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OMB No 1545-0052

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

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

2012

For cal	endar year 2012, or tax year beginning	, 2012	, and ending		,	
	Matthew Marks Charitable Tru	ıst		Α	Employer identification num 27-6976692	
	West 24th Street York, NY 10014			В	Telephone number (see the 212-243-0200	instructions)
				С	If exemption application is	pending, check here
G Che	eck all that apply: Initial return Final return	Initial return of a form Amended return	ner public charity	D	1 Foreign organizations, chec	k here
H C	Address change heck type of organization X Section 50	Name change (c)(3) exempt private f	oundation		2 Foreign organizations meet here and attach computation	ing the 85% test, check
	Section 4947(a)(1) nonexempt charitable t		orivate <u>fo</u> undation	E	If private foundation status under section 507(b)(1)(A)	
(f ► \$	from Part II, column (c), line 16)	Other (specify) column (d) must be or		F	If the foundation is in a 60 under section 507(b)(1)(B)	
Part	Analysis of Revenue and Expenses (The total of 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 investmen income	nt	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc, received (att sch)	300,000.				
	2 Ck if the foundn is not req to att Sch B 3 Interest on savings and temporary	<u> </u>				
	cash investments 4 Dividends and interest from securities	864.	86	4.	864.	
	5 a Gross rents b Net rental income or (loss)					
R E	6 a Net gain/(loss) from sale of assets not on line 10 b Gross sales price for all					
V E N	7 Capital gain net income (from Part IV, line 2)					
U	8 Net short-term capital gain 9 Income modifications					
E (°∂)	10 a Gross sales less returns and allowances					
Ç	b Less Cost of goods sold					
SCANNED	c Gross profit/(loss) (att sch) 11 Other income (attach schedule)	<u></u>	·			
	12 Total. Add lines 1 through 11	200 964	96	1	964	
	13 Compensation of officers, directors, trustees, etc	300,864.	86	4.	864.	
AON	14 Other employee salaries and wages					
S	15 Pension plans, employee benefits 16a Legal fees (attach schedule)					
ZAD My My	b Accounting fees (attach sch).			_		
	c Other prof fees (attach sch)		PE(
	18 Taxes (attach schedule)(see instrs)					
P S E T R R A A T T	19 Depreciation (attach sch) and depletion		7£3 NOA	Z	5 (11) 3	
i i N V G E	20 Occupancy					
	21 Travel, conferences, and meetings 22 Printing and publications		(
A E X D P E	22 Printing and publications 23 Other expenses (attach schedule)					
N S E	24 Total operating and administrative					
S	expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid Part XV	32,000.	<u> </u>			32,000.
	26 Total expenses and disbursements. Add lines 24 and 25	32,000.		0.	0.	32,000.
	27 Subtract line 26 from line 12 a Excess of revenue over expenses					
	and disbursements	268,864.		4		
	b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-)		86	4.	864.	
	- Aujustes net meome (ii negative, enter -0-)	L				

