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## Form **990-PF**

### **Return of Private Foundation**

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

▶ Do not enter Social Security numbers on this form as it may be made public.

Department of the Treasury Internal Revenue Service

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

c Other professional fees  17 Interest 18 Taxes STMT 5 9,146. 615. 0.  19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 6 18,693. 13,870. 4,823.  24 Total operating and administrative expenses. Add lines 13 through 23 31,239. 14,485. 8,223.  25 Contributions, gifts, grants paid 107,750.  26 Total expenses and disbursements Add lines 24 and 25 138,989. 14,485. 115,973.  27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)  c Adjusted net income (if negative, enter -0-)  c Adjusted net income (if negative, enter -0-)  N/A	For	calen	dar year 2013 or tax year beginning		, and ending		
Telephone number   Telephone n	Na	ne of	foundation			A Employer identification	n number
115 DEPOT STREET  City or town, state to promue, country, and 2/P or foreign postal code  ANN ARDOR, MIT 481.04  6 Check all that apply: Instal return Install return Amended return  And rest Scheme (AMT 481.04)  1 Fair market value of all assists at and clyser Information (Section 501(c)) Section 501(c)) Section 501(c)	_1	HE	MARTIN FAMILY FOUNDATI	ON		38-3340278	3
Cety to two, state or province, country, and ziP or foreign postal code  ANN ARBOR, MI 48104  G Check all that apply: India fetura Indi			,	address)	Room/suite	-	
ANN ARBOR, MI 48104 6 Check all that apply:						<del> </del>	
6 Check all that apply: India return Amended return Section 4947(a)(1) nonexempt charable trast Tomber (a) Return and amended return of a former park (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c				ostal code		C If exemption application is	pending, check here
Foreign return				Industratives of a fa	rmer public cherity	B 4 Foreign organization	a aback bara
Check type of organization:   XI Sections of 501(c)(3) exempt private foundation	G	леск		_	rmer public charity	1. Poreigii organization	s, check here
## Check type of organization:   X Section 501(c)(3) exempt private foundation   Extra market value of all assets at each of 941   According method:   X Cash   Accrual   Fit the foundation is a 80-month termination   Fit armarket value of all assets at each of 941   According method:   X Cash   Accrual   Fit the foundation is a 80-month termination   Fit the foundation is a 80-month termination   Fit armarket value of amounts in column (a)   Other (specify)   Accrual   Fit the foundation is a 80-month termination   Fit the foundation is 40-month termination   Fit the foundation is 40-month termination   Fit the foundation is 40-month termination   Fit the foundation   Fi			<del></del>	_		Foreign organizations m check here and attach c	eeting the 85% test, omputation
Section 34/7(a)(1) nonement charactable triast	H (	heck				1	
Contributions, grifts, grants, etc., received   450,000.   N/A		_	_		tion		
S	l Fa	ur ma	rket value of all assets at end of year   J   Accounting	ng method: X Cash	Accrual	F If the foundation is in a	60-month termination
Part     Analysis of Revenue and Expenses   (a) Revenue and expenses per thouse   (a) Adjusted net   (a) A			Part II, col (c), line 16)	her (specify)		under section 507(b)(1	)(B), check here
Ches total of amounts in columns (b), (c), and (c) may not recommend (c), (c), and (c) may not recommend (c), (c), and (c) may not recommend (c), and (c)	_						(4) -
Check	P	art I	(The total of amounts in columns (b), (c), and (d) may not	expenses per books		income	for charitable purposes
Interest on alongs and temporary   122,610.   122,610.   STATEMENT 1		1	Contributions, gifts, grants, etc., received	450,000.	<del> </del>	N/A	
Comparation of offices, directors, trustees, etc.		2		100 (10	100 (10		CMA MEMBER 1
\$ decided from the first state of the first state o		3	cash investments			-	<del>-</del>
Description		•		00,844.	Reconvisuate   Stephane number   38 - 3340278   Stephane number   (734)994 - 5050   Ct if exemption application is pending, check here   □   2. Foreign organizations, check here   □   2. Foreign organizations meeting the 85% test.   □   Cash   □ Accrual   Ell private foundation status was termination under section 507(b)(1)(A), check here   □   Cash   □ Accrual   Ell private foundation is in a 60-month termination under section 507(b)(1)(B), check here   □   Cash basis   Other termination (b) Net investment income (c) Adjusted net income (c) Adjuste		
6a Net gain or (loss) from sale of assets not on line 10		1 .					-
10	7	١.	<del>-</del>	21.370.			
10	25	b	Gross sales price for all			DEGE	
10	<b>⇔</b> §	7	assets on time ou		21,370.	I INCOM	14.0
10a and disvances		8	Net short-term capital gain				
10a and solventees   10a and	ũ	9				- SEP 1 2	2014
c Gross profit or (loss) 11 Other income 12 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 16 Accounting fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) c	7 D	10a	and allowances				
11 Other income   -23,452	) }	l				OGDE	1. UT
12   Total Add lines 1 through 11   637,372. 210,824.	? ?	Ι		-23 /52			STATEMENT 3
13   Compensation of officers, directors, trustees, etc   14   Other employee salaries and wages   15   Pension plans, employee benefits   16a   Legal fees   b   Accounting fees   STMT   4   3,400	•	1 .					DIMILITARY 5
14 Other employee salaries and wages   15 Pension plans, employee benefits   16a Legal fees	!——						0.
16a Legal fees	,		,				
26 Total expenses and disbursements Add lines 24 and 25  27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)  N/A		15	Pension plans, employee benefits				
26 Total expenses and disbursements Add lines 24 and 25  27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)  N/A	ses	16a	=				
26 Total expenses and disbursements Add lines 24 and 25  27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)  N/A	Den	b	-	3,400.	0_	<u> </u>	3,400.
26 Total expenses and disbursements Add lines 24 and 25  27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)  N/A	Ř	C	•		<del></del> .		-
26 Total expenses and disbursements Add lines 24 and 25  27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)  N/A	ative	1/	<b></b>	9 1/6	615	<del> </del>	0
26 Total expenses and disbursements Add lines 24 and 25  27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)  N/A	stra	19		2,120.	013.		
26 Total expenses and disbursements Add lines 24 and 25  27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)  N/A	ini.	20	·				
26 Total expenses and disbursements Add lines 24 and 25  27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)  N/A	Adr	21					
26 Total expenses and disbursements Add lines 24 and 25  27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)  N/A	and	22	Printing and publications				
26 Total expenses and disbursements Add lines 24 and 25  27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)  N/A	ğ	23	·	18,693.	<u>13,870.</u>		4,823.
26 Total expenses and disbursements Add lines 24 and 25  27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)  N/A	rati	24			4.4.4.0		0.000
26 Total expenses and disbursements Add lines 24 and 25  27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)  N/A	O		•	31,239.	14,485.		107 750
Add lines 24 and 25  27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)  c Adjusted net income (if negative, enter -0-)  N/A	J	25		10/,/50.			107,750.
27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)  N/A		26	· · · · · · · · · · · · · · · · · · ·	138 989	14 485.		115.973.
a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)  c Adjusted net income (if negative, enter -0-)  N/A	_	27		130,303.	23/300		
b Net investment income (if negative, enter -0-)  c Adjusted net income (if negative, enter -0-)  N/A		1		498,383.			
		1	•		196,339.		
	0000		Adjusted net income (if negative, enter -0-)			N/A	1 - 200

