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Form 990-PF

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

OMB No. 1545-0052

2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

For calendar year 2012 or tax year beginning **, 2012, and ending , 20**

| | | | | | | | | | | | | | | | |
|--|---|--------------------------|--|---|--------------------------|---|--------------------------|----------------------------------|---|----------------|--------------------------|----------------|--------------------------|-------------|--|
| Name of foundation THE MBS FAMILY FOUNDATION INC. | | | A Employer identification number 20-1865079 | | | | | | | | | | | | |
| Number and street (or P O box number if mail is not delivered to street address) C/O MARCUS LLP, 750 THIRD AVE, 11TH FL | | | B Telephone number (see instructions) (212) 485-5690 | | | | | | | | | | | | |
| City or town, state, and ZIP code NEW YORK, NY 10017 | | | C If exemption application is pending, check here <input type="checkbox"/> | | | | | | | | | | | | |
| G Check all that apply <table border="0"> <tr> <td><input type="checkbox"/></td> <td>Initial return</td> <td><input type="checkbox"/></td> <td>Initial return of a former public charity</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Final return</td> <td><input type="checkbox"/></td> <td>Amended return</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Address change</td> <td><input type="checkbox"/></td> <td>Name change</td> </tr> </table> | | | <input type="checkbox"/> | Initial return | <input type="checkbox"/> | Initial return of a former public charity | <input type="checkbox"/> | Final return | <input type="checkbox"/> | Amended return | <input type="checkbox"/> | Address change | <input type="checkbox"/> | Name change | D 1 Foreign organizations, check here <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> |
| <input type="checkbox"/> | Initial return | <input type="checkbox"/> | Initial return of a former public charity | | | | | | | | | | | | |
| <input type="checkbox"/> | Final return | <input type="checkbox"/> | Amended return | | | | | | | | | | | | |
| <input type="checkbox"/> | Address change | <input type="checkbox"/> | Name change | | | | | | | | | | | | |
| H Check type of organization <table border="0"> <tr> <td><input checked="" type="checkbox"/></td> <td>Section 501(c)(3) exempt private foundation</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Section 4947(a)(1)-nonexempt charitable trust</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Other taxable private foundation</td> </tr> </table> | | | <input checked="" type="checkbox"/> | Section 501(c)(3) exempt private foundation | <input type="checkbox"/> | Section 4947(a)(1)-nonexempt charitable trust | <input type="checkbox"/> | Other taxable private foundation | E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> | | | | | | |
| <input checked="" type="checkbox"/> | Section 501(c)(3) exempt private foundation | | | | | | | | | | | | | | |
| <input type="checkbox"/> | Section 4947(a)(1)-nonexempt charitable trust | | | | | | | | | | | | | | |
| <input type="checkbox"/> | Other taxable private foundation | | | | | | | | | | | | | | |
| I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ► \$ 227,531. | | | F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/> | | | | | | | | | | | | |
| J Accounting method <table border="0"> <tr> <td><input checked="" type="checkbox"/></td> <td>Cash</td> <td><input type="checkbox"/></td> <td>Accrual</td> </tr> <tr> <td colspan="4">Other (specify) _____</td> </tr> </table> <i>(Part I, column (d) must be on cash basis)</i> | | | <input checked="" type="checkbox"/> | Cash | <input type="checkbox"/> | Accrual | Other (specify) _____ | | | | | | | | |
| <input checked="" type="checkbox"/> | Cash | <input type="checkbox"/> | Accrual | | | | | | | | | | | | |
| Other (specify) _____ | | | | | | | | | | | | | | | |

| Part I Analysis of Revenue and Expenses (The total amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)) | | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|--|--|------------------------------------|---------------------------|-------------------------|---|
| Revenue | 1 Contributions, gifts, grants etc., received (attach schedule) | 521,856. | | | |
| | 2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B | | | | |
| | 3 Interest on savings and temporary cash investments | | | | |
| | 4 Dividends and interest from securities | 5,539. | 5,539. | | ATCH 1 |
| | 5a Gross rents | | | | |
| | b Net rental income or (loss) | | | | |
| | 6a Net gain or (loss) from sale of assets not on line 10 | -26,071. | | | |
| | b Gross sales price for all assets on line 6a 498,670. | | | | |
| | 7 Capital gain net income (from Part IV, line 2) | | 135,667. | | |
| | 8 Net short-term capital gain | | | | |
| | 9 Income modifications | | | | |
| | 10a Gross sales less returns and allowances | | | | |
| b Less Cost of goods sold | | | | | |
| c Gross profit or (loss) (attach schedule) | | | | | |
| 11 Other income (attach schedule) | | | | | |
| 12 Total Add lines 1 through 11 | 501,324. | 141,206. | | | |
| Operating and Administrative Expenses | 13 Compensation of officers, directors, trustees, etc | 0 | | | |
| | 14 Other employee salaries and wages | | | | |
| | 15 Pension plans, employee benefits | | | | |
| | 16a Legal fees (attach schedule) | | | | |
| | b Accounting fees (attach schedule) ATCH 2 | 5,300. | 3,710. | | 1,590. |
| | c Other professional fees (attach schedule) | | | | |
| | 17 Interest NOV 1 2013 | | | | |
| | 18 Taxes (attach schedule) (see instructions) ATCH 3 | 5,575. | 43. | | 25. |
| | 19 Depreciation (attach schedule) and depletion | | | | |
| | 20 Occupancy | | | | |
| | 21 Travel, conferences, and meetings | | | | |
| | 22 Printing and publications | 821. | 108. | | 47. |
| | 23 Other expenses (attach schedule) ATCH 4 | | | | |
| | 24 Total operating and administrative expenses. | 11,696. | 3,861. | | 1,662. |
| Add lines 13 through 23 | | | | | |
| 25 Contributions, gifts, grants paid | 367,975. | | | 367,975. | |
| 26 Total expenses and disbursements Add lines 24 and 25 | 379,671. | 3,861. | 0 | 369,637. | |
| 27 Subtract line 26 from line 12 | | | | | |
| a Excess of revenue over expenses and disbursements | 121,653. | | | | |
| b Net investment income (if negative, enter -0-) | | 137,345. | | | |
| c Adjusted net income (if negative, enter -0-) | | | | | |

