARSH FAMILY F	OUNDATION	22	2-69193	66
	'XV - LINE 1A 'OUNDATION MANAGERS	STATI	EMENT	9
NAME OF MANAGER				
YVONNE V. MARSH MICHAEL C. MARSH				
	AND CONTRIBUTIONS DURING THE YEAR	STATI	EMENT	10
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUN	1T
CENTER FOR SOCIAL AND EMOTIONAL EDUCATION 548 8TH AVENUE, RM 930 NEW YORK, NY 10018	NONE GENERAL PURPOSES OF THE RECIPIENT	PUBLIC CHARITY	26,35	·0.
CATHEDRAL SCHOOL OF ST. JOHN THE DIVINE 1047 AMSTERDAM AVENUE NEW YORK, NY 10025	NONE GENERAL PURPOSES OF THE RECIPIENT	PUBLIC CHARITY	6,66	57.

YVONNE & MICHAEL MARSH FAMILY F				22-6919366
FREEDOM HOUSE FOUNDATION 3 PAVILLION RD GLEN GARDNER, NJ 08826	NONE GENERAL PURPOSES THE RECIPIENT	OF	PUBLIC CHARITY	250.
FRIEDNS OF THE ENVIRONMENT PO BOX AB 20755 MARSH HARBOUR, ABACO, BAHAMAS				
LONG ISLAND COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE 207 HILLSIDE AVE WILLISTON PARY, NY 11596	NONE GENERAL PURPOSES THE RECIPIENT	OF	PUBLIC CHARITY	600.
HARVARD BUSINESS SCHOOL SOLDIERS FIELD BOSTON, MA 02163	NONE GENERAL PURPOSES THE RECIPIENT	OF	PUBLIC CHARITY	250.
MUSUEM OF MODERN ART 11 W 53RD ST NEW YORK, NY 10019	NONE GENERAL PURPOSES THE RECIPIENT	OF	PUBLIC CHARITY	150.
244 EAST 58TH STREET 4TH FLOOR	NONE GENERAL PURPOSES THE RECIPIENT	OF	PUBLIC CHARITY	350.
NEW YORK PH - WEILL CORNELL MEDICAL CENTER 525 EAST 68TH STREET, J-144 NEW YORK, NY 10065	GENERAL PURPOSES	OF	PUBLIC CHARITY	5,000.
PEN AMERICAN CENTER, INC. CENTER 588 BROADWAY, SUITE 303 NEW YORK, NY 10012	NONE GENERAL PURPOSES THE RECIPIENT	OF	PUBLIC CHARITY	5,000.
THE BRICK CHURCH SCHOOL 62 EAST 92ND STREET NEW YORK, NY 10128	NONE GENERAL PURPOSES THE RECIPIENT	OF	PUBLIC CHARITY	100.

NONE

THE RECIPIENT

P.O. BOX 3008 BOZEMAN, MT 59772 GENERAL PURPOSES OF CHARITY

POLAR BEAR INTERNATIONAL

1,000.

PUBLIC

YVONNE & MICHAEL MARSH FAMILY F	OUNDATION		22-6919366
ST. ANDREW SCHOOL 781 CASTLE HILL AVE BRONX, NY 10473	NONE GENERAL PURPOSES (THE RECIPIENT	PUBLIC OF CHARITY	2,367.
STEPPING STONES 62 OAK ROAD KATONAH, NY 10536	NONE GENERAL PURPOSES O THE RECIPIENT	PUBLIC OF CHARITY	1,000.
WILDLIFE CONSERVATION SOCIETY 2300 SOUTHERN BOULEVARD BRONX, NY 10460	NONE GENERAL PURPOSES O THE RECIPIENT	PUBLIC OF CHARITY	
WILLIAMS COLLEGE 880 MAIN ST, HOPKINS HALL WILLIAMSTOWN, MA 01267	NONE GENERAL PURPOSES O THE RECIPIENT	PUBLIC OF CHARITY	30,000.
WOMEN IN NEED 115 W 31ST ST, 7TH FLR NEW YORK, NY 10001	NONE GENERAL PURPOSES O THE RECIPIENT	PUBLIC OF CHARITY	250.
THE DAVID SHELDRICK WILDLIFE TRUST ONE INDIANA SQUARE, SUITE 2800 INDIANAPOLIS, IN 46204	NONE GENERAL PURPOSES (THE RECIPIENT	PUBLIC OF CHARITY	
THE INSTITUTE FOR THE HISTORY OF PSYCHIATRY 525 EAST 68TH STREET, BOX 140 NEW YORK, NY 10065	GENERAL PURPOSES	PUBLIC OF CHARITY	250.
TRICYCLE FOUNDATION INC. 92 VANDAM STREET NEW YORK, NY 10013	NONE GENERAL PURPOSES (THE RECIPIENT	PUBLIC OF CHARITY	2,500.
REKERO CONSERVATION 28 HIGH STREET ANDOVER HANTS , UNITED KINGDOM SP10INU	NONE GENERAL PURPOSES O THE RECIPIENT	PUBLIC OF CHARITY	600.
UNITED WAY 2 PARK AVENUE NEW YORK, NY 10016	NONE GENERAL PURPOSES O THE RECIPIENT	PUBLIC OF CHARITY	355.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A	_	128,934.