323501 10-10-13 LHA For Paperwork Reduction Act Notice, see instructions

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For	m 99	0-PF (2013) THE MARTIN FAMILY FOUND		38-3	3340278 Page 2
<u></u>		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
Р	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
_	1	Cash - non-interest-bearing	22,831.	39,107.	39,107.
	i	Savings and temporary cash investments	58,494.	174,871.	174,871.
	1	Accounts receivable	30/1311	272/0720	2,2,0,20
	"	Less: allowance for doubtful accounts			
	١.				
	4	Pledges receivable >		r.	
	_	Less: allowance for doubtful accounts			
	-	Grants receivable			<del></del>
	6	Receivables due from officers, directors, trustees, and other		ļ	
	{	disqualified persons			
	7	Other notes and loans receivable			
		Less; allowance for doubtful accounts ▶			
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ä	10a	Investments - U.S. and state government obligations			
	Ь	Investments - corporate stock STMT 7	1,469,180.	1,482,181.	2,477,305.
	1	Investments - corporate bonds			
	1	Investments - land, buildings, and equipment basis			
	l ' '	Less accumulated depreciation			
	12	Investments - mortgage loans			
	ł	Investments - other STMT 8	1,532,529.	1,885,258.	1,929,976.
	13		1,332,323.	1,003,230.	1,020,0100
	14	Land, buildings, and equipment; basis ▶		i	
		Less accumulated depreciation			
		Other assets (describe )			<del></del> -
	16	Total assets (to be completed by all filers - see the			4 604 050
_	_	instructions. Also, see page 1, item 1)	3,083,034.	3,581,417.	4,621,259.
	17	Accounts payable and accrued expenses			
	18	Grants payable			•
Ś	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abi	21	Mortgages and other notes payable			
	22	Other liabilities (describe >		,	
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
S		Unrestricted			
Net Assets or Fund Balances	24				
<u>a</u>	25	Temporarily restricted			
9 P	26	Permanently restricted			
5		Foundations that do not follow SFAS 117, check here			
ř		and complete lines 27 through 31			
ţ	27	Capital stock, trust principal, or current funds	0.	0.	
Se	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
ĕ	29	Retained earnings, accumulated income, endowment, or other funds	3,083,034.	3,581,417.	
Ž	30	Total net assets or fund balances	3,083,034.	3,581,417.	
_					
	31	Total liabilities and net assets/fund balances	3,083,034.	3,581,417.	
		Analysis of Changes in Net Assets or Fund B	alances	·	
٢	art	III Analysis of Onanges in Net Assets of Pullu B	uid11063		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		st agree with end-of-year figure reported on prior year's return)		11	3,083,034.
		amount from Part I, line 27a		2	498,383.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	3,581,417.
		eases not included in line 2 (itemize)		5	0.
-		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (h) line 30	6	3,581,417.
<u>6</u>	roldi	net assets of junio balances at end of year (line 4 minus line 3) - Part II, Co	Annu (n) muc on	1.0.1	Form <b>990-PF</b> (2013)
					101111 990-1-1 (2013)