| Part II Balance Sheets | Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions) | Beginning of year | End of year | |
|--------------------------------------|---|-------------------|----------------|-----------------------|
| | | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| 1 | Cash - non-interest-bearing | | | |
| 2 | Savings and temporary cash investments | 3,682. | 121,531. | 121,531. |
| 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 (attach schedule) (see instructions) | | | |
| 7 | Other notes and loans receivable (attach schedule) ► | | | |
| | Less allowance for doubtful accounts ► | | | |
| 8 | Inventories for sale or use | | | |
| 9 | Prepaid expenses and deferred charges | | | |
| 10 a | Investments - U S and state government obligations (attach schedule) | | | |
| | b Investments - corporate stock (attach schedule) ATCH-5 | 14,549. | 128,000. | 106,000. |
| | c Investments - corporate bonds (attach schedule) ATCH-6 | 109,647. | | |
| 11 | Investments - land, buildings, and equipment basis | | | |
| | Less accumulated depreciation ► (attach schedule) | | | |
| 12 | Investments - mortgage loans | | | |
| 13 | Investments - other (attach schedule) | | | |
| 14 | Land, buildings, and equipment basis | | | |
| | Less accumulated depreciation ► (attach schedule) | | | |
| 15 | Other assets (describe ►) | | | |
| 16 | Total assets (to be completed by all filers - see the instructions Also, see page 1, item 1) | 127,878. | 249,531. | 227,531. |
| 17 | Accounts payable and accrued expenses | | | |
| 18 | Grants payable | | | |
| 19 | Deferred revenue | | | |
| 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| 21 | Mortgages and other notes payable (attach schedule) | | | |
| 22 | Other liabilities (describe ►) | | | |
| 23 | Total liabilities (add lines 17 through 22) | 0 | 0 | |
| 24 | Foundations that follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31. | | | |
| 25 | Unrestricted | | | |
| 26 | Temporarily restricted | | | |
| 27 | Permanently restricted | | | |
| 28 | Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ► <input checked="" type="checkbox"/> | | | |
| 29 | Capital stock, trust principal, or current funds | 127,878. | 249,531. | |
| 30 | Paid-in or capital surplus, or land, bldg., and equipment fund | | | |
| 31 | Retained earnings, accumulated income, endowment, or other funds | | | |
| | Total net assets or fund balances (see instructions) | 127,878. | 249,531. | |
| | Total liabilities and net assets/fund balances (see instructions) | 127,878. | 249,531. | |

Part III Analysis of Changes in Net Assets or Fund Balances

| | | | |
|---|--|---|----------|
| 1 | Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) | 1 | 127,878. |
| 2 | Enter amount from Part I, line 27a | 2 | 121,653. |
| 3 | Other increases not included in line 2 (itemize) ► | 3 | |
| 4 | Add lines 1, 2, and 3 | 4 | 249,531. |
| 5 | Decreases not included in line 2 (itemize) ► | 5 | |
| 6 | Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 | 6 | 249,531. |

Part IV Capital Gains and Losses for Tax on Investment Income

| (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.) | | | (b) How acquired P - Purchase D - Donation | (c) Date acquired (mo, day, yr) | (d) Date sold (mo, day, yr) |
|--|---|--|--|------------------------------------|--------------------------------|
| 1a SEE PART IV SCHEDULE | | | | | |
| b | | | | | |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | (h) Gain or (loss) (e) plus (f) minus (g) | | |
| a | | | | | |
| b | | | | | |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| 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 Losses (from col (h)) | | |
| (i) F M V as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col (i) over col (j), if any | | | |
| a | | | | | |
| b | | | | | |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| 2 Capital gain net income or (net capital loss) | { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 } | | 2 | 135,667. | |
| 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) (see instructions) If (loss), enter -0- in Part I, line 8 | | | 3 | 0 | |

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part

1 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) | (b) Adjusted qualifying distributions | (c) Net value of noncharitable-use assets | (d) Distribution ratio (col (b) divided by col (c)) |
|---|--|--|---|
| 2011 | 335,054. | 192,062. | 1.744510 |
| 2010 | 337,270. | 148,753. | 2.267316 |
| 2009 | 414,438. | 108,512. | 3.819283 |
| 2008 | 262,258. | 138,023. | 1.900104 |
| 2007 | 245,925. | 179,120. | 1.372962 |
| 2 Total of line 1, column (d) | | | 2 11.104175 |
| 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 2.220835 |
| 4 Enter the net value of noncharitable-use assets for 2012 from Part X, line 5 | | | 4 184,236. |
| 5 Multiply line 4 by line 3 | | | 5 409,158. |
| 6 Enter 1% of net investment income (1% of Part I, line 27b) | | | 6 1,373. |
| 7 Add lines 5 and 6 | | | 7 410,531. |
| 8 Enter qualifying distributions from Part XII line 4 | | | 8 369,637. |
| 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. See the Part VI instructions | | | |

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

| | | | | |
|----|---|----|----|--------------------------|
| 1a | Exempt operating foundations described in section 4940(d)(2), check here ► <input type="checkbox"/> and enter "N/A" on line 1 . . . | { | 1 | 2,747. |
| | 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 ► <input type="checkbox"/> and enter 1% 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-) . . . | | 2 | |
| 3 | Add lines 1 and 2 . . . | | 3 | 2,747. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) . . . | | 4 | 0 |
| 5 | Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- . . . | | 5 | 2,747. |
| 6 | Credits/Payments | | | |
| a | 2012 estimated tax payments and 2011 overpayment credited to 2012 . . . | 6a | | 3,768. |
| b | Exempt foreign organizations - tax withheld at source . . . | 6b | | |
| c | Tax paid with application for extension of time to file (Form 8868) . . . | 6c | | 3,000. |
| d | Backup withholding erroneously withheld . . . | 6d | | |
| 7 | Total credits and payments "Add" lines 6a through 6d . . . | | 7 | 6,768. |
| 8 | Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached . . . | | 8 | |
| 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 overpaid . . . | | 10 | 4,021. |
| 11 | Enter the amount of line 10 to be Credited to 2013 estimated tax ► | | 11 | 4,021. Refunded ► |