Par	ŧ II I	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		of year
			(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest	•			
	2	Savings and tempora	ary cash investments	635,656.	904,520.	904,520.
	3	Accounts receivable	• 		·····	
		Less: allowance for	doubtful accounts ►			
	4	Pledges receivable	• • • • • • • • • • • • • • • • • • •			
	_	Less: allowance for	doubtful accounts ►		-	
	5	Grants receivable				
	6	disqualified persons (attac	ers, directors, trustees, and other ch schedule) (see instructions)			
	7	Other notes and loans rece	ewable (attach sch)			
S	ļ	Less: allowance for	doubtful accounts >			
A S E T	8	Inventories for sale of	· · · · · ·			
Ŧ	9	Prepaid expenses ar	•			
S		obligations (attach s	· ·			
	, t	Investments — corporate s	stock (attach schedule)			
	•	: Investments — corporate t	oonds (attach schedule)		 	
	11	Investments – land, equipment basis	buildings, and			
		Less: accumulated deprect (attach schedule)	ation -			
	12	Investments - morto	age loans			
	13	Investments - other	(attach schedule)			
	14	Land, buildings, and	equipment: basis			
		Less: accumulated deprect (attach schedule)	ation •			
	ı	Other assets (describe Total assets (to be continued to be con	ompleted by all filers -			
			Also, see page 1, Item I)	635,656.	904,520.	904,520.
ŀ	17	Accounts payable an	d accrued expenses			
A B	18	Grants payable		ļ — — — — — — — — — — — — — — — — — — —		-
Ī	19	Deferred revenue	inne thurstone Q ather discountified never			
Ļ	20	•	ors, trustees, & other disqualified persons : payable (attach schedule)	<u> </u>		-
ţ	21	Other liabilities (desc	, , ,			
I E		Odici nabilities (desi	,			-
E S	23	Total liabilities (add		0.	0.	
		Foundations that fol and complete lines 2	low SFAS 117, check here 24 through 26 and lines 30 and 31.			
NE	24	Unrestricted]
N F E U T N	25	Temporarily restricte]
D	26	Permanently restricted	_			
A B A L A		Foundations that do and complete lines 2	not follow SFAS 117, check here X27 through 31.			
ΕĽ	27	Capital stock, trust p	rincipal, or current funds			
ŚÑ	28	Paid-in or capital surplus,	or land, building, and equipment fund			
o E	29	Retained earnings, accumu	lated income, endowment, or other funds	635,656.	904,520.	
ŘŠ	30		und balances(see instructions)	635,656.	904,520.	
	31	Total liabilities and i (see instructions)	net assets/fund balances	635,656.	904,520.	
Par		Analysis of Chan	ges in Net Assets or Fund Balanc	es		
1	Total	I net assets or fund ba	alances at beginning of year- Part II, colur d on prior year's return)	mn (a), line 30 (must ag	ree with	635,656.
2		r amount from Part I,			2	268, 864.
3		increases not included in lir			3	===,,===
4		lines 1, 2, and 3			4	904,520.
5	Decrea	ases not included in line 2 (ıtemize) ►		5	
6	Total	I net assets or fund ba	alances at end of year (line 4 minus line 5))- Part II, column (b), Iir	ne 30 6	904,520.

		the kınd(s) of property sold (e.g., ree, or common stock, 200 shares MLC		(b) How acqui P — Purchas D — Donatio	e (month, day, year)	
1 a	N/A				 	
b						
c						
d						<u> </u>
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sale		(h) Gain or (e) plus (f) m	
а						
b						
				-		
d						
е						
	Complete only for assets shown	ng gain in column (h) and owned by			(I) Gains (Col	
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if ar		gain minus column (k than -0-) or Losses (fr	
a						
b						
С						
d						
е						
2	Capital gain net income or (net	capital loss). — If gain, also	enter in Part I, line 7 ter -0- in Part I, line 7		2	
3	Net short-term capital gain or (I	oss) as defined in sections 1222(5) a	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	
Par	Qualification Under	Section 4940(e) for Reduced	Tax on Net Investmen	nt Income		
(For	optional use by domestic private	foundations subject to the section 4	940(a) tax on net investmen	t income.)	N/A	
lf and	tion 4940(d)(2) applies, leave th	is nort blank				
11 560	tion 4540(d)(z) applies, leave th	is part blank			_	_
Was	the foundation liable for the sect	ion 4942 tax on the distributable am	ount of any year in the base	period?	Yes	∐ No
lf 'Ye	s,' the foundation does not quali	fy under section 4940(e). Do not cor	nplete this part.			<u></u> _
1	Enter the appropriate amount in	n 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 assi	ets (c	(d) Distribution column (b) divided	
	2011					
•——	2010					
	2009					
	2008					
	2007					<u> </u>
			· · · · · · · · · · · · · · · · · · ·		Ī	
2	Total of line 1, column (d)				2	
3	Average distribution ratio for the number of years the foundation	e 5-year base period— divide the tota has been in existence if less than 5	al on line 2 by 5, or by the years		3	
				-		
4	Enter the net value of noncharit	table-use assets for 2012 from Part 2	X, line 5		4	
5	Multiply line 4 by line 3 .				5	
6	Enter 1% of net investment inco	ome (1% of Part I, line 27b)			6	
7	Add lines 5 and 6				7	
8	Enter qualifying distributions fro	om Part XII, line 4			8	
	If line 8 is equal to or greater the Part VI instructions.	nan line 7, check the box in Part VI,	line 1b, and complete that p	art using a 1	% tax rate. See the	9

