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990-PF

Department of the Treasury

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust

Treated as a Private Foundation Note The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

Open to Public Inspection

For calendar year 2012 or tax year beginning 2012, and ending 20 Name of foundation MICHAEL E. MARKS FAMILY FOUNDATION A Employer identification number C/O BRIAN KUEHNIS, CPA 77-0500312 Number and street (or P O box number if mail is not delivered to street address) B Telephone number (see instructions) Room/suite (650) 216-2356 P.O. BOX 6978 City or town, state, and ZIP code If exemption application is pending, check here REDWOOD CITY, CA 94063 G Check all that apply Initial return Initial return of a former public charity D 1 Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach Address change Name change computation H Check type of organization | X | Section 501(c)(3) exempt private foundation If private foundation status was termina Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A) check here . J Accounting method | X Cash I Fair market value of all assets at end If the foundation is in a 60-month termination of year (from Part II, col (c), line Other (specify) under section 507(b)(1)(B), check here . 6,097,136. (Part I, column (d) must be on cash basis) *16)* ▶ \$ (d) Disbursements Part I Analysis of Revenue and Expenses (The (a) Revenue and (b) Net investment (c) Adjusted net for charitable total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in expenses per ıncome ıncome purposes books column (a) (see instructions)) (cash basis only) 440,730. Contributions, gifts, grants, etc , received (attach schedule) ... if the foundation is not required to Check ▶ attach Sch B 2 3 Interest on savings and temporary cash investments 279,866 279,866. ATCH 1 Dividends and interest from securities b Net rental income or (loss) 24,670 6 a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 74,317 Capital gain net income (from Part IV, line 2) . Net short-term capital gain . . Income modifications 10 a Gross sales less returns and allowances · · · · b Less Cost of goods sold . c Gross profit or (loss) (attach schedule) 11,299 Other income (attach schedule) ATCH 2 756,565 354,183 Total. Add lines 1 through 11 . 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) **b** Accounting fees (attach schedule) c Other professional fees (attach schedule). . . 17 20,160 18 Taxes (attach schedule) (see instructions)ATCH . 3 A 19 20 19 Depreciation (attach schedule) and depletion. 된 21 8 22 Travel, conferences, and meetings 22 Printing and publications 5,344. 5,344. 23 Other expenses (attach schedule) ATCH .4. . 24 Total operating and administrative expenses. 25,504 5,344 Add lines 13 through 23 858,050 858,050. Contributions, gifts, grants paid 25 883,554. 5,344. 858,050 Total expenses and disbursements Add lines 24 and 25 Subtract line 26 from line 12 -126,989. a Excess of revenue over expenses and disbursements . . 348,839. b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-).

JSA For Paperwork Reduction Act Notice, see instructions.

2E1410 1 000 RW1859 G58V Form 990-PF (2012)

		Attached schedules and amounts in the	Beginning of year	End of	year
Li	art II	Balance Sheets description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	136,738.	293,200.	293,200.
	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 ▶			
ţ	8	Inventories for sale or use			
ssets	9	Prepaid expenses and deferred charges			<u> </u>
ä	10 a	Investments - U S and state government obligations (attach schedule).			
	b	Investments - corporate stock (attach schedule) ATCH 5	3,980,076.	4,250,774.	4,739,146.
	С	Investments - corporate bonds (attach schedule) ATCH 6	259,183.	172,996.	159,211.
	11	Investments - land, buildings, and equipment basis Less accumulated depreciation			
	12	(attach schedule)			
	13 14	Investments - other (attach schedule) ATCH 7	1,213,508.	747,149.	905,579.
	15	equipment basis Less accumulated depreciation (attach schedule)			
	16	Other assets (describe) Total assets (to be completed by all filers - see the			
	10	instructions Also, see page 1, item I)	5,589,505.	5,464,119.	6,097,136.
_	17	Accounts payable and accrued expenses	3,303,303.	5,404,115.	0,057,130.
		<u> </u>			
' A	18	Grants payable			
Liabilities	19	Deferred revenue		·	
藚	20	Loans from officers, directors, trustees, and other disqualified persons			
흔	21	Mortgages and other notes payable (attach schedule)		1,603.	
	22	Other liabilities (describe ATCH 8)		1,005.	
	23	Total liabilities (add lines 17 through 22)	o	1,603.	
_		Foundations that follow SFAS 117, check here		1,000.	
Balances	24	and complete lines 24 through 26 and lines 30 and 31.			
an	24 25	Unrestricted			
æ		Temporarily restricted			
핕	26	Permanently restricted			
교		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ► X		ĺ	
ō	27	Capital stock, trust principal, or current funds			
ets	28	Paid-in or capital surplus, or land, bldg , and equipment fund	-		
SS	29	Retained earnings, accumulated income, endowment, or other funds	5,589,505.	5,462,516.	
Net Assets or Fund	30	Total net assets or fund balances (see instructions)	5,589,505.	5,462,516.	
ž	31	Total liabilities and net assets/fund balances (see	3,303,303.	3,402,310.	
		instructions)	5,589,505.	5,464,119.	
E		Analysis of Changes in Net Assets or Fund E		3,104,113.	
		net assets or fund balances at beginning of year - Part I		ust agree with	
•		of-year figure reported on prior year's return)			5,589,505.
2	Enter	amount from Part I line 27a	• • • • • • • • • • • • • • • • • • • •	2	-126,989.
2	Otho	r uncreases not included in line 2 (temize)	• • • • • • • • • • • • • • • • • • • •		-120,909.
A	Dune.	r increases not included in line 2 (itemize) ▶			5 460 E10
_	_	ines 1, 2, and 3		· · · · · · · · · 	5,462,516.
5 6	Total	eases not included in line 2 (itemize) ► net assets or fund balances at end of year (line 4 minus li	ne 5) - Part II, column (h)	Ine 30 6	5,462,516.
<u>~</u>	ivial	not absolb of fund balances at end of year time 4 fillings if	no o, - i art ii, colulliii (D),	mic 00 0	5,462,516.