J.P.Morgan

YVONNE AND MICHAEL MARSH FAMILY FDTN ACCT Q96783008 For the Period 12/1/09 to 12/31/09

Other Assets Summary

Asset Categories	Beginning Estimated Value	Estimated Value	Change In Value	Current Allocation
Structured Investments	679,410 00	681,785 00	2,375 00	34%

Asset Categories

Note: O - Bonds purchased at a discount show accretion

Other Assets Detail

	Quantity	Price	Estimated Value	Cost	Estimated Gain/Loss
Structured Investments				0,000	(3.005.49)
O CONTINGENT UPSIDE PARTICIPATION KNOCK-OUT NOTE LKD TO SP500 INDEX 10/01/10 CREDIT SUISSE (100%PRIN DEOTECT +310% BARRIFR W/ 7 5% REBATE)	150,000 000	102 45	153,675 00	000,000	
INITIAL LEVEL-SPX 9/26/08 1213 27 22546E-ED-2					
O CONTINGENT UPSIDE PARTICIPATION KNOCK-OUT NOTE LKD TO SP500 INDEX 10/21/10 JPMORGAN (100%PRIN PROTECT +35% BARRIER W/ 5% REBATE) INITIAL 1 FVFI -SPX 10/16/08 946 43	200,000 000	109 84	219,680 00	210,178 90	9,501 10
48123L-TZ-7					

J.P.Morgan

YVONNE AND MICHAEL MARSH FAMILY FDTN ACCT. Q96783008 For the Period 12/1/09 to 12/31/09

					7
	Cuantity	Price	Estimated Value	Cost	Estimated Gain/Loss
	dading				
Structured Investments					00 000
CREDIT SUISSE MKT PLUS SPX 9/10/10	20,000 000	161 68	80,840 00	20,000 00	20,040
30% CONTINGENT BARIER 6 26 PMT UNCAP DD 03/05/09 SPX-682 55					
22546E-FR-0				00 000	(00 075 6)
JPM SYNC3M STEP-UP CD MD 09/30/14;	100,000 000	97 53	97,530 00	00 000,001	(5,416.00)
INITIAL RATE 2% CPN					
WHERE MAX KAIE IS 3% TEN MINOR OF DD 09/16/09					
48121C-6K-7 AA /AAA					00000
IDMORGAN CHASE BREN CCI OIL 9/08/10	100,000 000	130 06	130,060 00	100,000 00	30,060,00
COMMODITY CURVE INDEX-CRUDE OIL,					
BUFFER 15%, CALL SPREAD ATMS-135%,					
PTPN 114%, STRIKE (LIVE) 373 90,					
DD 03/02/09, MD 09/08/10					
48123L-J4-7					FE4 07E 64
Total Structured Investments			\$681,785.00	\$616,859.39	\$04,920.01

YVONNE AND MICHAEL MARSH FAMILY FDTN Account Number: Q 96783-00-8

Note S Indicates Short Term Realized Gain/Loss L indicates Long Term Realized Gain/Loss F Indicates Foreign Exchange Gain/Loss on Capital Transactions O Indicates Ordinary Income Gain		30.035 32 74,81450 30.035 32 32.035 32 32.035 32 32.035 32 32.035 32 32 32 32 32 32 32 32 32 32 32 32 32	2,764 98 2,575 00 S 189.98	59,420 00 100,000 00 S -40,580 00
Transactions	Secunty Description	TENET HEALTHCARE CORP 26,725 000 01/01/01 01/21/09 3 @ 1 18 31,535 50 BROKERAGE 1,500 00 TAX &/OR SEC 18 J.P. MORGAN SECURITIES INC.	YUM BRANDS INC @ 28.65 2,865 00 BROKERAGE 100 00 TAX &/OR SEC .02 J.P MORGAN SECURITIES INC	TO SPX 100,000 000 04/25/08 02/26/09