	n 990-PF (2012) The Matthew Marks Charitable Trust	27-	6976	692		F	age 4
Pa	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948-	- see	instru	ctions)		
1 :	a Exempt operating foundations described in section 4940(d)(2), check here						
	Date of ruling or determination letter (attach copy of letter if necessary— see instrs)						
ı	b Domestic foundations that meet the section 4940(e) requirements in Part V,	-	1				<u>17.</u>
	check here ► 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, column (b)						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable						
	foundations only. Others enter -0-)		2				0.
3	Add lines 1 and 2	,	3_				<u>17.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -(J-),	4				0.
5	Tax based on investment incomeSubtract line 4 from line 3. If zero or less, enter -0- Credits/Payments:		5				<u>17.</u>
6	a 2012 estimated tax pmts and 2011 overpayment credited to 2012						
	b Exempt foreign organizations — tax withheld at source.						
	Tax paid with application for extension of time to file (Form 8868)	17.					
	Backup withholding erroneously withheld 6 d						
7	Total credits and payments. Add lines 6a through 6d	-	7				17.
8	Enter any penalty for underpayment of estimated tax. Check here 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				0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter theamount overpaid	▶	10				
11	Enter the amount of line 10 to be; Credited to 2013 estimated tax.	▶	11				
Pa	Statements Regarding Activities					·	
1:	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did					Yes	No
	participate or intervene in any political campaign?				1 a		Х
ŀ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?				1 b		X
	If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any material or distributed by the foundation in connection with the activities	ıls put	blishe	d			
	Did the foundation file Form 1120-POL for this year?				1 c		Х
•	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.						
	(1) On the foundation S 0. (2) On foundation managers S Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imp		00	0.	ı		
•	foundation managers \$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Jaca (OII		ĺ		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			ľ	2		Х
_	If 'Yes,' attach a detailed description of the activities						
9	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, a	rticlei					
3	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the change	S	•		3		X
4 :	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4 a		Х
1	f 'Yes,' has it filed a tax return on Form 990-T for this year?				4 b	N	/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5		X
	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:				ľ		1
	By language in the governing instrument, or			Y	ì		
	• By state legislation that effectively amends the governing instrument so that no mandatory directions to	hat co	onflict	ļ			
	with the state law remain in the governing instrument?			-	6		X
7				ļ	7	Х	
81	a Enter the states to which the foundation reports or with which it is registered (see instructions)	_		- 1	ļ		
	NY			_	i		
,	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			ľ	8ь	Χ	
0	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)	(3) ~	4012	(1)(5)			
9	for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV) 3f 'Yes,' com	plete	Part)	Y/~/ [9		Х
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing the	neir n:	ames	Ţ			
	and addresses			}	10		X
BAA				For	m 99 (0-PF ((2012)

Pa	Int VIII-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		х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified advisory privileges? If 'Yes,' attach statement (see instructions)	person had	12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption apply	plication?	13	X	
- 4	Website address N/A				- - -
		<u> 212-2</u> 10011			<u> </u>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu oForm 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the year	► 15	Ņ/A	•	∐ N/A
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authobank, securities, or other financial account in a foreign country?	rity over a	16	Yes	No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1 If 'Yes,' enter the name foreign country ►	of the			
Pa	মি WILES 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
1 8	a 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?	res XNo			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	es X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	es X No		ľ	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	′es XNo			
	(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)?	es 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.)	′es XNo			
1	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)?		1 b	N	/A
	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?		1 c		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)):		ì		
	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?	res X No			
	If 'Yes,' list the years ▶ 20 _ , 20 _ , 20 , 20	<u> </u>			
	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.)		2 b	N	/A
	c If the provisions of section 4942(a)(2) are being applied to the years listed in 2a, list the years here. 20 , 20 , 20 , 20				/ 1
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes X No			
	b if 'Yes,' did it have excess business holdings in 2012 as a result o(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 holdings in 2012)		24	A)	/2
_	determine if the foundation had excess business holdings in 2012.).		3 b	N	/A
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4 a	التي	Х
	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?	_	4 b		Х
BA/	A	F	orm 99	0-PF	(2012)