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			AMILY FOUNDAT			<del></del>		0-334	02/0	raye 3
_			r Tax on Investmen	t income	(b) H	ow acquired	(-) Data		(4) Data	مماط
	(a) List and descr 2-story brick wa	ribe the kind(s) of pr rehouse: or commoi	operty sold (e.g., real estate, n stock, 200 shs. MLC Co )		МР.	ow acquired Purchase Donation		acquired ay, yr.)	(d) Date (mo., day	
12	BOAA SALE OF PI	·	·	TES	"	P	VARI	OUS	VARIC	US
_	CAPITAL GAINS					-	*****	<u> </u>	V12(20	
C										
d										
е					<u> </u>					
	(e) Gross sales price	(f) Depreciatio (or allowa		st or other basis expense of sale				ain or (loss s (f) minus		
a				177,68	2.				14,	678.
b	6,692.								6,	692.
C								-		
<u>d</u>										
e	Complete only for assets showin	a dain in column (h)	and owned by the foundation	n on 12/31/69	$\dashv$	(1	\ Gains (C	Col. (h) gain	minus	
	(i) F.M.V. as of 12/31/69	(j) Adjusted as of 12/3	1 basis (k) Ex	cess of col. (1)			. (k), but i	not less tha (from col.	n -0-) <b>or</b>	
_									14	678.
a b		<del>.</del>							6,	692.
C										
d										
е										
2	Capital gain net income or (net ca	pital loss) {   If	gain, also enter in Part I, line (loss), enter -0- in Part I, line	7 : 7	}	2			21,	370.
3	Net short-term capital gain or (los	•								
-	If gain, also enter in Part I, line 8,		( ) ( )		<b>}</b>					
_	If (loss), enter -0- in Part I, line 8 Part V Qualification U	nder Coation	4040(a) for Paduage	I Tay on Not	Inve	3	omo	N/A	<u> </u>	
_							, on the			
(1-0	or optional use by domestic private	toundations subject	t to the section 4940(a) tax of	i net investment ir	icome.	)				
lf s	section 4940(d)(2) applies, leave th	nis part blank.								
Wa	as the foundation liable for the sect	tion 4942 tax on the	distributable amount of any y	ear in the base pei	riod?				Yes [	X No
	Yes," the foundation does not qual									
1	Enter the appropriate amount in e	each column for eacl	h year; see the instructions be	fore making any e	ntries.					
	(a) Base period years		(b)	Naturaliza af a a	(c)			Distri	(d) bution ratio	
	Calendar year (or tax year beginning	ng in) Adjuste	ed qualifying distributions	Net value of no		lable-use assets		(col. (b) dr	vided by col. (	
	2012		71,430.			430,692				9387
	2011		53,850. 46,717.			299,203 078,200				1448 13329
	2010 2009		73,613.			937,581				8514
	2008	-	101,078.		1.	522,697		<del> </del>		6381
	2000		20270.01	<u> </u>					<u> </u>	
2	Total of line 1, column (d)						2		.25	9059
3	Average distribution ratio for the	5-year base period -	divide the total on line 2 by 5,	or by the number	of yea	rs				
	the foundation has been in exister	nce if less than 5 yea	ırs				3		.05	1812
4	Enter the net value of noncharitab	de-use assets for 20	13 from Part X. line 5				4		2,947,	098.
			,							
5	Multiply line 4 by line 3						5		<u>152,</u>	095.
6	Enter 1% of net investment incom	ne (1% of Part I, line	27b)				6		1,	963.
7	Add lines 5 and 6						7		154,	658.
8	Enter qualifying distributions from	n Part XII, line 4					8		115,	973.
	If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the bo	x in Part VI, line 1b, and comp	plete that part usin	ıg a 1%	tax rate.				