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Part IV Capital Gains	and Losses for Tax on Inve	estment Income	(b) How	(a) Data		
	d describe the kind(s) of property sold (•	acquired P - Purchase	(c) Date acquired	(d) Date sold (mo, day, yr)	
1a SEE PART IV SCHE	DILLE	shs MLC Co)	D - Donation	(mo , day, yr)	. , . , , , ,	
b	DOBE					
<u>c</u>						
d						
e						
(e) Gross sales price	(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or (lo	oss)	
(c) cross sales price	(or allowable)	plus expense of sale		(e) plus (f) mini	ns (a)	
a						
<u>b</u>						
<u>C</u>				=		
<u>d</u>						
e						
Complete only for assets	showing gain in column (h) and owne			Gains (Col (h) g		
(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	COI	(k), but not less to Losses (from co		
<u></u>		5/			<u>-</u>	
b						
C				-		
d	-			· · · · · · · · · · · · · · · · · · ·		
е						
2 Capital gain net income or		gain, also enter in Part I, line 7				
	· ' ' (If	(loss), enter -0- in Part I, line 7	2		74,317.	
	n or (loss) as defined in sections 12					
	rt I, line 8, column (c) (see insti					
Part I, line 8			3		. 0	
	Under Section 4940(e) for Rec					
(For optional use by domesti	c private foundations subject to the	e section 4940(a) tax on net investi	ment inco	me)		
If section 4940(d)(2) applies,	loave this part blank					
ii section +5+0(u)(2) applies,	leave this part blank					
Was the foundation liable for	the section 4942 tax on the distrib	utable amount of any year in the b	ase perior	42	Yes X No	
	not qualify under section 4940(e)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		_ 100 () 110	
	ount in each column for each year		any entr	es		
(a) Base penod years	(b)	(c)		(d)	-	
Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets	L .	Distribution ra (col (b) divided by	col (c))	
2011	737,483.	5,823,813.			0.126632	
2010	443,870.	4,861,182.			0.091309	
2009	396,379.	4,270,062.			0.092827	
2008	698,048.	5,385,627.			0.129613	
2007	512,703.	6,638,207.			0.077235	
A #24-1-61 4 1 12] _ [0 55	
2 Total of line 1, column (d)),, <u>.</u>	.,.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2		0.517616	
	for the 5-year base period - divide					
number of years the foun	dation has been in existence if less	than 5 years	3		0.103523	
4. Enter the net value of nea		D V Iv 5		-	100 506	
4 Enter the net value of nor	ncharitable-use assets for 2012 fro	m Part X, line 5	4	5,	400,536.	
E. Multiply line 4 by line 2			_		550 000	
5 Multiply line 4 by line 3			5		559,080.	
6 Enter 1% of net investme	ent income (1% of Part I, line 27b)				3 400	
6 Enter 1% of net investme	incline (1/0 OI Fait I, IIIle 2/D).		6		3,488.	
7 Add lines 5 and 6			7		562,568.	
. , to a mice o and o	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •			552,500.	
8 Enter qualifying distribution	B Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete the					
If line 8 is equal to or gr	eater than line 7, check the box i	n Part VI, line 1b, and complete t	hat part	using a 1% tax	rate See the	
Part VI instructions		·				

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Par	tVI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	nstruc	tions)
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1		_	•
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		3,4	88.
	here ► X and enter 1% of Part I, line 27b			
С	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.		3,4	88.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		<u> </u>	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		3,4	88.
6	Credits/Payments		-	
a	2012 estimated tax payments and 2011 overpayment credited to 2012 6a 22, 457.			
	Exempt foreign organizations - tax withheld at source 6b			
	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d		22,4	57.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			1.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		18,9	68.
11	Enter the amount of line 10 to be Credited to 2013 estimated tax ▶ 18,968. Refunded ▶ 11			
Par	t 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		Yes	No
	or intervene in any political campaign?	1a		_ X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the			
	definition)?	1b		Х
	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			
С	Did the foundation file Form 1120-POL for this year?	1c		X
d				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
-	foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
-	If "Yes," attach a detailed description of the activities		-	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,			
	or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	1 1		Х
	If "Yes," has it filed a tax return on Form 990-T for this year?			Х
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			
	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?	6	X	<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	ļ
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
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 ² If "No," attach explanation	8b	_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)? If "Yes," complete			
	Part XIV	9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and			
	addresses ATCH 9	10	X	
		Form 9 9	0-PF	(2012)

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Pai	rt VII-A Statements Regarding Activities (continued)		1	
11	, and the second of the second			١
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions	11		X
12				
	person had advisory privileges? If "Yes," attach statement (see instructions)			_ X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	_13_	X	<u> </u>
	Website address ► N/A			
14	The books are in care of ▶ BRIAN KUEHNIS, CPA Telephone no ▶ 650-216	-235	<u> </u>	
	Located at ▶P.O. BOX 6978 REDWOOD CITY, CA ZIP+4 ▶ 94063			
15	, , , , , , , , , , , , , , , , , , , ,	• • •	>	
	and enter the amount of tax-exempt interest received or accrued during the year		1	T
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority	1	Yes	
	over a bank, securities, or other financial account in a foreign country?	16	ļ	X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes," enter the name of	•		
-	the foreign country			
Pa	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required		1	Γ
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 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? Yes X No			ĺ
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			1
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			1
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			1
	termination of government service, if terminating within 90 days)	1		
C	of fany answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	۱		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		\vdash
_	Organizations relying on a current notice regarding disaster assistance check here	İ		
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			X
	were not corrected before the first day of the tax year beginning in 2012?	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			ĺ
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			ĺ
•	that 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?			
		į		
	If "Yes," list the years 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		х
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		 -	—
·				l
3 2	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
36	at any time during the year?			
,	of "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or			1
•	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the	1		1
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			1
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
				4

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

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3 NONE

Total. Add lines 1 through 3.