Part VII P (Statements Described Activities						6692	Page 6
Part VII-B Statements Regarding Activit		n 4/20 May Be Req	uired	(continue	ed)	lu-Willes-La	ar naugitu en
5 a During the year did the foundation pay or inci (1) Carry on propaganda, or otherwise attem	•	nn (section 4045(e)\2		□ v	₩		
(2) Influence the outcome of any specific pub				Yes	X	NO	
on, directly or indirectly, any voter registr	ation drive?	••		Yes	Χı	から 日本	
(3) Provide a grant to an individual for travel,				Yes	X	No 🎉	
(4) Provide a grant to an organization other t in section 509(a)(1), (2), or (3), or section	han a charitable, etc, oi n 4940(d)(2)? (see instri	rganization described uctions)		Yes	X	No	
(5) Provide for any purpose other than religion educational purposes, or for the prevention	ous, charitable, scientific on of cruelty to children	c, literary, or or animals?		Yes	X	No	
b If any answer is 'Yes' to 5a(1)-(5), didany of the described in Regulations section 53.4945 or in (see instructions)?			ions e			5 b	N/A
Organizations relying on a current notice rega	ardıng dısaster assıstanı	ce check here		•			
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon		emption from the	N/A	Yes		No	
If 'Yes,' attach the statement required by Reg	ulations section 53 4945	5-5(d)					
6 a Did the foundation, during the year, receive a on a personal benefit contract?				Yes	X	Vo	
b Did the foundation, during the year, pay prem	iums, directly or indirec	tly, on a personal bene	fit contra	ect?		6 b	X
If 'Yes' to 6b, file Form 8870 7a At any time during the tax year, was the foun-	dation a party to a prob	ihitad tav shaltar transs	action?	☐Yes	X	Vo (1)	
b If 'Yes,' did the foundation receive any proces						/A 7b	F-12
Part VIII Information About Officers, Dir						,	
and Contractors	·						
1 List all officers, directors, trustees, foundation	on managers and their o	compensation (see inst	ructions).			
	(b) Title, and average	(c) Compensation		ntributions t loyee bene		(e) Expense other alle	
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	plans	and deferr npensation	ed	other and	Jwances
Matthew Marks	Trustee	0.		C) .		0.
830 Greenwich Street	0		ł				
New York, NY 10014							
_Jack_Bankowsky	Trustee	0.	Í	C).		0.
860 Greenwich St	0						
New York, NY 10014	m		 -		\rightarrow		
Isabel Ostrer 241 Central Park West New York, NY 10024	Trustee 0	0.		().		0.
Lily Ostrer	Trustee	0.		().		0.
241 Central Park West	0						
New YOrk, NY 10024	<u> </u>	<u> </u>	<u> </u>				
2 Compensation of five highest-paid employed					_		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	emp plans	ntributions t loyee bene and deferr npensation	fit ed	(e) Expense other all	owances
None							
					- 1		
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]				
Total number of other employees paid over \$50,000	<u>, </u>		·		P		0
BAA	TEEA0306L 1	2/25/12	_			Form 990-	PF (2012)

Form 990-PF (2012) The Matthew Marks Charitable Trust Part: VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Empand Contractors (continued)	976692 Page 7 Dloyees ,
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	
Total number of others receiving over \$50,000 for professional services	<u> </u>
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	Expenses
2	_
3	-
4	
⁷	-
	-
Part IX:By 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.	Amount
1 N/A	-
2	+
·	-
	-
All other program-related investments See instructions. 3	
	_
Total. Add lines 1 through 3	• 0.
BAA	Form 990-PF (2012)