J.P.Morgan

YVONNE AND MICHAEL MARSH FAMILY FDTN Account Number. Q 96783-00-8

		Transactions		Note	S indicates Short Term Realized Gain/Loss L indicates Long Term Realized Gain/Loss F indicates Foreign Exchange Gain/Loss on Capital Transactions O indicates Ordinary Income Gain
Security Description	Unils Acq Date	Sold Date	Net Proceeds	Tax Cost	Total GarnLoss
DUAL DIRECTIONAL BREN LKD TO NON EAFE BARCLAYS (10%BUFF-2XLEV- 7 04%CAP-14 08%MAX)INITIAL LEVEL SX5E 3340 27 UKX 5529.90 TPX 1320 68 MD 07/16/2009 DD 06/27/08	59,000 000 06/27/08 02/26/09		38,503 40	00 000'69	S -20,496 60
ANNUAL REVIEW NOTES LINKED TO THE S&P 500 INDEX 09/29/11 CREDIT SUISSE (90/100/100-10%BUFFER-10 10%PYMT) INITIAL LEVEL-SPX 9/12/08 1251 70	100,000 000 09/12/08 02/26/09		59,510 00	100,000 00	S -40,490 00
ANNUAL REVIEW NOTE LNK TO S&P500 INDEX - DB (10%BUFF-10 3%COUP-90/100/100) INITIAL LEVEL-SPX 1278 38 MD 07/18/2011 DD.06/27/2008	59,000 000 06/27/08 02/26/09		36,615 40	59,000 00	S -22,384 60

J.P.Morgan

YVONNE AND MICHAEL MARSH FAMILY FDTN Account Number Q 96783-00-8

S indicates Short Term Realized Gain/Loss L indicates Long Term Realized Gain/Loss F indicates Foreign Exchange Gain/Loss on Capital Transactions O indicates Ordinary Income Gain	Total GamLoss	00 657- 6		S 4,711 64
Note	Tax Cost	50,000 00	200'000 00	22,295 20
suoj	Nel Proceeds	49,765 00	200,000.00	27,006 84
Transactions	Sold Date	02/26/09	03/17/09	03/13/09
	Units Acq Date	50,000 000 07/11/08 02/26/09	200,000 000 09/12/08 03/17/09	1,130 000 02/20/09 03/13/09
	Security Description	DUAL DIRECTIONAL KNOCK-OUT NOTE LINKED TO THE S&P 500 INDEX 7/08/09, JPMC BK, NA (1X LEV-100% PRINCIPAL PROTECTION-+/-16 85% BARRIER) INITIAL LEVEL-SPX.XXXX XX TD 7/11/08	DUAL DIRECTIONAL KNOCK-OUT NOTE LINKED TO THE S&P 500 INDEX 03/17/2009 JPMORGAN (1XLEV-100%PRIN PROTECTION +/-9 25% BARRIER) INITIAL LEVEL-SPX 9/12/08 1251 70	J P MORGAN CHASE & CO @ 24.00 27,120 00 BROKERAGE 113 00 TAX &/OR SEC .16 J P. MORGAN SECURITIES INC

YVONNE AND MICHAEL MARSH FAMILY FDTN Account Number Q 96783-00-8

		Transactions		N ote	S indicates Short Term Realized Gain/Loss L indicates Long Term Realized Gain/Loss F indicates Foreign Exchange Gain/Loss on Capital Transactions O indicates Ordinary Income Gain
Security Description	Units Acq Date	Sold Date	Net Froceeds	Tax Cost	Total Gen/Loss
JPM ISSUED 12M DIGITAL PLUS NOTE ON SGD, PHP, IDR, MYR (EQUAL WEIGHT) INITIAL LVLS SGD 1 3516, PHP 41 936 IDR 9218.00, MYR 3 1351, 98% PRIN	50,000 000 04/24/08 04/29/09	04/29/09	49,000 00	50,000 00	L -1,000 00
PRO I MD 04/29/2009, DD 04/24/2009 HSBC SARN SPX 3/16/11 (80/90/100/100-10%BUFFER-7%PYMT) INITIAL LEVEL-SPX.03/03/09.752 83 ENTIRE ISSUE CALLED	100,000 000 02/26/09 08/31/09	08/31/09	107,000.00	100,000 00	S 7,000 00
DON'S 1, 2005 (B. 10) 505 TENET HEALTHCARE CORP (B. 5 81815 257, 726 59 BROKERAGE 2, 214 85 TAX &/OR SEC 6 63 J.P. MORGAN SECURITIES INC	26,725 000 01/01/01 09/15/09 17,572 000 0 /(it (t)	09/15/09	154,149 81 101,355 30	214,819,50	1-60,609-6 0-60,609-6