Part VI   Excise Tax Based on Investment Income (Section 4940(b), 4940(b), or 4948 - see instructions)   1a   Sempt operating foundations discribed in section 4940(d)(x), check here   main and enter Viscor him to 1, to the control of the contro			<u>-3340278</u>		Page 4
Date of ruling or obsermination letter:    A class horse of the contradiants hat met the section 4940(e) requirements in Part V, check here   and enter 1% of Part I, line 27b.			- see instru	ıctio	ns)
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	1a	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.			
of Part Line 27b. All other domestic foundations enter 2% of lane 27b. Exempt foreign organizations enter 4% of Part Line 12, col. (b).  2 Tax under sciction \$11 (domestic section 4947(a)(1) trusts and favable foundations only. Others enter -0-)  3 Add lines 1 and 2  5 Subtile A (income) tax (domestic section 4947(a)(1) trusts and favable foundations only. Others enter -0-)  5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-  6 CreditsPayments:  2 01 setimated tax payments and 2012 oversyment credited to 2013  8 Every life organ organizations - tax withheld at source  1 Exax paid with application for extension of time to life Grom 8868)  8 Every protein organizations - tax withheld at source  1 Exax paid with adjournment of the 10 to 10 the 10					
a. All other domestic foundations enter 2% of live 27b. Exempl foreign organizations enter 4% of Part I, line 12, col. (b).  2 Tax under section 511 (domestic section 4947(s)(1) trusts and faxable foundations only, Others enter -0-)  3 Add lines 1 sind 2  4 Subtits 4 (income) tax (domestic section 4947(s)(1) trusts and faxable foundations only, Others enter -0-)  5 Tax based on investment income Subtract line 4 from line 3.1 tax or less, enter -0-  6 Credis/Payments:  2 2013 estimated tax payments and 2012 overpayment credited to 2013  8 Expent foreign organizations: bax withheld at source  6 Tax pad with application for extension of time to tile (Form 8668)  8 Exits any plantity for undersymment of estimated tax. Check here [X] if Form 2220 is attached  8 5 2, 000.  8 Extent any penalty for undersymment of estimated tax. Check here [X] if Form 2220 is attached  8 5 - 7 Tax day. If the 16st of lines 5 and 8 is more than line 7, enter amount ower lowed  9 10 Cverpayment. If the 7 is more than line 16 is diversed and 2, enter than amount of 10 to 10 to the Credited to 2014 estimated tax. In the 15 is more than line 16 is diversed to 2014 estimated tax. In the 15 is more than the 16st in diverse 3 and 2, enter than amount or organization of 10 to the Credited to 2014 estimated tax. In the 2 is more than 16st of the Scart Check here I (Tax organization) are provided campaign?  1 During the tax year, did the foundation attempt to influence any riational, state, or local legislation or did if participate or intervene in any political campaign?  1 During the tax year, did the foundation attempt to influence any riational, state, or local legislation or did if participate or intervene in any political campaign?  1 During the tax year, did the foundation attempt to influence any riational, state, or local legislation or did if participate or intervene in any political campaign?  1 During the tax year, did the foundation attempt to influence any riational, state, or local legislation or did if participate or intervene i	b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here   and enter 1%	1	<u>3,9</u>	<u>27.</u>
2 Tax under section 611 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 5 Add lines 1 and 2 5 Subtillé A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income 5 Subtract line 4 from line 3. It zero or less, enter -0- 5 Tax based on investment income 5 Subtract line 4 from line 3. It zero or less, enter -0- 5 Tax based on investment income 6 Subtract line 4 from line 3. It zero or less, enter -0- 5 Tax based on investment income 7 Tax due, 1 the line 7 tax withheld at source 6 Tax paid with application for extension of time to file (Form 868) 6 Exempt foreign organizations - tax withheld at source 7 Total credits and payments. Add lines 86 through 6d 8 Enters any penalty for underpayment or festimated tax. Neck here		of Part I, line 27b			
3 3 3,927.  Subtile A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter-0-)  5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter-0-  6 Credist/Payments:  8 2013 estimated bax payments and 2012 overpayment credied to 2013  8 Exempt foreign organizations - tax withheld at source  7 Tax pad with application for extension of time to file (Form 8688)  8 Exclus withholding erroneously withheld  7 Total credits and payments. Add times 6 air trough 6d  8 Enter any pentally for underpayment of estimated tax. Check here 【X] if Form 2220 is attached  8 Tax dae. If the total of lines 5 and 8 is more than fine 7, enter amount owed  9 Tax dae. If the total of lines 5 and 8 is more than fine 7, enter amount owed  9 Tax dae. If the total of lines 5 and 8 is more than fine 7, enter amount owed  10 Overpayment. If line 7 is more little in the total of lines and 8, enter the meanut overpaid  11 Enter the amount of line 10 to be: Credited to 2014 estimated tax ≥ 2, 668 . Refunded ≥ 11  12 During the tax year, did the boundation attempt to influence any nethrone, state, or local legislation or did it participate or intervene in any potical campaign?  12 During the tax year, did the foundation attempt to influence any nethrone, state, or local legislation or did it participate or intervene in any potical campaign?  13 During the tax year, did the foundation attempt to influence any nethrone, state, or local legislation or did it participate or intervene in any potical campaign?  14 During the tax year, did the foundation attempt to influence any nethrone, state, or local legislation or did it participate or intervene in any potical campaign?  15 Did it spend more than \$100 during the year (either deactly or indirectly) for policical purposes (see instructions) for the definition)?  16 Enter the remount (if any) of tax on political expenditures (section 4955) imposed during the year?  16 Enter the remount (if any) of tax on political expenditures (section 49					_
4 Sebatile A (income) tax (domestic section 4947(a)(1) frusts and taxable foundations only. Others enter-0-5 5 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter-0-6 6 3,927.  5 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter-0-6 6 Cedetis/Payments: a 2013 estimated tax payments and 2012 overpayment credited to 2013 6 Exempt foreign organizations: 1 ax withheld at source 6 Tax paid with application for extension of time to file (Form 8888) 6 Exempt foreign organizations: 1 ax withheld at source 7 Total credits and payments. Add lines 6s through 6d 8 Extension and payments. Add lines 6s through 6d 8 Extension and payments. Add lines 6s through 6d 8 Extension and payments. Add lines 6s through 6d 8 Extension and payments. Add lines 6s through 6d 8 Extension and payments. Add lines 6s through 6d 8 Extension and payments. Add lines 6s through 6d 8 Extension and payments. Add lines 6s through 6d 8 Extension and payments. Add lines 6s through 6d 8 Extension and payments. Add lines 6s through 6d 8 Extension and payments. Add lines 6s through 6d 8 Extension and payments. Add lines 6s through 6d 8 Extension and payments. Add lines 6s through 6d 8 Extension and payments. Add lines 6s through 6d 8 Extension and payments. Add lines 6s through 6d 8 Extension and payments. Add lines 6s through 6d 8 Extension and payments. Add lines 6s through 6d 8 Extension and payments. Add lines 6s through 6d 9 Extension and payments. Add lines 6s through 6d 9 Extension and payments. Add lines 6d through 6d 9 Extension and payments. Add lines 6d through 6d 9 Extension and payments. Add lines 6d through 6d 9 Extension and payments. Add lines 6d through 6d 9 Extension and payments. Add lines 6d through 6d 9 Extension and payments. Add lines 6d through 6d 9 Extension and payments. Add lines 6d through 6d 9 Extension and payments. Add lines 6d through 6d 9 Extension and payments. Add lines 6d through 6d 9 Extension and payments. Add lines 6d through 6d 9 Extension and paymen	2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			<u>0.</u>
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3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes  4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?  4b X  b If "Yes," has it filed a tax return on Form 990-T for this year?  5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?  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?  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  8a Enter the states to which the foundation reports or with which it is registered (see instructions)  ■ MT  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  9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(i)(3) or 4942(i)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV  9 X  10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses  10 X	2		2		
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	10			<u> </u>	
	10	one and persons second sourcement contributors during the tax four. If Tes, attach a scriedule listing their names and addresses		-PF	