All other program-related investments. See instructions

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreit see instructions.)	gn foundat	ions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	4,657,041.
þ	Average of monthly cash balances	1b	134,443.
С		1c	691,294.
d		1d	5,482,778.
е	Reduction claimed for blockage or other factors reported on lines 1a and		<u> </u>
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3		3	5,482,778.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see		
		4	82,242.
5	Instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	5,400,536.
6	Minimum investment return. Enter 5% of line 5	6	270,027.
Pa	Text I 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 provided in the complete this provi	part)	
1	Minimum investment return from Part X, line 6	1	270,027.
2a			
b	Income tax for 2012 (This does not include the tax from Part VI)	1	
С	Add lines 2a and 2b	2c	3,488.
3	Distributable amount before adjustments Subtract line 2c from line 1		266,539.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	266,539.
6	Deduction from distributable amount (see instructions)	6	
7	Deduction from distributable amount (see instructions) Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	266,539.
Pa	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	_1a	858 , 050.
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		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	858,050.
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	3,488.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	854,562.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when ca qualifies for the section 4940(e) reduction of tax in those years	culating wh	nether the foundation

	rt XIII Undistributed Income (see Instruc	etions)			Page
	All Character meeting (cost motivation	(a)	(b)	(c)	(d)
1	Distributable amount for 2012 from Part XI,	Corpus	Years prior to 2011	2011	2012
_	line 7			·	266,539.
2	Undistributed income, if any, as of the end of 2012				
а	Enter amount for 2011 only				
_	Total for pnor years 20 10 ,20 09 ,20 08			***	
3	Excess distributions carryover, if any, to 2012				
	From 2007				
		1,662,083.			
	Total of lines 3a through e	1,002,003.			
4	Qualifying distributions for 2012 from Part XII, line 4 > \$ 858,050.				
_					
	Applied to 2011, but not more than line 2a				
Ь	Applied to undistributed income of prior years (Election required - see instructions)				
С	Treated as distributions out of corpus (Election required - see instructions)				
4	Applied to 2012 distributable amount	-\fi		······································	266,539.
	Remaining amount distributed out of corpus	591,511.			200,333
	Excess distributions carryover applied to 2012	032/0221			
•	(If an amount appears in column (d), the same				
6	amount must be shown in column (a)) Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,253,594.			
	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	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				
е	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		ĺ		
	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)				
9	Excess distributions carryover to 2013.				
	Subtract lines 7 and 8 from line 6a	2,253,594.			
0	Analysis of line 9				
а	Excess from 2008 353, 059.				
b	Excess from 2009 188, 382.				
c	Excess from 2010 658,808.				
d	Excess from 2011 461,834.		j		
e	Excess from 2012 591,511.				

Pa	rt XIV Private Oper	rating Foundations	(see instructions and	Part VII-A, question	n 9)	NOT APPLICABLE
	If the foundation has	received a ruling or d	etermination letter tha	t it is a private opera		
	foundation, and the rulin				. ▶∟	
b	Check box to indicate wh		private operating found		4942()(3) or 4942(J)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years	·	(e) Total
	justed net income from Part I or the minimum investment	(a) 2012	(b) 2011	(c) 2010	(d) 2009	
	return from Part X for each					
	year listed		<u> </u>			
D	85% of line 2a					
С	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					
е	Qualifying distributions made					
	directly for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					-
а	alternative test relied upon "Assets" alternative test - enter					
-	(1) Value of all assets					
	(2) Value of assets qualifying under section					
b	4942(j)(3)(B)(i) "Endowment" alternative test-	-				
	enter 2/3 of minimum invest- ment return shown in Part X,				I	
	line 6 for each year listed					_
С	"Support" alternative test - enter					
	(1) Total support other than gross investment income					
	(interest, dividends rents,					
	payments on securities loans (section 512(a)(5)),			1		
	or royalties)	 		~		
	public and 5 or more					
	exempt organizations as provided in section 4942 (j)(3)(B)(iii)					
	(3) Largest amount of sup- port from an exempt					
	organization (4) Gross investment income					
Pa		ary Information (C	omplete this part	only if the founda	ation had \$5,000	or more in assets
_	at any time o	during the year - see	e instructions.)			
1	Information Regarding					ad b., tha fa.,.d.t
а	List any managers of before the close of any	tax year (but only if th	ney have contributed in	nore than \$5,000) (Se	e section 507(d)(2))	ed by the foundation
_	ATTACHME List any managers of	NT 11		the steel of a serve		James and an after
U	ownership of a partner					large portion of the
	NONE					
2	Information Regarding	g Contribution, Grant	, Gift, Loan, Scholarsh	ip, etc., Programs:	· · · · · · · · · · · · · · · · · · ·	
	Check here ► X if t unsolicited requests for other conditions, comp	or funds If the founda	ation makes gifts, gra	to preselected charit nts, etc (see instructi	able organizations a ons) to individuals or	nd does not accept r organizations under
	The name, address, a			n to whom applications	should be addressed	
b	The form in which app	lications should be sub	omitted and information	on and materials they s	should include	
С	Any submission deadli	nes				
d	Any restrictions or lift factors	mitations on awards,	such as by geogra	phical areas, charital	ole fields, kinds of	institutions, or other

rt XV Supplementary Information	(continuea)		tura Davis ant	
Recipient Name and address (home or business)	If recipient is an individual,	Foundation	ture Payment	
Name and address (home or business)	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
Paid during the year	or substantial contributor	, souproun		
mou 10				
TCH 12				
Total			▶ 3a	858,0
Approved for future payment				