Part VII-A Statements Regarding Activities

| | | | |
|----|---|-----|----|
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . | Yes | No |
| 1b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? . . . | X | |
| 1c | <i>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</i> | X | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . | X | |
| 3 | <i>If "Yes," attach a detailed description of the activities</i> | X | |
| 4a | 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? <i>If "Yes," attach a conformed copy of the changes</i> . . . | X | |
| 4b | | X | |
| 5 | <i>If "Yes," attach the statement required by General Instruction T</i> | X | |
| 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? . . . | X | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i> . . . | X | |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions) ► | | |
| | DE, | | |
| b | <i>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</i> . . . | X | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i> . . . | X | |
| 10 | <i>If "Yes," attach a schedule listing their names and addresses</i> . . . | X | |

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) | 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 | X |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | X |
| | Website address ► N/A | | |
| 14 | The books are in care of ► MICHELLE B. STEIN, PRESIDENT Telephone no ► 516-366-8183 Located at ► 100 SUNRISE AVENUE, APT. 210 PALM BEACH, FL ZIP+4 ► 33480 | 14 | |
| 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 ► 15 | 15 | |
| 16 | At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for Form TD F 90-221. If "Yes," enter the name of the foreign country ► | 16 | Yes No X |

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) | | |
| (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> X No |
| (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> X No |
| (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> X No |
| (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> 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)? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> X No |
| (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) | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> X No |
| 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 2012? | 1c | X |
| 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 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> 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) | 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 during the year? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> X No |
| b If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2012) | 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 2012? | 4b | X |

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

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? Yes No

(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions) Yes No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes No

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)? **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 expenditure responsibility for the grant? Yes 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 a personal benefit contract? Yes No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **6b** X

If "Yes" to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? **7b** X

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (if not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|----------------------|---|---|---|---------------------------------------|
| ATCH 7 | | 0 | 0 | 0 |
| ----- | | | | |
| ----- | | | | |
| ----- | | | | |
| ----- | | | | |

2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."

| (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 | | | | |
| ----- | | | | |
| ----- | | | | |
| ----- | | | | |
| ----- | | | | |
| ----- | | | | |

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

Form 990-PF (2012)

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."

| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
|---|---------------------|------------------|
| NONE | N/A | 0 |
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Total number of others receiving over \$50,000 for professional services ►

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

| | |
|---|-----|
| 1 | N/A |
| 2 | |
| 3 | |
| 4 | |

Part IX-B. Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

| | | |
|---|------|--|
| 1 | NONE | |
| 2 | | |

All other program-related investments. See instructions.

Total Add lines 1 through 3 ►

Form 990-PF (2012)

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

| | | |
|--|----|----------|
| 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes | | |
| a Average monthly fair market value of securities | 1a | 116,448. |
| b Average of monthly cash balances | 1b | 70,594. |
| c Fair market value of all other assets (see instructions) | 1c | |
| d Total (add lines 1a, b, and c) | 1d | 187,042. |
| e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) | 1e | |
| 2 Acquisition indebtedness applicable to line 1 assets | 2 | |
| 3 Subtract line 2 from line 1d | 3 | 187,042. |
| 4 Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see instructions) | 4 | 2,806. |
| 5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 | 5 | 184,236. |
| 6 Minimum investment return Enter 5% of line 5 | 6 | 9,212. |

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ► and do not complete this part)

| | | |
|--|----|--------|
| 1 Minimum investment return from Part X, line 6 | 1 | 9,212. |
| 2a Tax on investment income for 2012 from Part VI, line 5 | 2a | 2,747. |
| b Income tax for 2012 (This does not include the tax from Part VI) | 2b | |
| c Add lines 2a and 2b | 2c | 2,747. |
| 3 Distributable amount before adjustments Subtract line 2c from line 1 | 3 | 6,465. |
| 4 Recoveries of amounts treated as qualifying distributions | 4 | |
| 5 Add lines 3 and 4 | 5 | 6,465. |
| 6 Deduction from distributable amount (see instructions) | 6 | |
| 7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1 | 7 | 6,465. |

Part XII Qualifying Distributions (see instructions)

| | | |
|---|----|----------|
| 1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes | | |
| a Expenses contributions, gifts, etc - total from Part I, column (d), line 26 | 1a | 369,637. |
| b Program-related investments - total from Part IX-B | 1b | |
| 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 | | |
| a 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 | 369,637. |
| 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 (see instructions) | 5 | 0 |
| 6 Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 369,637. |

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Form 990-PF (2012)

Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2011 | (c) 2011 | (d) 2012 |
|--|---------------|----------------------------|-------------|-------------|
| 1 Distributable amount for 2012 from Part XI, line 7 | | | | 6,465. |
| 2 Undistributed income, if any, as of the end of 2012 | | | | |
| a Enter amount for 2011 only | | | | |
| b Total for prior years 20 10 20 09 20 08 | | | | |
| 3 Excess distributions carryover, if any, to 2012 | | | | |
| a From 2007 239,790. | | | | |
| b From 2008 256,311. | | | | |
| c From 2009 409,112. | | | | |
| d From 2010 331,876. | | | | |
| e From 2011 329,218. | | | | |
| f Total of lines 3a through e | 1,566,307. | | | |
| 4 Qualifying distributions for 2012 from Part XII, line 4 ► \$ 369,637. | | | | |
| a Applied to 2011, 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 2012 distributable amount | | | | 6,465. |
| e Remaining amount distributed out of corpus | 363,172. | | | |
| 5 Excess distributions carryover applied to 2012. (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 | 1,929,479. | | | |
| b Prior years' undistributed income Subtract 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 assessed | | | | |
| d Subtract line 6c from line 6b Taxable amount - see instructions | | | | |
| e Undistributed income for 2011 Subtract line 4a from line 2a Taxable amount - see instructions | | | | |
| f Undistributed income for 2012 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2013 | | | | |
| 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) | | | | |
| 8 Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions) | 239,790. | | | |
| 9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a | 1,689,689. | | | |
| 10 Analysis of line 9 | | | | |
| a Excess from 2008 256,311. | | | | |
| b Excess from 2009 409,112. | | | | |
| c Excess from 2010 331,876. | | | | |
| d Excess from 2011 329,218. | | | | |
| e Excess from 2012 363,172. | | | | |

Form 990-PF (2012)

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

NOT APPLICABLE

| 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 2012, 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) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2 a | <table border="1"> <thead> <tr> <th>Tax year</th> <th colspan="3">Prior 3 years</th> <th rowspan="2">(e) Total</th> </tr> <tr> <th>(a) 2012</th> <th>(b) 2011</th> <th>(c) 2010</th> <th>(d) 2009</th> </tr> </thead> <tbody> <tr><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td></tr> </tbody> </table> | | | | Tax year | Prior 3 years | | | (e) Total | (a) 2012 | (b) 2011 | (c) 2010 | (d) 2009 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Tax year | Prior 3 years | | | (e) Total | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (a) 2012 | (b) 2011 | (c) 2010 | (d) 2009 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 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 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3 | 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)(ii) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (3) | Largest amount of support from an exempt organization | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (4) | Gross investment income | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see instructions.)**1 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))

N/A

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

N/A

2 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 (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or e-mail of the person to whom applications should be addressed

ATCH 8

b The form in which applications should be submitted and information and materials they should include

N/A

c Any submission deadlines

N/A

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

N/A

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|--|--|--------------------------------------|-------------------------------------|----------|
| Name and address (home or business) | | | | |
| a Paid during the year | | | | |
| ATCH 9 | | | | |
| Total | | | ► 3a | 367,975. |
| b Approved for future payment | | | | |
| Total | | | ► 3b | |

Part XVI-A Analysis of Income-Producing Activities

| Enter gross amounts unless otherwise indicated | Unrelated business income | | Excluded by section 512, 513, or 514 | | (e) Related or exempt function income (See instructions) |
|--|---------------------------|---------------|--------------------------------------|---------------|--|
| | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | |
| 1 Program service revenue | | | | | |
| a | | | | | |
| b | | | | | |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| f | | | | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash investments | | | | | |
| 4 Dividends and interest from securities | | | | | |
| 5 Net rental income or (loss) from real estate | | | | | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal property . | | | | | |
| 7 Other investment income | | | | | |
| 8 Gain or (loss) from sales of assets other than inventory | | | | | |
| 9 Net income or (loss) from special events . . . | | | | | |
| 10 Gross profit or (loss) from sales of inventory . . | | | | | |
| 11 Other revenue a | | | | | |
| b | | | | | |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| 12 Subtotal Add columns (b), (d), and (e) | | | | | -20,532. |
| 13 Total Add line 12. columns (b), (d), and (e) | | | | | -20,532. |

(See worksheet in line 13 instructions to verify calculations)

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

| 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? | | Yes | No |
|---|--|-------|----|
| a | Transfers from the reporting foundation to a noncharitable exempt organization of | | |
| (1) | Cash | 1a(1) | X |
| (2) | Other assets | 1a(2) | X |
| b | Other transactions | | |
| (1) | Sales of assets to a noncharitable exempt organization | 1b(1) | X |
| (2) | Purchases of assets from a noncharitable exempt organization | 1b(2) | X |
| (3) | Rental of facilities, equipment, or other assets | 1b(3) | X |
| (4) | Reimbursement arrangements | 1b(4) | X |
| (5) | Loans or loan guarantees | 1b(5) | X |
| (6) | Performance of services or membership or fundraising solicitations | 1b(6) | X |
| c | Sharing of facilities, equipment, mailing lists, other assets, or paid employees | 1c | X |

d- If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No

| B. If yes, complete the following schedule | | |
|--|--------------------------|---------------------------------|
| (a) Name of organization | (b) Type of organization | (c) Description of relationship |
| | | |
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**Sign
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

Signature of officer or trustee

Data

Title

May the IRS discuss this return with the preparer shown below
(see instructions) Yes No

| | | | | | |
|---------------------------------------|---|---|-----------------------|---|-------------------|
| Paid Preparer Use Only | Print/Type preparer's name <i>DAVID M. FIRST</i> | Preparer's signature <i>David M. First CFA</i> | Date 10/30/13 | Check <input type="checkbox"/> if self-employed | PTIN PD0140776 |
| | Firm's name ► MARCUM LLP | Firm's EIN ► | | | |
| | Firm's address ► 750 THIRD AVENUE NEW YORK, NY | 10017 | Phone no 212-485-5500 | | |

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

2012

Name of the organization

THE MBS FAMILY FOUNDATION INC.

Employer identification number

20-1865079

Organization type (check one)

Filers of:

Form 990 or 990-EZ

Section:

501(c)() (enter number) organization
 4947(a)(1) nonexempt charitable trust not treated as a private foundation
 527 political organization

Form 990-PF

501(c)(3) exempt private foundation
 4947(a)(1) nonexempt charitable trust treated as a private foundation
 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$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, total 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 total 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 Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization THE MBS FAMILY FOUNDATION INC.