orm 990-PF (2013) THE MARTIN FAMILY FOUND			<u> 38-33402</u>	<u>78 Page 6</u>
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section)	on 4945(e))?	Ye	es X No	
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indire			
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purpose	s?	Ye	es 🗶 No	
(4) Provide a grant to an organization other than a charitable, etc., organizati	on described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	es 🗶 No	
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or f	for		
the prevention of cruelty to children or animals?		Ye	s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify up	nder the exceptions described i	ın Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instr			N/A	5b
Organizations relying on a current notice regarding disaster assistance check				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption		ined		
expenditure responsibility for the grant?		I/A 🔲 Ye	es 🔲 No	}
If "Yes," attach the statement required by Regulations section 53 49-				1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				
a personal benefit contract?	, pay promisino on	□ v <sub>4</sub>	es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	nersonal henefit contract?	·		6b X
If "Yes" to 6b, file Form 8870	personal benefit contract.			
7a At any time during the tax year, was the foundation a party to a prohibited tax	chalter transaction?		es X No	1
		· · · ·		7b
b If "Yes," did the foundation receive any proceeds or have any net income attrit  Part VIII Information About Officers, Directors, Trus		nagere Highly		70
Paid Employees, and Contractors	tees, i oundation wa	magers, riigin	,	
List all officers, directors, trustees, foundation managers and their	r compensation.	<del></del>		
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense
(a) Name and address	hours per week devoted	(If not paid,	and deterred	account, other allowances
TATTY A MADMIN	to position	enter -0-)	compensation	anowances
SALLY A. MARTIN	PRESIDENT			
115 DEPOT STREET	1 00			^
ANN ARBOR, MI 48104	1.00	0.	0.	0.
WILLIAM C. MARTIN	_V.P./SEC./TRE	ASURER	1	
115 DEPOT STREET	1 00			
ANN ARBOR, MI 48104	1.00	0.	0.	0.
MICHAEL C. MARTIN	DIRECTOR			
115 DEPOT STREET		_		_
ANN ARBOR, MI 48104	1.00	0.	0.	0.
	_			
	_			
		<u> </u>		
Compensation of five highest-paid employees (other than those in		enter "NONE."	(d) 0-stab at	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Hame and address of each employee paid more than \$60,000	devoted to position	(C) compensation	compensation	allowances
NONE	_			
	7			
	7			•
Total number of other employees paid over \$50,000			<b></b>	0
Ostal manifest of other employees paid of a position				