YVONNE AND MICHAEL MARSH FAMILY FDTN

Account Number Q 96783-00-8

Capital Gain and Loss Schedule

		Transactions	v	Note	S indicates Short Term Realized Gain/Loss L indicates Long Term Realized Gain/Loss F indicates Foreign Exchange Gain/Loss on Capital Transactions O indicates Ordinary Income Gain
Comment Description	Units Acq Date	Sold Date	Nei Proceeds	Tax Cost	Total Gan/Loss
HSBC ARN SPX 1/31/12	200,000 000 01/15/09 10/19/09	0/19/09	229,100 00	200,000 00	\$ 29,100.00
(90/100/100-10%BUFFER-15 9%PYMT) INITIAL LEVEL-SPX 1/21/09 843 74 @ 114 55 J P MORGAN SECURITIES INC					
CONTINGENT UPSIDE PARTICIPATION KNOCK-OUT NOTE LKD TO XLF	100,000 000 08/20/08 10/21/09	10/21/09	98,240 00	101,146 14	ナ、90なアート
8/25/10 CREDIT SUISSE (100%PRINCIPAL PROTECTION +43 50% BARRIER W/ 7 5% REBATE) INTL LVL-XLF 8/20/08 20 35					
Total Gain/Loss			432,780.43 596,715.66	596,7756	1 - 163, 99533
			201, 012, 62 54, 108	10/0/10	

Your capital gain and loss schedule will show an N/A for the gain or loss for sales where we have incomplete or missing tax cost Please consult your tax advisor for appropriate tax reporting on these sales. Note.

Form 9	868 (Rev. 4-2009)			Page 2
	out nev. 4-2003) but are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this but)Y		► X
	Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed		3868	
	ou are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)		3000	
Pari		opies r	needed).	
ـقتــنـا	Name of Exempt Organization		oyer identifica	tion number
Type	YVONNE & MICHAEL MARSH FAMILY FOUNDATION	p	oyer identifica	aon namber
print	C/O PRESSMAN CIOCCA SMITH, LLP	2	2-691936	66
File by t	Number street and room or quite no If a D.O. how and instructions	 	RS use only	
extende due date	1800 BYBERRY ROAD, NO. 1100	"		
filing the return S				
ınstructı				
	type of return to be filed (File a separate application for each return). Form 990 Form 990-EZ Form 990-T (sec 401(a) or 408(a) trust) Form 1041-A Form 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720	=	orm 5227	Form 8870
STOP	Do not complete Part II if you were not already granted an automatic 3-month extension on a previous	ısly file	d Form 8868.	
• The	PRESSMAN CIOCCA SMITH, LLP - 1800 BYBER be books are in the care of > 1100 - HUNTINGDON VALLEY, PA 19006-3523		ROAD, SU	JITE
Tel	ephone No. ► (215) 947-2100 FAX No ►			
• If th	ne organization does not have an office or place of business in the United States, check this box			
• If the	nis is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the	is is fo	r the whole grou	ıp, check this
box 🕽	If it is for part of the group, check this box 🕨 🔲 and attach a list with the names and EINs of all	memb	ers the extension	on is for
4	request an additional 3-month extension of time until NOVEMBER 15, 2010			
5	For calendar year 2009 , or other tax year beginning, and ending _			
6	If this tax year is for less than 12 months, check reason: Initial return Final return		Change in acco	unting period
	State in detail why you need the extension			
	ALL INFORMATION NECESSARY TO FILE A COMPLETE AND ACCUR	ETAS	TAX RET	'URN
	IS NOT YET AVAILABLE.	,	, <u></u> .	
	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	1		
	nonrefundable credits. See instructions	8a	_\$	794
	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated			
	tay payments made. Include any prior year evernayment allowed as a credit and any amount haid.	1	i	

with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is time, correct, and complete, and that I am authorized to prepare this form.

Signature Signature

previously with Form 8868

Title CPF

Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit

Date ▶ 8 4 10

8b

Form 8868 (Rev. 4-2009)

1,300.

0.