Employer identification number
20-1865079**Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
|------------|--|----------------------------|---|
| 1 | MICHELLE B. STEIN 100 SUNRISE AVENUE, APT 210 PALM BEACH, FL 33480 | \$ 131,400. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution) |
| 2 | MICHELLE B. STEIN 100 SUNRISE AVENUE, APT 210 PALM BEACH, FL 33480 | \$ 108,700. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution) |
| 3 | MICHELLE B. STEIN 100 SUNRISE AVENUE, APT 210 PALM BEACH, FL 33480 | \$ 20,790. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution) |
| 4 | MICHELLE B. STEIN 100 SUNRISE AVENUE, APT 210 PALM BEACH, FL 33480 | \$ 132,966. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution) |
| 5 | MICHELLE B. STEIN 100 SUNRISE AVENUE, APT 210 PALM BEACH, FL 33480 | \$ 128,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution) |
| | | \$ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution) |

Name of organization THE MBS FAMILY FOUNDATION INC.

Employer identification number

20-1865079

Part II Noncash Property (see instructions). Use duplicate copies of 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 |
|---------------------|---|--|-------------------|
| 1 | 20,000 SHS. ALEXCO RESOURCE CORP. | \$ 131,400. | 01/17/2012 |
| 2 | 5,000 SHS. CENTRAL FUND OF CANADA LTD | \$ 108,700. | 03/22/2012 |
| 3 | 5,000 SHS. PURE TECHNOLOGIES LTD | \$ 20,790. | 09/13/2012 |
| 4 | 30,000 SHS. PURE TECHNOLOGIES LTD | \$ 132,966. | 11/27/2012 |
| 5 | 100,000 SHS. IMPLANT SCIENCES | \$ 128,000. | 11/27/2012 |
| | | \$ | |

Name of organization THE MBS FAMILY FOUNDATION INC.

Employer identification number

20-1865079

Part III *Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry*For organizations completing Part III, enter the total of *exclusively religious, charitable, etc., contributions of \$1,000 or less* for the year. (Enter this information once. See instructions.) ► \$

Use duplicate copies of Part III if additional space is needed

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---|---------------------|--|-------------------------------------|
| ----- | ----- | ----- | ----- |
| ----- | ----- | ----- | ----- |
| ----- | ----- | ----- | ----- |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
| ----- | ----- | ----- | ----- |
| ----- | ----- | ----- | ----- |
| ----- | ----- | ----- | ----- |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
| ----- | ----- | ----- | ----- |
| ----- | ----- | ----- | ----- |
| ----- | ----- | ----- | ----- |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
| ----- | ----- | ----- | ----- |
| ----- | ----- | ----- | ----- |
| ----- | ----- | ----- | ----- |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
| ----- | ----- | ----- | ----- |
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| ----- | ----- | ----- | ----- |

THE MBS FAMILY FOUNDATION INC.

20-1865079

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

| Kind of Property | | Description | | | | P or D | Date acquired | Date sold |
|--|---------------------------------------|---|--------------------------|---------------------------------|-------------------------------------|--------------|----------------------|------------|
| Gross sale price less expenses of sale | Depreciation allowed/ allowable | Cost or other basis | FMV as of 12/31/69 | Adj. basis as of 12/31/69 | Excess of FMV over adj. basis | | Gain or (loss) | |
| 128,342. | | ALEXCO RESOURCE CORP. 20,000 SHS PROPERTY TYPE: SECURITIES 70,491. | | | | D | VARIOUS 57,851. | 01/17/12 |
| 5,840. | | ATLANTIC POWER CORP. 500 SHS. PROPERTY TYPE: SECURITIES 6,688. | | | | P | 05/31/2012 -848. | 11/29/2012 |
| 15,121. | | CENTRAL FUND OF CANADA LTD 800 SHS. PROPERTY TYPE: SECURITIES 14,549. | | | | P | VARIOUS 572. | |
| 100,000. | | DEERE JOHN CAP CORP. MEDIUM TERM NOTES - PROPERTY TYPE: SECURITIES 109,647. | | | | P | VARIOUS -9,647. | 10/01/12 |
| 22,995. | | PURE TECHNOLOGIES LTD 5,000 SHS. PROPERTY TYPE: SECURITIES 13,310. | | | | D | VARIOUS 9,685. | 09/13/12 |
| 119,724. | | PURE TECHNOLOGIES LTD 30,000 SHS PROPERTY TYPE: SECURITIES 79,859. | | | | D | VARIOUS 39,865. | 11/28/12 |
| 106,648. | | CENTRAL FUND OF CANADA LTD 5,000 SHS. PROPERTY TYPE: SECURITIES 68,459. | | | | D | VARIOUS 38,189. | 03/22/12 |
| TOTAL GAIN(LOSS) | | | | | | | <u>135,667.</u> | |

ATTACHMENT 1FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

| <u>DESCRIPTION</u> | <u>REVENUE AND EXPENSES PER BOOKS</u> | <u>NET INVESTMENT INCOME</u> |
|--|---|--------------------------------------|
| NEUBERGER BERMAN 01053-DIVIDENDS | 289. | 289. |
| NEUBERGER BERMAN TAXABLE BOND INTEREST | 5,250. | 5,250. |
| TOTAL | <u>5,539.</u> | <u>5,539.</u> |

FORM 990PF, PART I - ACCOUNTING FEES

| <u>DESCRIPTION</u> | <u>REVENUE AND EXPENSES PER BOOKS</u> | <u>ADJUSTED NET INCOME</u> | <u>CHARITABLE PURPOSES</u> |
|--------------------|---|------------------------------------|--------------------------------|
| MARCUM LLP | 5,300. | 3,710. | 1,590. |
| TOTALS | <u><u>5,300.</u></u> | <u><u>3,710.</u></u> | <u><u>1,590.</u></u> |