For	m 990-PF (2012) The Matthew Marks Charitable Trust	27-6976692	Page 8
Pa	rt X Minimum Investment Return (All domestic foundations must complete this part. see instructions.)	Foreign found	dations,
	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	1 a	
	b Average of monthly cash balances	1 b	664,941.
	c Fair market value of all other assets (see instructions)	1 c	
	d Total (add lines 1a, b, and c)	1 d	664,941.
	e Reduction claimed for blockage or other factors reported on lines 1a and 1c	= :	
	(attach detailed explanation) 1 e	o. ^	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	664,941.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)		
=	Net value of noncharitable-use assetsSubtract line 4 from line 3. Enter here and on Part V, line 4	5	9,974.
5 6	Minimum investment return Enter 5% of line 5	6	654,967. 32,748.
	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private ope	1 4	
- 41	and certain foreign organizations check here \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	_	20013
1	Minimum investment return from Part X, line 6	1	32,748.
2	a Tax on investment income for 2012 from Part VI, line 5	7.	
	b Income tax for 2012. (This does not include the tax from Part VI.)		
	c Add lines 2a and 2b	2 c	17.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	32,731.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	32,731.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amountas adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	32,731.
Pa	rt 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	1 a	32,000.
	b Program-related investments – total from Part IX-B	1 b	
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)	3 a	
	b Cash distribution test (attach the required schedule).	3 b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	32,000.

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.

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)

Adjusted qualifying distributions Subtract line 5 from line 4

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Form 990-PF (2012)

32,000.

5

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				22 721
2 Undistributed income, if any, as of the end of 2012				32,731.
a Enter amount for 2011 only		ŀ	0.	
b Total for prior years 20 , 20 , 20		0.	- 0.	
3 Excess distributions carryover, if any, to 2012.				
a From 2007				
b From 2008				
c From 2009				
d From 2010				
e From 2011 1, 101.				
f Total of lines 3a through e	1,101.			
4 Qualifying distributions for 2012 from Part				
XII, line 4: \$ 32,000.		-		
a Applied to 2011, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required – see instructions)		0.		
c Treated as distributions out of corpus				
(Election required – see instructions)	0.			20 000
d Applied to 2012 distributable amount				32,000.
e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2012	0.			731.
(If an amount appears in column (d), the	731.			/31.
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	370.			ı
'	370.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut-				
ed income for which a notice of deficiency has been issued, or on which the section				
4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2011 Subtract line 4a from				
line 2a Taxable amount — see instructions			0.	<u></u>
f Undistributed income for 2012. Subtract lines				
4d and 5 from line 1. This amount must be				
distributed in 2013				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0			
•	0.			
8 Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a	370.			
10 Analysis of line 9	370.			······································
a Excess from 2008				
b Excess from 2009		j		
c Excess from 2010			Ì	
d Excess from 2011 . 370.				
e Excess from 2012.				

Part XIV Private Operating Foundar	s <u>Unaritable</u> li ons (see instr	Trust	rt VII-A guestion	<u>27-6976692</u>	
1 a If the foundation has received a ruling or is effective for 2012, enter the date of the	determination letter				N/A
b Check box to indicate whether the founda	•	erating foundation o	described in section	4942(j)(3) or [4942(j)(5)
2 a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year (a) 2012	(b) 2011	Prior 3 years (c) 2010	(d) 2009	(e) Total
investment return from Part X for each year listed				(4) 200	
b 85% of line 2ac 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					
 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:					
 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 assets at any time during the	(Complete this e year — see in	part only if the structions.)	foundation had	\$5,000 or more	in
Information Regarding Foundation Mana List any managers of the foundation who close of any tax year (but only if they have None	nave contributed mi	ore than 2% of the than \$5,000) (See	total contributions re section 507(d)(2).)	ceived by the found	lation before the
b List any managers of the foundation who a partnership or other entity) of which the None	own 10% or more of foundation has a 1	f the stock of a cor 0% or greater inter	rporation (or an equa rest.	lly large portion of t	the ownership of
2 Information Regarding Contribution, Granch Check here X if the foundation only requests for funds If the foundation make complete items 2a, b, c, and d.	nakes contributions s gifts, grants, etc	to preselected cha (see instructions) t	arıtable organizations o individuals or organ	nizations under othe	pt unsolicited er conditions,
a The name, address, and telephone number	er or e-mail of the p	erson to whom app	plications should be a	addressed	
b The form in which applications should be	submitted and infor	mation and materia	als they should includ	le	
c Any submission deadlines					
d Any restrictions or limitations on awards,	such as by geograp	hical areas, charita	able fields, kinds of in	stitutions, or other	factors.