Page **12**

Part XVI-A Analysis of Income-Produ	cing Activ	vities				
Enter gross amounts unless otherwise indicated		ated business income	Excluded by	y section 512, 513, or 514	(e)	
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)	
a					<u> </u>	
b					<u> </u>	
c					-	
d			<u> </u>			
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	-		14	291,165.		
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			18	24,670.	· · · · · · · · · · · · · · · · · · ·	
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory.			<u> </u>			
11 Other revenue a			<u> </u>		· · · · · · · · · · · · · · · · · · ·	
b					· · · · · · · · · · · · · · · · · · ·	
c			 			
d	_		 		-	
e			<u> </u>			
12 Subtotal Add columns (b), (d), and (e)				315,835.		
13 Total. Add line 12, columns (b), (d), and (e)					315,835.	
(See worksheet in line 13 instructions to verify calci						
Part XVI-B Relationship of Activities	to the Ac	complishment of Ex	empt Purp	oses		
Line No Explain below how each activit	y for which	n income is reported i	n column (a) of Part VI/LA contrib	uted importantly to the	
Explain below now each down					•	
accomplishment of the foundation	ni a exemp	t purposes (other than i	by providing	i idilas ioi sucii puipose	s) (See instructions)	
	-	<u>_</u>				
			-			
				<u></u>		

Form 990				T	F	4	nad Dadadia nada	1 - 18041 NI			ge 1
Part >	X V II	Exempt Orga		ı ransters	io and Trans	actions a	ind Relationsh	ips with Non	cnarı	itable)
1 D	ıd the			tly engage in	any of the follo	wing with	any other organiz	ation described		Yes	No
			ode (other th	an section 50)1(c)(3) organiz	ations) or in	section 527, rela	ating to political			
	rganiza										
		rs from the report				-					1
									1a(1)		X
(2	() Othe	er assets ansactions	• • • • • • •	. 				• • • • • • • • •	1a(2)		X
			oncharitable s	vomnt organi	t						Х
(2) Durc	hases of assets f	rom a noncha	ritable evemn	t organization				1b(1)		- <u>^</u>
(3	3) Reni	tal of facilities equ	upment or of	her assets	torganization .				1b(2) 1b(3)		X
(4	l) Rein	nbursement arran	gements						1b(4)		Х
(5) Loar	ns or loan guarante	ees			 			1b(5)		Х
(6) Perf	ormance of service	es or membe	rship or fund	raising solicitation	ns			1b(6)		Х
c S	harıng	of facilities, equip	ment, mailing	lists, other a	ssets, or paid en	nployees			1c		Χ
d If	the a	nswer to any of t	the above is	"Yes," comple	ete the followin	g schedule	Column (b) sho	uld always show	the	faır m	arke
							n If the foundation				
					- ,		e of the goods, o				
(a) Line	по	(b) Amount involved	(c) Name	of noncharitable	exempt organization		escription of transfers,	transactions, and sha	nng arra	ingemei	nts
		N/A			-,- ,-	N/A	<u> </u>				
							·	***			
			+								
			+				- <u></u>				
					**	_	 				
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				·	- " -						
										_	
								.,			
<u>-</u>	-		-								
							ore tax-exempt o			es X] Nc
<u>b</u> If	"Yes,"	complete the following				,					
		(a) Name of organizati	on		b) Type of organizati	on	(c) (Description of relations	ship		
					*	·					
					-						
	Under p	penalties of penjury, I dec	clare that I have ex	xamined this return	including accompany	ing schedules a	and statements, and to the	ne best of my knowledg	e and t	elief it	ıs tru
Sign	correct,	and complete Declaration	of preparer (other th	nan taxpayer) is base	ed on all information of v	which preparer ha	as any knowledge				
Here		MELL	alles		10/17/18			May the IRS	discus eparer		return below
	Signa	ture of officer or trustee	è	Dat	e / /	Title		(see instruction			
	L	D. UT.		18			18.				
Paid	1	Print/Type preparer	rs name	Prepar	er's signature		Date 10/14/17	Check X If self-employed	РПN Р012	5609	6
Prepa		Firm's name ▶ B	RIAN KUEH	NIS, CPA		<u>.</u>		m's EIN ▶			
Use C		Firm's address P			-				-		

94063

Phone no 650-216-2356

REDWOOD CITY,

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						
MICHAEL E. MARKS FAMILY							
C/O BRIAN KUEHNIS, CPA	77-0500312						
Organization type (check one)							
Filers of: Section:							
Form 990 or 990-EZ	501(c)() (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private fou	ndation					
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundate	lon					
	501(c)(3) taxable private foundation						
	ed by the General Rule or a Special Rule . , or (10) organization can check boxes for both the General Rule and a S	pecial Rule See					
-	Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 contributor. Complete Parts I and II	or more (in money or					
Special Rules							
under sections 509(a)(1)	organization filing Form 990 or 990-EZ that met the 33 1/3 % support to and 170(b)(1)(A)(vi) and received from any one contributor, during the or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form	e year, a contribution of					
during the year, total con	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)							

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

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

Name of organization MICHAEL E. MARKS FAMILY FOUNDATION

Employer identification number 77-0500312

	<u> </u>		77-0500312
Part I	Contributors (see instructions) Use duplicate copies	of Part I if additional space is need	ded
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1 _	W B INVESTORS, LLC PO BOX 6978 REDWOOD CITY, CA 94063	\$440,730.	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(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) No.	(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) No.	(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) No.	(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) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll

(Complete Part II if there is a noncash contribution)

Name of organization MICHAEL E. MARKS FAMILY FOUNDATION Employer identification number C/O BRIAN KUEHNIS, CPA 77-0500312