Total. Add lines 1 through 3

Р	Minimum Investment Return (All domestic foundations must	complete this part. Foreign four	ndations,	see instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, et	c., purposes;		
	Average monthly fair market value of securities	, F F	1a	2,820,950.
	Average of monthly cash balances		1b	171,028.
	Fair market value of all other assets		1c	<del></del>
d	Total (add lines 1a, b, and c)		1d	2,991,978.
	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation)	0.		
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	2,991,978.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see	instructions)	4	44,880.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Pal	t V, line 4	5	2,947,098.
6	Minimum investment return Enter 5% of line 5		6	147,355.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j foreign organizations check here   in and do not complete this part.)	)(5) private operating foundations ar	id certain	
1	Minimum investment return from Part X, line 6		1	147,355.
2a	Tax on investment income for 2013 from Part VI, line 5	3,927.		
b	Income tax for 2013. (This does not include the tax from Part VI.)			
C	Add lines 2a and 2b	<del></del>	2c	3,927.
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	143,428.
4	Recoveries of amounts treated as qualifying distributions		4	0.
5	Add lines 3 and 4		5	143,428.
6	Deduction from distributable amount (see instructions)		6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	line 1	7	143,428.
	Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpose	S:	4.	115 072
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		1a	115,973.
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	
þ	Cash distribution test (attach the required schedule)		3b	115 072
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and P		4	115,973.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment.	ent	_	^
	income. Enter 1% of Part I, line 27b		5	115 072
6	Adjusted qualifying distributions Subtract line 5 from line 4		6	115,973.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when 4940(e) reduction of tax in those years.	calculating whether the foundation	qualifies foi	the section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	( <b>d</b> ) 2013
1 Distributable amount for 2013 from Part XI,		,		
line 7				143,428.
2 Undistributed income, if any, as of the end of 2013				
a Enter amount for 2012 only			108,683.	
<b>b</b> Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2013:				
a From 2008				
<b>b</b> From 2009				
c From 2010				
d From 2011				
e From 2012	0			
f Total of lines 3a through e	0.		-	
4 Qualifying distributions for 2013 from				
Part XII, line 4: ► \$ 115,973.			108,683.	
a Applied to 2012, but not more than line 2a			100,003.	-
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	· · · -	- 0.		
(Election required - see instructions)	0.			
d Applied to 2013 distributable amount				7,290.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2013	0.			0.
(if an amount appears in column (d), the same amount must be shown in column (a) )				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
<b>b</b> Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously		_		
assessed	<del></del>	0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		<del></del>
e Undistributed income for 2012. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2013. Subtract				
lines 4d and 5 from line 1. This amount must				126 120
be distributed in 2014  7 Amounts treated as distributions out of				136,138.
,				
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2008	0.			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2014.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2009				
b Excess from 2010				
c Excess from 2011				
d Excess from 2012				
e Excess from 2013				·
·				Form 000 DE (2012)

		FOUNDATION			3-3340278 Page 10
Part XIV Private Operating Fo			I-A, question 9)	N/A	
1 a If the foundation has received a ruling or					
foundation, and the ruling is effective for			▶└┌	<del></del>	
<b>b</b> Check box to indicate whether the found		ing foundation described		4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	41,0040	Prior 3 years	4 13 0040	4.3.7.1.1
income from Part I or the minimum	(a) 2013	<b>(b)</b> 2012	(c) 2011	(d) 2010	(e) Total
investment return from Part X for					
each year listed					
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not			1		
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon:  a "Assets" alternative test - enter:					
(1) Value of all assets					
` '					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter	<del></del>				
2/3 of minimum investment return shown in Part X, line 6 for each year					
listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt		ļ			
organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income	-				
Part XV Supplementary Info			if the foundation	on had \$5,000	or more in assets
at any time during t	he year-see inst	ructions.)			
1 Information Regarding Foundatio					
a List any managers of the foundation who			tributions received by	the foundation before	the close of any tax
year (but only if they have contributed m	iore man \$5,000). (See	Section 507(u)(2).)			
SEE STATEMENT 9  b List any managers of the foundation who	o our 100/ or more of t	he steek of a corneration	/or on equally large pe	ortion of the ownerch	n of a partnership or
other entity) of which the foundation has			(or all equally large po	of thore of the ownershi	p of a partitership of
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loar	, Scholarship, etc., P	rograms:		
Check here   If the foundation o			-	es not accept unsolici	ted requests for funds. If
the foundation makes gifts, grants, etc.	(see instructions) to ind	ividuals or organizations	under other conditions	, complete items 2a, l	b, c, and d.
a The name, address, and telephone num	ber or e-mail address of	the person to whom app	lications should be add	dressed:	
b The form in which applications should b	e submitted and informa	ation and materials they s	should include:		
c Any submission deadlines:				· · · · · · · · · · · · · · · · · · ·	
1.4	anah as hu an	al annual state of the		or other feets :	
d Any restrictions or limitations on awards	s, such as by geographic	cai areas, charitable fields	, KINGS OF INSTITUTIONS,	or other factors;	