3 Grants and Contributions Paid During the	ear or Approved for Fut	ure Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient		
a Paid during the year	,			
a Paid during the year See Statement 1				
Total			▶ 3a	32,000.
b Approved for future payment				
Total			▶ 31	

nter gross amounts unless otherwise indicated.	Unrelated business income		Excluded b	y 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 (See instructions.)
a			code		
b	 		 		
c	 	·	++		
d			 	· ·	
e			 		
<u> </u>	 				
g Fees and contracts from government agencies			1		
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					864.
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:			in the first of		with militarias and the comment
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				- I	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:	74 miles	at all the state	多种型	小小小小小小小小小小小小小小小小小小小小小小小小小小小小小小小小小小小小	的种类的种种
a					
b					
С					
d					
е					
2 Subtotal Add columns (b), (d), and (e).	F188 F18		, 54 E		864.
3 Total. Add line 12, columns (b), (d), and (e)				13	864.
ee worksheet in line 13 instructions to verify calculat	ions.)				
art XVI-B. Relationship of Activities to th	e Accomplis	shment of Exempt	Purpos	 es	
The state of the s					
Line No. Explain below how each activity for which		ted in column (a) of Da	rt Y\/I A a	entributed importantly	to the

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)
N/A	

BAA

TEEA0502L 12/23/12

Form **990-PF** (2012)

Form 990-PF (2012) The Matthew Marks Charitable Trust 27-6976692 Part XVIII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

de re	d the organization directly scribed in section 501(c) lating to political organiza	of the Code (oth itions?	her than section	501(c)(3) organ	nizatións) o	r organization r in section 5	n 527,			Yes	No
	ansfers from the reporting	j toundation to a	a noncharitable	exempt organiza	ation of:				43)	į	۰
) Cash) Other assets							Ĺ	1 a (1)	-+	<u>X</u>
• •	her transactions:								1 a (2)		X
	Sales of assets to a nor	acharitable even	nnt organization	,				-	1 b (1)		v
•	Purchases of assets from		, •					-	1 b (2)		<u>X</u>
` '	Rental of facilities, equi		, ,	. IIZation					1 b (3)		<u>_x</u>
•	Reimbursement arrange	•	4000.0					\vdash	1 b (4)	- 1	$\frac{\Lambda}{X}$
• •	Loans or loan guarantee							-	1 b (5)		$\frac{X}{X}$
•	Performance of services		o or fundraising	solicitations				H	1 b (6)	\rightarrow	<u> X</u>
• •	naring of facilities, equipm	·	-		ees			F	1 c	$\neg \uparrow$	$\frac{\cdot \cdot \cdot}{X}$
				, , ,				_	 -		
d If the ar	the answer to any of the a e goods, other assets, or a y transaction or sharing a	above is 'Yes,' c services given b arrangement, sh	complete the folloy the reporting ow in column (d)	lowing schedule foundation. If th) the value of the	. Columr (b) e foundatio e goods, ott	i should alwa on received le her assets, o	ys show the t ess than fair i r services re	fair mar market ceived,	ket value value in	of	
(a) Line	no (b) Amount involved	(c) Name of	noncharitable exem	pt organization	(d) Des	scription of trans	fers, transaction	is, and sh	arıng arrang	ements	
N/A_											
				<u> </u>							
		ļ <u>.</u>									
						<u>-</u> .					
											
		ļ									
		 									
	<u> </u>	 									
		 									
de	the foundation directly or scribed in section 501(c)	of the Code (oth	ited with, or rela her than section	ated to, one or m 501(c)(3)) or in	ore tax-exe section 52	empt organız 7? .	ations		Yes	X	٧o
	'Yes,' complete the follow (a) Name of organizat		(b) Type	of organization		(5)	Description	of relati	innshin		
NI / A	(a) Name of organizat	1011	(b) Type	or organization	 -	(c)	Description	Or Telati	Orisinp		
N/A											
		+									
		 +							·		
			 								
	Under penalties of penjury, I declare	that I have examined t	this return, including a	ccompanying schedules	and statement	s, and to the best	of my knowledge a	and belief, i	it is true,		
Sign	Under penalties of perjury, I declare correct, and complete Declaration	of preparer other the	han taxpayer) is base	ed on all information o	•		edge	·	May the IR	with the	e [
Here	Maniote	7		<u> </u>		<u>istee</u>			(see instru	ctions)?	~
	Signature of officer or trustee Print/Type preparer's na	me	Preparer's s	Date	Title	ate / /		υ. To	I XY PTIN	es	No
				· //	,	//		△" [
Paid	Robin Stats			Statsky		10/28/18		ed }	200228	109	
Prepar	· · · · · · · · · · · · · · · · · · ·	Robin Stat					Firm's EIN				
Use O			8th Street	·			Dham	(212)	760 4	204	
	11	New York, 1	NY 10024				Phone no		769-4		2010
BAA								l	Form 990 -	-rr (2	2012)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2012