Part II	Noncash Property (see instructions). Use duplicate copies	of Part II if additional space is nee	ded
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1_	VARIOUS STOCKS	\$\$440,730.	4/13/2012
(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
		 \$	

Name of or	ganization MICHAEL E. MARKS FAMIL	Y FOUNDATION		Employer identification number
	C/O BRIAN KUEHNIS, CPA			77-0500312
Part III	Exclusively religious, charitable, etc., that total more than \$1,000 for the year.	individual contribu ear. Complete colur	rtions to section 5 mns (a) through (e	01(c)(7), (8), or (10) organizations) and the following line entry
	For organizations completing Part III, e contributions of \$1,000 or less for the	year (Enter this inf	ormation once Se	haritable, etc , e instructions) ▶\$
	Use duplicate copies of Part III if addition	onal space is neede	d	
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Transf	er of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
-				
		(e) Transf	er of gift	3
	Transferee's name, address, ar	nd ZIP + 4	Relation	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Transf	er of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relation	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Transf	er of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee

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

Kind of I	Property	Description			or Date		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	D	Gain or (loss)	
441,465.		VARIOUS GIF PROPERTY TY 392,878.	TED STOCKS	_	•	D	VAR 48,587.	04/16/201
			ATING RATE			Р	02/02/2009	07/11/20
11,016.		6,931.	TEL BEGINE				4,085.	
8,937.			ATING RATE PE: SECURIT			Р	VAR 1,405.	07/12/20:
0,337.		VANGUARD RE	CIT INDEX			Р	1,403. VAR	06/07/20:
25,000.		PROPERTY TY 15,019.	PE: SECURIT	TIES			9,981.	
17,000.		ANGUARD REI PROPERTY TY 9,583.	T INDEX PE: SECURIT	TIES		Р	VAR	07/17/20
17,000.		VANGUARD FI		YIELD CORP		Р	7,417. VAR	02/29/20
80,000.		PROPERTY TY 84,474.	PE: SECURIT	TIES			-4,474.	
100,000.			X INCOME HI	YIELD CORP		P	VAR -8,348.	06/06/20
30,000.			X INCOME HI	YIELD CORP		P	VAR -1,518.	07/25/20
		PROPERTY TY	X INCOME HI	YIELD CORP		Р	VAR	08/16/20
40,000.		41,812.					-1,812.	
104,750.		NXP BV 9.5% PROPERTY TY 85,756.	PE: SECURIT	TIES		P	06/10/2010 18,994.	03/19/20
OTAL GAIN(L	oss)						74,317.	

NET INVESTMENT INCOME	40,504. 217,258. 22,535. -431.	279,866.
REVENUE AND EXPENSES PER BOOKS	40,504. 217,258. 22,535. -431.	279,866.
		TOTAL
DESCRIPTION	MORGAN STANLEY #017754 MORGAN STANLEY #158172 MORGAN STANLEY #181123 BOND AMORTIZATION	

ATTACHMENT	2			

FORM 990PF, PART I - OTHER INCOME

REVENUE AND EXPENSES

DESCRIPTION DISTRIBUTIONS

PER BOOKS 11,299.

TOTALS 11,299.

FORM 990PF, PART I - TAXES

REVENUE

AND

EXPENSES

PER BOOKS

DESCRIPTION

FILING FEES FEDERAL TAX PAYMENTS 160.

20,000.

TOTALS

20,160.

FORM 990PF, PART I - OTHER EXPENSES

ATTACHMENT 4

	NET	INVESTMENT	INCOME	5,276.	. 89
REVENUE	AND	EXPENSES	PER BOOKS	5,276.	. 68
			DESCRIPTION	INVESTMENT MANAGEMENT EXPENSES	PORTFOLIO DEDUCTIONS K-1

5,344.

TOTALS

ENDING <u>FMV</u>	3,426,041.	1,313,105.	4,739,146.
ENDING BOOK VALUE	2,942,370.	1,308,404.	4,250,774.
BEGINNING BOOK VALUE	3,182,632.		3,980,076.
			TOTALS
DESCRIPTION	MORGAN STANLEY #158172	MORGAN STANLEY #017754	

ENDING <u>FMV</u>	159,211.	159,211.
ENDING BOOK VALUE	172,996.	172,996.
BEGINNING BOOK VALUE	259,183.	259,183.
		TOTALS
DESCRIPTION	MORGAN STANLEY #1581782	

ENDING <u>FMV</u>	120,377. 235,341. 49,861. 500,000.	.615,579.
ENDING BOOK VALUE	5,122. 192,166. 49,861. 500,000.	747,149.
BEGINNING BOOK VALUE	473,082. 190,497. 49,929. 500,000.	1,213,508.
DESCRIPTION	MORGAN STANLEY PPIP OPPT FUND MS CREDIT PARTNER OFF CR FEED FVEST, LLC APIDOS	TOTALS

		ATTACHMENT	8
FORM 990PF, PART II - OTHER LIABILITIES	3		
DESCRIPTION		BEGINNING BOOK VALUE	ENDING BOOK VALUE
PAYABLE - MARKS			1,603.
	TOTALS		1,603.

- NEW SUBSTANTIAL		DATE
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FAKI VII-A, LINE IU		
FARI		ADDRESS
- 1		ADI
" YYOFF,		AND
-		[-7]

DATE	4/13/2012
NAME AND ADDRESS	W B INVESTORS, LLC PO BOX 6978 REDWOOD CITY, CA 94063

440,730.