Part XV Supplementary Information  3 Grants and Contributions Paid During the Ye	<del></del>	Payment	· · · · · · · · · · · · · · · · · · ·	
Recipient	If recipient is an individual,			
<u> </u>	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year				
006 27027033		E01/01/31	EDITORETONS (	
826 MICHIGAN 115 E. LIBERTY ST.		501(C)(3)	EDUCATIONAL	
ANN ARBOR MI 48104				1,000
				•
AMERICAN RED CROSS		501(C)(3)	HUMANITARIAN	
P.O. BOX 4002018				1,000
DES MOINES, IA 50340-2018				1,000
ANN ARBOR AREA COMMUNITY FOUNDATION		501(C)(3)	HUMANITARIAN	
201 S. MAIN ST., SUITE 501				
ANN ARBOR, MI 48104-2113				1,000
	•			
ANN ARBOR HANDS ON MUSEUM		501(C)(3)	EDUCATIONAL	
200 E ANN STREET				
ANN ARBOR, MI 48104				1,000
AND ADDOD IN CONCERN		501(C)(3)	EDUCATIONAL	
ANN ARBOR IN CONCERT 3588 PLYMOUTH RD., #384		501(C)(3)	EDUCATIONAL	
ANN ARBOR MI 48105				1,000
	TINUATION SHE	ET(S)	<b>▶</b> 3a	107,750
<b>b</b> Approved for future payment				
NONE				
NONE				
		1		
Total	I	1	<b>▶</b> 3b	
Total				0 0 orm <b>990-PF</b> (2013

Part XVI-A	Analys	is of Income	e-Producing	Activities

nter gross amounts unless otherwise indicated.	Unrelated b	usiness income		y section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code		code	Amount	Turiction moonic
a					
b					
C				-	
d	-		· ·		
e					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	122,610.	
Dividends and interest from securities			14	66,844.	
5 Net rental income or (loss) from real estate:		<u> </u>		00/0220	
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	21,370.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:		<del></del>			<del></del>
a MINOT HI INVESTORS LLC -					
b UNRELATED BUSINESS					
c INCOME/(LOSS)	900099	-23,452.			·
d					
e			ļ		
2 Subtotal. Add columns (b), (d), and (e)		-23,452.		210,824.	0.
3 Total. Add line 12, columns (b), (d), and (e)				13	187,372.
See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities t	o the Accom	plishment of Ex	empt P	ırposes	
Line No. Explain below how each activity for which inco			contributed	importantly to the accomp	lishment of
the foundation's exempt purposes (other than	by providing funds	tor such purposes).			

	the foundation's exempt purposes (other than by providing funds for such purposes).
+-	
$\dashv$	
_	
_	
$\neg \vdash$	
+	
$\top$	

Part X		egarding Transfers			and Relations	hips With Noncha	ritable		ige io
	Exempt Organ					· · · · · · · · · · · · · · · · · · ·	,		
1 Did t	he organization directly or indi	rectly engage in any of the f	following	with any other organization	on described in sec	tion 501(c) of		Yes	No
	Code (other than section 501(c				nizations?				
	sfers from the reporting found	ation to a noncharitable exe	empt orga	anization of:					
	Cash						1a(1)		X
	Other assets						1a(2)		X
-	r transactions:								37
	Sales of assets to a noncharita	· -	_				1b(1)		X
٠,,	Purchases of assets from a no	, •	ation				1b(2)		X
	Rental of facilities, equipment,						1b(3)		X
	Reimbursement arrangements	1					1b(4)		X
	Loans or loan guarantees	omborobio or fundroising oo	latotion	•			1b(5) 1b(6)	<del> </del>	X
	Performance of services or me ing of facilities, equipment, ma						10(0)	<u> </u>	X
	answer to any of the above is				wave show the fair i	market value of the goods of		sets.	
	ervices given by the reporting f							3010,	
	mn (d) the value of the goods,			a loop than han that to take	50 ay aoaoo.				
(a) Line no	(b) Amount involved			exempt organization	(d) Description	n of transfers, transactions, and s	sharing a	rrangeme	ents
· · ·		N	I/A						
						- ::			
								_	
						····			
-									
		<u> </u>							
		<u></u>							
		<del> </del>							
			<u> </u>						
		<u></u>							
0 la 4b	- (	Al . eff. leaded							
	e foundation directly or indirec				izations described	Г	¬ <sub>v</sub> ,,	T	No
	ction 501(c) of the Code (othe		in sectio	ON 527 ?		<u> </u>	Yes	لمما	טאו ר
<u> </u>	es," complete the following sch (a) Name of org		T	(b) Type of organization	T	(c) Description of relationsl	מור		
	N/A			(b) //po bi bigainzaiioii		(0) 2000	···•		
	11/21								
	···			<del></del>					
								-	
	Under penalties of perjury, I declare						the IRS	discuss	this
Sign	and belief, it is true, correct, and cor	544	other than t	taxpayer) is based on all inform	nation of which prepare	retu	rn with th wn belov	ne prepar	er
Here	Jally	Martin		4188114	PRESI		X Yes		No
	Signature of officer or trustee			Date	Title		<del></del>		
	Print/Type preparer's na	ame Prepa	arer's sig	nature	Date	Check if PTIN			
	BRIAN D. M	IILLER, /	$Q_{\perp}$	1. 11	8-25-14	self- employed			
Paid	CPA		ou	- Wille	1		0091		
Prepa		IMANN ROBSON	LLC			Firm's EIN ► 38 – 36	5357	06	
Use O	·	·	<b>AT-</b>	***				<del></del>	
		55 BRIARWOOD				504 5	-		
	AN	IN ARBOR, MI	<u>4810</u>	אַן		Phone no. 734-76	5 I - 2	<u> 1005</u>	