Name of the organization		Employer identification number
The Matthew Marks Charitable	e Trust	27-6976692
Organization type(check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a pri	vate foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the	General Rule or a Special Rule	
•	rganization can check boxes for both the General Rule and a	Special Rule See instructions
	rgaritzation can check boxes for both the deficial fide and a	Special Naie. See Histractions.
General Rule	CT 000 DE 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(
Contributor. (Complete Parts I and II.)	EZ, or 990-PF that received, during the year, \$5,000 or more	(in money or property) from any one
,		
Special Rules		
For a section 501(c)(3) organization filing	g Form 990 or 990-EZ that met the 33-1/3% support test of the	e regulations under sections
509(a)(1) and 170(b)(1)(A)(vi) and received (2) 2% of the amount on (i) Form 990. P	ved from any one contributor, during the year, a contribution o art VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I a	f the greater ofl) \$5,000 or nd II
	nization filing Form 990 or 990-EZ that received from any one	
total contributions of more than \$1,000 fe	or use <i>exclusively</i> for religious, charitable, scientific, literary, or	educational purposes, or
the prevention of cruelty to children or a	, ,	
For a section 501(c)(7), (8), or (10) organ	nization filing Form 990 or 990-EZ that received from any one ous, charitable, etc, purposes, but these contributions did not	total to more than \$1,000.
If this box is checked, enter here the total	al contributions that were received during the year for arexclus	<i>sively</i> religious, charitable, etc,
religious, charitable, etc, contributions of	ts unless the General Rule applies to this organization because	► S
-		<u> </u>
Caution: An organization that is not covered by the General	al Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or eck the box on line H of its Form 990-EZ or on Part I, line 2, of its Form 991	990-PF) but it must 0-PF, to certify that it does not
meet the filing requirements of Schedule B ((Form 990, 990-EZ, or 990-PF).	2.1. , to corting that it does not
BAA For Paperwork Reduction Act Notice,	see the Instructions for Form 990, 990EZ, Schedule B	(Form 990, 990-EZ, or 990-PF) (2012)
or 990-PF.		

		-	
Schedule	B (Form 990, 990-EZ, or 990-PF) (2012)	Page	1 of 1 of Part 1
	atthew Marks Charitable Trust		976692
	Contributors (see instructions). Use duplicate copies of Part I if additional space is need		310032
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Matthew Marks Gallery 523 West 24th Street NY, NY 10011	 \$300,000.	Person X Payroll Noncash Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 	Person Payroll Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number ——–	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	 		Person

(a) Number (b) Name, address, and ZIP + 4 Noncash

Person Payroll Noncash

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2012)

(c) Total contributions (Complete Part II if there is a noncash contribution)

(d) Type of contribution

(Complete Part II if there is a noncash contribution)

Page

1 to

of Part II

Name of organization

The Matthew Marks Charitable Trust

Employer identification number

27-6976692

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
	N/A		
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	-
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	
BAA		Schedule B (Form 990, 990-E	Z, or 990-PF) (2

1 to

of Part III

Name of organization

Employer identification number 27-6976692

The Matthew Marks Charitable Trust

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 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

N/A

	Ose duplicate copies of Fart III if additional s	space is needed	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	N/A		
		40	
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee

					Page 2
Note. Only	are filing for an Additional (Not Automatic) 3-M				► <u>X</u>
• If you	/ complete Part II			sly filed Form 8868.	
	Additional (Not Automatic) 3-Month			o copies needed)	
· dre ite -	Maditional (Not Matomatic) 5 month	Exterision of		identifying number, see	instruction
 -	Name of exempt organization or other filer, see instructions		Line mei s	Employer identification number	
Type or					
print	The Matthew Marks Charitable	Trust		27-6976692	
Cila bu tha	Number, street, and room or suite number. If a P.O. box, se			Social security number (SSN)	
File by the extended due date for filing your	Robin Statsky, CPA 177 West 88th Street				
return See instructions	City, town or post office, state, and ZIP code. For a foreign	address, see instructi	ons		
	New York, NY 10024				
Enter the	Return code for the return that this application	is for (file a ser	parate application for each return)		04
Application	on	Return Code	Application Is For		Return Code
	or Form 990-EZ	01	未被 含物管体。	พระการ Justici และสังเทยย์เปลาะ กระส ิริเค รี	
Form 990-		02	Form 1041-A	Alfin Livin day in cast a stationary and the in-	08
) (individual)	03	Form 4720		09
Form 990-	, 	04	Form 5227		10
Form 990	T (section 401(a) or 408(a) trust)	05	Form 6069		11
Form 990	T (trust other than above)	06	Form 8870		12
Teleph	none No. > 212-241-2300		-		
If theIf thiswhole gro	ooks are in care of ► Tiffany Pollack none No. ► 212-241-2300 organization does not have an office or place of is for a Group Return, enter the organization's up, check this box ► If it is for part of the extension is for	of business in th four digit Group	e United States, check this box		► ☐ s is for the of all
 If the If this whole gromembers 4 rec 5 For 6 If the 	organization does not have an office or place of is for a Group Return, enter the organization's up, check this box If it is for part of the extension is for Juest an additional 3-month extension of time to calendar year 2012, or other tax year begue tax year entered in line 5 is for less than 12 in Change in accounting period	of business in the four digit Group the group, checurated the group, checurated the group that the group the group the group that the group t	e United States, check this box Exemption Number (GEN) k this box and attach a list wi	, 20	of all
 If the If this whole gromembers 4 rec 5 For 6 If this 7 Stat 8 a If this non 	organization does not have an office or place of is for a Group Return, enter the organization's up, check this box If it is for part of the extension is for quest an additional 3-month extension of time of the extension is for the extension of time of the extension of	of business in the four digit Group, the group, checulated in the group in	e United States, check this box Exemption Number (GEN) Ek this box and attach a list with this box. and attach a list with the second part of the	, 20 Final return pt status 8as	of all
• If the • If this whole gro members 4 I rec 5 For 6 If thi 7 Stat 8a If thi nonr b If thi	organization does not have an office or place of its for a Group Return, enter the organization's up, check this box. If it is for part of the extension is for liquest an additional 3-month extension of time it calendar year 2012, or other tax year begins tax year entered in line 5 is for less than 12 in Change in accounting period in detail why you need the extension. A sapplication is for Form 990-BL, 990-PF, 990-	of business in the four digit Group the group, check in the group. T, 4720, or 6069 or 6069, enter a	e United States, check this box Exemption Number (GEN) Exist this box and attach a list with this box. and attach a list with this box. and ending eason. Initial return tification of tax exemply, enter the tentative tax, less any any refundable credits and estimate	, 20 Final return pt status 8a \$	of all
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Federal Statements

Page 1

The Matthew Marks Charitable Trust

27-6976692

Statement 1 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee <u>Relationship</u>	Found- ation <u>Status</u>	Purpose of Grant	Amount
Coalition for the Homeless 129 Fulton Street New York, NY 10038	None	501(c)(3)	support for homeless	\$ 5,000.
LA Gay & Lesbian Center 1625 N Shroeder Blvd Los Angeles, CA 90028	None	501(c)(3)	Medical Research	4,000.
Hetrick Martin Institute 2 Astor Pl New York, NY 10003	None	501(c)(3)	Education	5,000.
The Point Foundation 5757 Wilshire Blvd Los Angeles, CA 90036	None	501(c)(3)	EDucation and Medical Support	5,000.
GLAAD 104 West 29th Street NY, NY 10001	None	501(c)(3)	Medical and Education	2,000.
Doctors without Borders 333 7th Ave 2nd Flr New York, NY 10001	None	501(c)(3)	Medical Care	5,000.
Tiyatien Health PO Box 426133 Cambridge, MA 02142	None	501(c)(3)	Medical Care	1,000.
Make the Road 301 Grove Street Brooklyn, NY 11237	None	501(c)(3)	Low income Latinos	5,000.
			Total	\$ 32,000.