ATTACHMENT 2

FORM 990PF, PART I - TAXES

| <u>DESCRIPTION</u> | <u>REVENUE AND EXPENSES PER BOOKS</u> | <u>NET INVESTMENT INCOME</u> | <u>ADJUSTED NET INCOME</u> | <u>CHARITABLE PURPOSES</u> |
|---|---|--------------------------------------|------------------------------------|--------------------------------|
| DELAWARE SECRETARY OF STATE EXCISE TAX FOREIGN TAXES PAID | 25. 5,507. 43. | 43. | 25. | |
| TOTALS | <u>5,575.</u> | <u>43.</u> | <u>25.</u> | |

FORM 990PF, PART I - OTHER EXPENSESATTACHMENT 4

| <u>DESCRIPTION</u> | <u>REVENUE AND EXPENSES PER BOOKS</u> | <u>NET INVESTMENT INCOME</u> | <u>ADJUSTED NET INCOME</u> | <u>CHARITABLE PURPOSES</u> |
|---------------------------|---|--------------------------------------|------------------------------------|--------------------------------|
| CORP SERVICE - AGENCY FEE | 155. | 108. | | |
| MISCELLANEOUS EXPENSES | 666. | | | |
| TOTALS | <u>821.</u> | <u>108.</u> | <u>47.</u> | |

FORM 990PF, PART II - CORPORATE STOCK

| <u>DESCRIPTION</u> | <u>ENDING BOOK VALUE</u> | <u>ENDING FMV</u> |
|------------------------|------------------------------|-----------------------|
| IMPLANT SCIENCES CORP. | 128,000. | 106,000. |
| TOTALS | <u>128,000.</u> | <u>106,000.</u> |

ATTACHMENT 5

FORM 990PF, PART II - CORPORATE BONDS

DESCRIPTION

DEER JOHN CAP. CORP. MED. TERM

TOTALS

ENDING
BOOK VALUE

ENDING
FMV

ATTACHMENT 6

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEESATTACHMENT 7

| <u>NAME AND ADDRESS</u> | <u>TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION</u> | <u>COMPENSATION</u> | <u>CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS</u> | <u>EXPENSE ACCT AND OTHER ALLOWANCES</u> |
|--|---|---------------------|--|--|
| | | <u>0</u> | <u>0</u> | <u>0</u> |
| MICHELLE B. STEIN 100 SUNRISE AVENUE, APT 210 PALM BEACH, FL 33480 | PRESIDENT | <u>0</u> | <u>0</u> | <u>0</u> |
| | GRAND TOTALS | <u>0</u> | <u>0</u> | <u>0</u> |

THE MBS FAMILY FOUNDATION INC.

20-1865079

ATTACHMENT 8

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

N/A

FORM 990DE, PART XVI - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

| <u>RECIPIENT NAME AND ADDRESS</u> | <u>RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT</u> | <u>PURPOSE OF GRANT OR CONTRIBUTION</u> | <u>AMOUNT</u> |
|-----------------------------------|---|---|-----------------------|
| SEE STATEMENT ATTACHED VARIOUS | | EDUCATIONAL AND OTHER CHARITABLE PURPOSES | 367,975 |
| | | <u>TOTAL CONTRIBUTIONS PAID</u> | <u><u>367,975</u></u> |

ATTACHMENT 9

**SCHEDULE D
(Form 1041)**Department of the Treasury
Internal Revenue Service**Capital Gains and Losses**

► Attach to Form 1041, Form 5227, or Form 990-T.
 ► Information about Schedule D (Form 1041) and its separate instructions is at
www.irs.gov/form1041.

OMB No 1545-0092

2012

Name of estate or trust

THE MBS FAMILY FOUNDATION INC.

Employer identification number

20-1865079

Note: Form 5227 filers need to complete only Parts I and II

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less

| (a) Description of property (Example 100 shares 7% preferred of "Z" Co) | (b) Date acquired (mo, day, yr) | (c) Date sold (mo, day, yr) | (d) Sales price | (e) Cost or other basis (see instructions) | (f) Gain or (loss) for the entire year Subtract (e) from (d) |
|---|------------------------------------|--------------------------------|-----------------|---|--|
| 1a | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b | 1b | | | | -848 . |
| 2 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 | 2 | | | | |
| 3 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts | 3 | | | | |
| 4 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2011 Capital Loss Carryover Worksheet | 4 | | | | () |
| 5 Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, column (3) on the back ► 5 | | | | | -848 . |

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

| (a) Description of property (Example 100 shares 7% preferred of "Z" Co) | (b) Date acquired (mo, day, yr) | (c) Date sold (mo, day, yr) | (d) Sales price | (e) Cost or other basis (see instructions) | (f) Gain or (loss) for the entire year Subtract (e) from (d) |
|--|------------------------------------|--------------------------------|-----------------|---|--|
| 6a | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b | 6b | | | | 136,515 . |
| 7 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 | 7 | | | | |
| 8 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts | 8 | | | | |
| 9 Capital gain distributions | 9 | | | | |
| 10 Gain from Form 4797, Part I | 10 | | | | |
| 11 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2011 Capital Loss Carryover Worksheet | 11 | | | | () |
| 12 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back ► 12 | | | | | 136,515 . |

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2012

| Part III Summary of Parts I and II | | (1) Beneficiaries' (see instr.) | (2) Estate's or trust's | (3) Total |
|---|--|--|--------------------------------|------------------|
| 13 | Net short-term gain or (loss) | 13 | | -848. |
| 14 | Net long-term gain or (loss): | | | |
| a | Total for year | 14a | | 136,515. |
| b | Unrecaptured section 1250 gain (see line 18 of the wrksht) | 14b | | |
| c | 28% rate gain | 14c | | |
| 15 | Total net gain or (loss). Combine lines 13 and 14a ► | 15 | | 135,667. |

Note: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a). If lines 14a and 15, column (2), are net gains, go to Part V, and do not complete Part IV. If line 15, column (3), is a net loss, complete Part IV and the Capital Loss Carryover Worksheet, as necessary.