DIRECT PUBLIC SUPPORT

EXPENSE ACCT AND OTHER ALLOWANCES	0	0	0
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	0	0	0
COMPENSATION	0	0	0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRESIDENT	SECRETARY/CFO	GRAND TOTALS
NAME AND ADDRESS	MICHAEL MARKS P.O. BOX 6978 REDWOOD CITY, CA 94063	CAROLE MARKS P.O. BOX 6978 REDWOOD CITY, CA 94063	

- LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

FORM 990PF, PART VIII

ATTACHMENT	11	

FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

MICHAEL MARKS CAROLE MARKS

THE YEAR
DUBING
PAID
CONTRIBUTIONS
AND
GRANTS
PART XV
1 990PF
FORM

		AMOUNT	858,050
		PURPOSE OF GRANT OR CONTRIBUTION	GENERAL CHARITABLE PURPOSE
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR	AND	FOUNDATION STATUS, OF RECIPIENT	NONE PUBLIC CHARITY
		RECIPIENT NAME AND ADDRESS	SEE ATTACHMENT A

858,050

TOTAL CONTRIBUTIONS PAID

Michael E. Marks Family Foundation (EIN: 77-0500312) 2012 Grants and Contributions Made

Charity	<u>Address</u>	<u>Amount</u>
Abilities Unitied	525 East Charleston Road, Palo Alto CA94306	2,500
American Red Cross	PO Box 4002018, Des Moines IA 50340	5,000
Auction Napa Valley	PO Box 141, St. Helena CA 94574	142,500
Bay Area Rescue Mission	PO Box 1112, Richmond CA 94802	5,000
College Track	111 Broadway Ave, Suite 101, Oakland CA 94607	29,700
EL Camino YMCA	2400 Grant Road, Mountain View CA 94040	5,000
Emeril Lagasse Foundation	829 St Charles Avenue, New Orleans LA 70130	50,250
Fractured Atlas	248 W 35th Street, 10th Fl New York NY 10001	10,000
Golden State Warriors	1011 Broadway, Oakland CA 94607	1,000
Harvard Business School	Teele Hall, Soldiers Field, Boston MA 02163	5,000
Interfaith Committee of Remembrance	40 W 37th St Suite 803, New York NY 10018	50,000
LEMO	2575 East Bayshore, Redwood City CA 94061	10,000
Leukemia & Lymphoma Society	1311 Mamaroneck Ave, Suite 310, White Plains NY 10605	1,000
Lucille Packard Children's Hospital	725 Welch Road, Palo Alto CA 94304	25,000
National Parks Conservation Association	777 6th Street, NW, Suite 700 Washington DC 20001	25,000
Oberlin College	50 W Lorain Street, Oberlin OH 44074	20,000
Pathways Hospice	585 North Mary Avenue, Sunnyvale CA 94085	5,000
Ride to Conquer Cancer		5,000
San Francisco Symphony	Davies Symphony Hall, San Francisco CA 94102	10,000
Share Your Heart Ball	PO Box 5385, Boise ID 83705	5,000
Stanford Hospital & Clinic	PO Box 20466, Stanford CA 94309	23,000
Sun Valley Center for the Arts	Sun Valley CA	5,000
Sun Valley Summer Symphony	PO Box 1914, Sun Valley ID 83353	10,000
The Ideal School	314 West 91st Street, New York NY 10024	5,000
The Juilliard School	60 Lincoln Center Plaza, New York NY 10023	79,500
The Riekes Center	3455 Edison Way, Menlo Park CA 94025	5,000
Theatre Works	PO Box 50458, Palo Alto CA 94303	10,000
Tipping Point	220 Montogomery Street, Suite 850, San Francisco CA 94104	5,000
United States Olympic Committee	PO Box 7010, Albert Lea MN 56007	150,000
V Foundation	106 Towerview Court, Cary NC 27513	153,600
		858,050

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service Name of estate or trust

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

Name	ame of estate or trust MICHAEL E. MARKS FAMILY FOUNDATION Empk						oloyer identification number		
	C/O BRIAN KUEHNIS, CPA	77-05003	12						
	: Form 5227 filers need to complete only Pa								
Par	t I Short-Term Capital Gains and Lo	sses - Assets	Held One Ye	ar 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 (see instruction		(f) Gain or (loss) for the entire year Subtract (e) from (d)		
1a									
	· · · · · · · · · · · · · · · · · · ·								
		-							
									
b	Enter the short-term gain or (loss), if any, f	rom Schedule D	-1, line 1b			1b			
2	Short-term capital gain or (loss) from Form	ns 4684, 6252,	6781, and 882	4		2			
3	Net short-term gain or (loss) from partners	ships, S corpora	tions, and other	estates or trusts		3			
4	Short-term capital loss carryover Enter	the amount, i	f any, from h	ne 9 of the 2011	Capital Loss				
_	Carryover Worksheet				, , , .	4	()		
5	Net short-term gain or (loss). Combine	lines 1a throug	gh 4 in colum	in (f) Enter here and	d on line 13,	_			
Par	column (3) on the back	ecoc Accoto	Hold More T	han One Year	<u></u>	5			
ıaı	(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 (see instruction		(f) Gain or (loss) for the entire year Subtract (e) from (d)		
6a							Subtract (e) from (d)		
			<u> </u>						
					İ				
				-					
b	Enter the long-term gain or (loss), if any, fr	om Schedule D-	1, line 6b			6b	74,317.		
7	Long-term capital gain or (loss) from Form	ıs 2439, 4684, (6252, 6781, ar	nd 8824		7			
8	Net long-term gain or (loss) from partners!	nips, S corporat	ions, and other	estates or trusts		8			
9	Capital gain distributions					9			
10	Gain from Form 4797, Part I					10			
11									
12	Carryover Worksheet	nee 6a through				11)		
12	column (3) on the back					12	74,317.		
For F	Paperwork Reduction Act Notice, see the Instru	ctions for Form 1		 	Sci		e D (Form 1041) 2012		

Sche	dule D (Form 1041) 2012					Page 2
Par	t III Summary of Parts I and II		(1) Beneficiaries	s' (2) Es	tate's	(0) T-1-1
	Caution: Read the instructions before completing this	part	(see instr)	or tr	ust's	(3) Total
13	Net short-term gain or (loss)	13				
14	Net long-term gain or (loss):					
а	Total for year	14a				74,317.
b	Unrecaptured section 1250 gain (see line 18 of the wrksht)	14b				
C	28% rate gain	14c				
		15				74,317.
Note	t: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 , go to Part V, and do not complete Part IV If line 15, column (3), is a n	(or Fo	rm 990-T, Part I, line	e 4a) If lines	14a an	nd 15, column (2), are net
neces	ssary	et ioss	s, complete Fait IV	and the Capi	tai LUSS	s Carryover vvorksneet, as
Par	t IV Capital Loss Limitation					
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, F	Part I, II	ne 4c, if a trust), the	smaller of		
a	The loss on line 15, column (3) or b \$3,000 cr if Form 1041, Carryover Worksheet in the instructions to figure your capital loss carryover		<u> </u>		16)
Note Loss	the loss on line 15, column (3), is more than \$3,000, or if Form 1041, Carryover Worksheet in the instructions to figure your capital loss carryover	page	1, line 22 (or Form	990-T, line 34	l), is a	loss, complete the Capital
	t V Tax Computation Using Maximum Capital Gains Rate					
	1041 filers. Complete this part only if both lines 14a and 15 in coll		2) are gains or ar	amount is	ontoro:	d in Part I or Part II and
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mor			i amount is	enteret	J III I AIL I OI I AIL II AILU
	ion: Skip this part and complete the Schedule D Tax Worksheet in the i					
• Ei	ther line 14b, col (2) or line 14c, col (2) is more than zero, or					
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero					
Forn	990-T trusts. Complete this part only if both lines 14a and 15 a	re ga	ins, or qualified d	ıvıdends are	ınclud	led in income in Part I
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part	and c	omplete the Sche	dule D Tax	Works	heet in the instructions
ır eiti	ner 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 3	4) .	17]	
18	Enter the smaller of line 14a or 15 in column (2)					
	but not less than zero					
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				1 1	
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		1	
					1	
24	Enter the smaller of the amount on line 17 or \$2,400		24	<u> </u>]	
25	Is the amount on line 23 equal to or more than the amount on line 24					
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box					
	No. Enter the amount from line 23		25		1	
26	Subtract line 25 from line 24		26]	
27	Are the amounts on lines 22 and 26 the same?					
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or lin	e 22	27		.	
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28]	
	• · · · · · · • • · · · · · · · · · · ·					
29	Subtract line 28 from line 27		29		1	
30	Multiply line 29 by 15% (15)				30	
31	Figure the tax on the amount on line 23 Use the 2012 Tax Rate					
	(see the Schedule G instructions in the instructions for Form 1041) .				31	
32	Add lines 30 and 31			<u></u>	32	
33	Figure the tax on the amount on line 17 Use the 2012 Tax Rate					
	(see the Schedule Ginstructions in the instructions for Form 1041)		<u>.</u>		33	
34	Tax on all taxable income. Enter the smaller of line 32 or line 33 h					
	G, line 1a (or Form 990-T, line 36)	<u></u>	<u>. ,</u>	<u></u>	34	
					Sche	dule D (Form 1041) 2012

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 MICHAEL E. MARKS FAMILY FOUNDATION 77-0500312 Long-Term Capital Gains and Losses - Assets Held More Than One Year (b) Date (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (e) Cost or other basis (see instructions) (f) Gain or (loss) Subtract (e) from (d) (c) Date sold acquired (mo , day, yr) (d) Sales price (mo, day, yr) 6a VARIOUS GIFTED STOCKS VAR 04/16/2012 392,878. 441,465. 48,587. PIONEER FLOATING RATE TRUST VAR 07/11/2012 11,016. 6,931. 4,085. PIONEER FLOATING RATE TRUST VAR 07/12/2012 8,937. 7,532. 1,405. VANGUARD REIT INDEX VAR 06/07/2012 25,000. 15,019. 9,981. ANGUARD REIT INDEX 07/17/2012 VAR 17,000. 9,583. 7,417. VANGUARD FIX INCOME HI YIELD CORP VAR 02/29/2012 80,000. 84,474. -4,474.VANGUARD FIX INCOME HI YIELD CORP VAR 06/06/2012 100,000. 108,348. -8,348. VANGUARD FIX INCOME HI VAR 07/25/2012 YIELD CORP 30,000. 31,518. -1,518.VANGURAD FIX INCOME HI YIELD CORP VAR 08/16/2012 40,000. 41,812. -1,812. NXP BV 9.5% 06/10/2010 03/19/2012 104,750. 85,756. 18,994. 6b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 6b 74,317.

.... 8868°

(Rev January 2013)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

File a separate application for each return.