Part IV Capital Loss Limitation

| | | |
|----|--|--------|
| 16 | Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of | |
| | a The loss on line 15, column (3) or b \$3,000 | 16 () |

Note: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 34), is a loss, complete the Capital Loss Carryover Worksheet in the instructions to figure your capital loss carryover.

Part V Tax Computation Using Maximum Capital Gains Rates

Form 1041 filers. Complete this part only if both lines 14a and 15 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero.

Caution: Skip this part and complete the Schedule D Tax Worksheet in the instructions if

- Either line 14b, col. (2) or line 14c, col. (2) is more than zero, or
- Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero

Form 990-T trusts. Complete this part only if both lines 14a and 15 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and complete the Schedule D Tax Worksheet in the instructions if either line 14b, col. (2) or line 14c, col. (2) is more than zero.

| | | | |
|----|---|----|--|
| 17 | Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34) . . . | 17 | |
| 18 | Enter the smaller of line 14a or 15 in column (2) but not less than zero | 18 | |
| 19 | Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T) . . . | 19 | |
| 20 | Add lines 18 and 19 | 20 | |
| 21 | If the estate or trust is filing Form 4952, enter the amount from line 4g otherwise, enter -0 . . . ► | 21 | |
| 22 | Subtract line 21 from line 20 If zero or less, enter -0 | 22 | |
| 23 | Subtract line 22 from line 17 If zero or less, enter -0 | 23 | |
| 24 | Enter the smaller of the amount on line 17 or \$2,400 | 24 | |
| 25 | Is the amount on line 23 equal to or more than the amount on line 24? | | |
| | <input type="checkbox"/> Yes. Skip lines 25 and 26, go to line 27 and check the "No" box. | 25 | |
| | <input type="checkbox"/> No. Enter the amount from line 23. | 26 | |
| 26 | Subtract line 25 from line 24 | 27 | |
| 27 | Are the amounts on lines 22 and 26 the same? | 28 | |
| | <input type="checkbox"/> Yes. Skip lines 27 thru 30, go to line 31 <input type="checkbox"/> No. Enter the smaller of line 17 or line 22 | 29 | |
| 28 | Enter the amount from line 26 (If line 26 is blank, enter -0) | 30 | |
| 29 | Subtract line 28 from line 27 | 31 | |
| 30 | Multiply line 29 by 15% (15) | 32 | |
| 31 | Figure the tax on the amount on line 23 Use the 2012 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041) | 33 | |
| 32 | Add lines 30 and 31 | 34 | |
| 33 | Figure the tax on the amount on line 17 Use the 2012 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041) | | |
| 34 | Tax on all taxable income. Enter the smaller of line 32 or line 33 here and on Form 1041, Schedule G, line 1a (or Form 990-T, line 36) | | |

Schedule D (Form 1041) 2012

Department of the Treasury
Internal Revenue Service

- Attach to Schedule D to list additional transactions for lines 1a and 6a.
- Information about Schedule D (Form 1041) and its separate instructions is at www.irs.gov/form1041.

Name of estate or trust

Employer identification number
20-1865079

THE MBS FAMILY FOUNDATION INC.

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less

1b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 1b -848 .

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D-1 (Form 1041) 2012

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PAGE 30

Name of estate or trust as shown on Form 1041. Do not enter name and employer identification number if shown on the other side.

Employer identification number

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

| (a) Description of property (Example 100 sh 7% preferred of "Z" Co) | (b) Date acquired (mo , day, yr) | (c) Date sold (mo , day, yr) | (d) Sales pnce | (e) Cost or other basis (see instructions) | (f) Gain or (loss) Subtract (e) from (d) |
|---|---|----------------------------------|----------------|---|---|
| 6a ALEXCO RESOURCE CORP. | VARIOUS | 01/17/12 | 128,342. | 70,491. | 57,851. |
| 20,000 SHS | | | | | |
| CENTRAL FUND OF CANADA LTD | VARIOUS | 05/31/12 | 15,121. | 14,549. | 572. |
| 800 SHS. | | | | | |
| DEERE JOHN CAP CORP. | VARIOUS | 10/01/12 | 100,000. | 109,647. | -9,647. |
| MEDIUM TERM NOTES - REDEM | | | | | |
| PURE TECHNOLOGIES LTD | VARIOUS | 09/13/12 | 22,995. | 13,310. | 9,685. |
| 5,000 SHS. | | | | | |
| PURE TECHNOLOGIES LTD | VARIOUS | 11/28/12 | 119,724. | 79,859. | 39,865. |
| 30,000 SHS | | | | | |
| CENTRAL FUND OF CANADA LTD | VARIOUS | 03/22/12 | 106,648. | 68,459. | 38,189. |
| 5,000 SHS. | | | | | |
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6b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 6b 136,515.