internal Revenue	Service File 8	separate a	prication for each return.				
	filing for an Automatic 3-Month Extension, o					▶ [X]	
	filing for an Additional (Not Automatic) 3-Mo					•	
	lete Part II unless you have already been gra						
Electronic fil	ling (e-file). You can electronically file Form nequired to file Form 990-T), or an addition	8868 if yo	u need a 3-month auto	ematic extension of time to	o file (6	months for	
8868 to rea	uest an extension of time to file any of the	forms liste	iomatic) 3-month exter	ision of time. You can elec- ith the exception of Form	8870 I	ly lile roim Information	
Return for	Fransfers Associated With Certain Persona	l Benefit (Contracts, which must	t be sent to the IRS in	paper f	ormat (see	
	For more details on the electronic filing of the						
	tomatic 3-Month Extension of Time. Or						
	n required to file Form 990-T and requesting			-	ete		
Part I only	• • • • • • • • • • • • • • • • • • • •			<u> </u>		▶∟	
	porations (including 1120-C filers), partnersh	iips, REMIC	s, and trusts must use I				
to file incom	Name of exempt organization or other filer, see in	etructions		Enter filer's identifying n			
Type or	MICHAEL E. MARKS FAMILY FOUND			Employer identification numb	ei (Eily) u	וג	
print	C/O HARRIS MYCFO, LLC	DALLON		77-0500312			
File by the	Number, street, and room or suite no. If a P.O bo	x. see instruc	ctions.	Social security number (SSN)			
due date for filing your	P.O. BOX 10195, DEPARTMENT 1	· ·		Coolar coodiny nambor (Con)			
retum See	City, town or post office, state, and ZIP code. For		dress, see instructions.				
instructions	PALO ALTO, CA 94303						
Enter the Re	turn code for the return that this application	is for (file a	separate application fo	or each return)	• • • •	0 4	
Application		Return	Application			Return	
ls For		Code	ls For			Code	
	Form 990-EZ	01	Form 990-T (corporat		07		
Form 990-BL		02	Form 1041-A			08	
Form 4720-		03	Form 4720				
Form 990-PF		04	Form 5227			10	
	(sec. 401(a) or 408(a) trust)	05 06	Form 6069 Form 8870			11	
FOIM 990-1	(trust other than above)	1 06	FUIII 6670			12	
Telephone If the orga If this is for	HARRIS MYCFO, No. ► 650 210-5000 Anization does not have an office or place of the property of the group, check this box	business in ur digit Gro f it is for pa		GEN)	 . If thi	_	
	st an automatic 3-month (6 months for a cor		quired to file Form 990)-T) extension of time			
until	08/15 , 20 13 , to file the				e. The e	xtension is	
	organization's return for:						
► X	calendar year 2012 or tax year beginning						
▶∟_	tax year beginning	, 20	, and ending	, 20	<u></u> ·		
c	ax year entered in line 1 is for less than 12 m hange in accounting period						
	application is for Form 990-BL, 990-PF, 99	90-T, 4720	, or 6069, enter the			22 402	
	undable credits. See instructions.	4700	6060		\$	22,483.	
	application is for Form 990-PF, 990-T,					22,483.	
	ted tax payments made. Include any prior yea e due. Subtract line 3b from line 3a. Include				\$	22,403.	
	onic Federal Tax Payment System) See instru			I I	\$	0	
	u are going to make an electronic fund withdrawa		orm 8868, see Form 8453	-EO and Form 8879-EO for page	yment in	structions.	
	et and Panerwork Reduction Act Notice, see Inst					(Rev 1-2013)	

Form 8868 (Re	v <u>1-2013)</u>				Page 2
 If you are 	filing for an Additional (Not Automatic) 3-Me	onth Exter	sion, complete only Part I	I and check this box	► X
Note. Only o	omplete Part II if you have already been gra	nted an au	tomatic 3-month extension	on a previously filed Form 886	8
 If you are 	filing for an Automatic 3-Month Extension,	complete o	only Part I (on page 1)	•	
Part II	Additional (Not Automatic) 3-Month Ex	ctension o	of Time. Only file the orig	inal (no copies needed)	
			E	nter filer's identifying number, se	e instructions
	Name of exempt organization or other filer, see in	structions		Employer identification number (
Type or MICHAEL E. MARKS FAMILY FOUNDATION C/O BRIAN KUEHNIS, CPA 77-0500312					
due date for	P.O. BOX 6978				
filing your return See	City, town or post office, state, and ZIP code For	a foreign ad	dress, see instructions	-	
instructions	REDWOOD CITY, CA 94063				
Enter the Re	eturn code for the return that this application	is for (file a	a separate application for ea	ach return)	. 0 4
Application		Return	Application		Return
Is For		Code	ls For		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 no	ot complete Part II if you were not already	granted ar	automatic 3-month exter	nsion on a previously filed Fo	rm 8868.
 The books 	s are in the care of ▶ BRIAN KUEHNIS,	CPA			
Telephone	e No ▶ 650 216-2356		FAX No ▶ 650 716-	0613	
• If the orga	anization does not have an office or place of l	business ir	the United States, check the	his box	▶ □
If this is for	or a Group Return, enter the organizati <u>on'</u> s for	ur digit Gro	oup Exemption Number (GE	N) If t	his is
for the whole	e group, check this box ▶ 🔙 📑	fit is for pa	art of the group, check this	box ▶ and at	ttach a
	names and EINs of all members the extension				
4 I reque	st an additional 3-month extension of time up	ntil	1	.1/15_, 20 _13	
5 For cal	endar year 2012, or other tax year beginni	ng	, 20, an	nd ending	, 20
6 If the ta	ax year entered in line 5 is for less than 12 m	onths, che	ck reason Initial re	turn Final return	
c	hange in accounting period				
	n detail why you need the extension TAXPA				
THIRD	PARTIES AND ADDITIONAL TIME I	S NEEDE	D IN ORDER TO FILE	A COMPLETE	
AND A	CCURATE TAX RETURN		B		
	· · · · · · · · · · · · · · · · · · ·				
	application is for Form 990-BL, 990-PF, 99	90-T, 4720), or 6069, enter the tent	tative tax, less any	
	undable credits. See instructions			8a \$	22,457.
	application is for Form 990-PF, 990-T,			1 "1	
	ted tax payments made Include any pri	or year o	overpayment allowed as	a credit and any	
	t paid previously with Form 8868			8b \$	22,457.
	e Due. Subtract line 8b from line 8a Include		ient with this form, if requir	ed, by using EFTPS	
(Electro	onic Federal Tax Payment System) See instru			8c \$	0
	Signature and Verifica				
	of perjury, I declare that I have examined this form, and complete, and that I am authonzed to prepare this fo		companying schedules and statem	nents, and to the best of my knowle	dge and belief,
Signature >			Title ▶	Date ►	
		···	······································		(Rev 1-2013)