Schedule D-1 (Form 1041) 2012

MBS Foundation**12/31/12****Contributions**

| Date | Ck NO | Payee | Amount |
|--------------------------|-------|--|------------|
| 01/17/12 | 164 | Palm Beach Synagogue | 1,000.00 |
| 01/25/12 | 167 | The Soho Synagogue | 6,000.00 |
| 01/25/12 | 168 | Palm Beach Synagogue | 9,000.00 |
| 01/26/12 | 169 | Chaya Israel Foundation | 18,000.00 |
| 01/30/12 | 165 | Bayit Lepleitot, Inc. | 1,800.00 |
| 01/30/12 | 166 | The Jewish Museum | 1,000.00 |
| 02/07/12 | 170 | Congregation Ateres Shloime | 10,000.00 |
| 02/08/12 | 171 | Big Apple Circus | 1,000.00 |
| 02/27/12 | 173 | Congregation Ateres Shloime | 40,000.00 |
| 02/28/12 | 174 | Palm Beach Synagogue | 5,000.00 |
| 02/29/12 | 175 | Beth Menachem | 1,000.00 |
| 03/13/12 | 172 | Yeshiva Chemdath Hatorah | 600.00 |
| 03/26/12 | 185 | Nachlas Yehoshua - Monastristch | 1,800.00 |
| 03/28/12 | 186 | Palm Beach Synagogue | 20,000.00 |
| 05/04/12 | 187 | Palm Beach Synagogue | 2,857.00 |
| 05/09/12 | 188 | Congregation Ateres Shloime | 5,000.00 |
| 05/11/12 | 189 | Palm Beach Synagogue | 50,000.00 |
| 06/11/12 | 190 | Batya - Friends of United Hatzalah | 18,000.00 |
| 07/03/12 | 191 | Palm Beach Synagogue | 18,000.00 |
| 07/06/12 | 193 | Palm Beach Synagogue | 1,800.00 |
| 07/10/12 | 192 | The Carlebach Shul Congregation Kehilath Jacob | 180.00 |
| 07/17/12 | 194 | Congregation Ateres Shloime | 1,800.00 |
| 09/18/12 | 197 | Palm Beach Synagogue | 1,800.00 |
| 09/20/12 | 200 | Congregation Ateres Shloime | 10,000.00 |
| 09/21/12 | 199 | Congregation Bnai Israel | 10,000.00 |
| 10/24/12 | 201 | Congregation Ateres Shloime | 20,000.00 |
| 11/01/12 | 198 | Beth Menachem | 1,000.00 |
| 11/07/12 | 202 | Orthodox Union | 1,800.00 |
| 11/09/12 | 203 | The Soho Synagogue | 5,000.00 |
| 12/10/12 | 204 | Palm Beach Synagogue | 101,538.00 |
| 12/27/12 | 205 | Palm Beach Synagogue | 3,000.00 |
| <u>367,975.00</u> | | | |

Application for Extension of Time To File an
Exempt Organization Return

► File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ►
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for *Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only ►

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Enter filer's identifying number, see instructions

| | | |
|--|--|---|
| Type or print File by the due date for filing your return. See instructions | Name of exempt organization or other filer, see instructions THE MBS FAMILY FOUNDATION INC. | Employer identification number (EIN) or 20-1865079 |
| | Number, street, and room or suite no. If a P O box, see instructions C/O MARCUS LLP, 750 THIRD AVE, 11TH FL | Social security number (SSN) |
| | City, town or post office, state, and ZIP code. For a foreign address, see instructions NEW YORK, NY 10017 | |

Enter the Return code for the return that this application is for (file a separate application for each return) 0 4

| Application Is For | Return Code | Application Is For | Return Code |
|---|-------------|--------------------------|-------------|
| Form 990 or Form 990-EZ | 01 | Form 990-T (corporation) | 07 |
| Form 990-BL | 02 | Form 1041-A | 08 |
| Form 4720- (individual) | 03 | Form 4720 | 09 |
| Form 990-PF | 04 | Form 5227 | 10 |
| Form 990-T (sec 401(a) or 408(a) trust) | 05 | Form 6069 | 11 |
| Form 990-T (trust other than above) | 06 | Form 8870 | 12 |

- The books are in the care of ► MICHELLE B. STEIN, PRESIDENT

Telephone No ► 516 366-8183

FAX No. ►

- If the organization does not have an office or place of business in the United States, check this box ►
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, 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 members the extension is for

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 08/15, 20 13, to file the exempt organization return for the organization named above. The extension is for the organization's return for

► calendar year 2012 or
► tax year beginning _____, 20 ___, and ending _____, 20 ___.

2 If the tax year entered in line 1 is for less than 12 months, check reason Initial return Final return
 Change in accounting period

| | | | |
|----|--|----|-----------|
| 3a | If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions | 3a | \$ 6,768. |
| b | If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit | 3b | \$ 3,768. |
| c | Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions | 3c | \$ 3,000. |

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev 1-2013)

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box. ►

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1)

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Enter filer's identifying number, see instructions

| | | |
|---|--|---|
| Type or print File by the due date for filing your return. See instructions | Name of exempt organization or other filer, see instructions THE MBS FAMILY FOUNDATION INC. | Employer identification number (EIN) or 20-1865079 |
| | Number, street, and room or suite no. If a P O box, see instructions C/O MARCUM LLP, 750 THIRD AVE, 11TH FL | Social security number (SSN) |
| | City, town or post office, state, and ZIP code. For a foreign address, see instructions NEW YORK, NY 10017 | |

Enter the Return code for the return that this application is for (file a separate application for each return) 0 4

| Application Is For | Return Code | Application Is For | Return Code |
|--|----------------|-----------------------|----------------|
| Form 990 or Form 990-EZ | 01 | | |
| Form 990-BL | 02 | Form 1041-A | 08 |
| Form 4720 (individual) | 03 | Form 4720 | 09 |
| Form 990-PF | 04 | Form 5227 | 10 |
| Form 990-T (sec. 401(a) or 408(a) trust) | 05 | Form 6069 | 11 |
| Form 990-T (trust other than above) | 06 | Form 8870 | 12 |

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of ► MARCUM LLP
Telephone No ► 212 485-5500 FAX No ► 212 485-5501
- If the organization does not have an office or place of business in the United States, check this box ►
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, 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 members the extension is for

4 I request an additional 3-month extension of time until 11/15, 20 13

5 For calendar year 2012, or other tax year beginning 20 and ending 20

6 If the tax year entered in line 5 is for less than 12 months, check reason Initial return Final return
 Change in accounting period

7 State in detail why you need the extension ALL THE REQUIRED INFORMATION TO PREPARE
A COMPLETE AND ACCURATE TAX RETURN IS NOT YET AVAILABLE.

| | |
|--|---------|
| 8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions | 8a \$ 0 |
| b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 | 8b \$ 0 |
| c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions | 8c \$ 0 |

Signature and Verification must be completed for Part II only.

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 true, correct, and complete, and that I am authorized to prepare this form

Signature ►

Title ►

Date ►

Form 8868 (Rev. 1-2013)