# 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.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

2013

Name of the organization

Employer identification number

38-3340278 THE MARTIN FAMILY FOUNDATION 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 foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for reliqious, 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 its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

LHA 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) (2013)

Name of organization

Employer identification number

### THE MARTIN FAMILY FOUNDATION

38-3340278

Part I	Contributors (see instructions) Use duplicate copies of Part I if a	dditional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	WILLIAM C. AND SALLY A. MARTIN  115 DEPOT STREET  ANN ARBOR, MI 48104	\$\$.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
202452 10.2		\$Sahadula B (Farm	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

### THE MARTIN FAMILY FOUNDATION

38-3340278

Part II	Noncash Property (see instructions) Use duplicate copies of P	art 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
(a) No. rom 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. rom art I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Name of org	anization		Employer identification number
THE MA Part III	the total of exclusively religious, charitable, et	vidual contributions to section 501(c)( he following line entry. For organization c., contributions of \$1,000 or less for tl	38-3340278  7), (8), or (10) organizations that total more than \$1,000 for the s completing Part III, enter ne year. (Enter this information once)
(a) No. from Part I	Use duplicate copies of Part III if addition (b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, a		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, a	(e) Transfer of gift	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, a	(e) Transfer of gift	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
		(e) Transfer of gift	
	Transferee's name, address, a	NG ZIP + 4	Relationship of transferor to transferee

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THE MARTIN FAMILY FOUNDATION

Part XV Supplementary Information 3 Grants and Contributions Paid During the				[
Recipient	If recipient is an individual,			
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
ANN ARBOR PUBLIC SCHOOLS 2555 S. STATE ST.	or substantial contributor	501(C)(3)	EDUCATIONAL	
NN ARBOR, MI 48104				1,500
ANN ARBOR SUMMER FESTIVAL 310 DEPOT ST., SUITE 3 ANN ARBOR, MI 48104		501(C)(3)	EDUCATIONAL	1,000
ANN ARBOR YMCA 400 WEST WASHINGTON ST. ANN ARBOR, MI 48103		501(C)(3)	EDUCATIONAL	1,000
ARBOR HOSPICE FOUNDATION 2366 OAK VALLEY DRIVE ANN ARBOR, MI 48103		501(C)(3)	HUMANITARIAN	2,500
BAY CLIFF HEALTH CAMP 214 W. MICHIGAN ST. 4ARQUETTE, MI 49855		501(C)(3)	HUMANITARIAN	6,000
BIG BROTHERS BIG SISTERS 2890 CARPENTER RD., SUITE 600 ANN ARBOR, MI 48108		501(C)(3)	HUMANITARIAN	1,000
BOOTJACK FIRE DEPARTMENT 45166 BOOTJACK RD. LAKE LINDEN, MI 49945		501(C)(3)	HUMANITARIAN	1,000
CANCER SUPPORT COMMUNITY  2010 HOGBACK RD., SUITE 3  ANN ARBOR, MI 48105		501(C)(3)	HUMANITARIAN	1,000
CHICAGO RUN 3611 N. KENDZIE CHICAGO, IL 60618		501(C)(3)	HUMANITARIAN	750
COUNCIL OF MICHIGAN FOUNDATIONS ONE SOUTH HARBOR AVE., STE. 3 GRAND HAVEN, MI 49417		501(C)(3)	HUMANITARIAN	1,000
Total from continuation sheets				102,750

3 Grants and Contributions Paid During the Ye				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
		504 (5) (2)		
RU - CAMPUS CRUSADE FOR CHRIST		501(C)(3)	HUMANITARIAN	
1735 FOSTER AVE NN ARBOR, MI 48108				1,00
TOW (ANTWOLES COOTED APPLY APP		501(C)(3)	HUMANITARIAN	
CSS - ICW (CATHOLIC SOCIAL SERVICES - INTL COMMUNITIES WASHTENAW)		501(0)(3)	HOMANITAKIAN	
1925 PACKARD RD.				
ANN ARBOR, MI 48108				1,00
DAWN FARM		501(C)(3)	HUMANITARIAN	
502 W. HURON				1 ^^
ANN ARBOR, MI 48103				1,00
COOD CAMUEDEDC		501(C)(3)	HUMANITARIAN	
FOOD GATHERERS		B01(C)(3)	HUMANITARIAN	
ANN ARBOR MI 48103				2,50
GERALD R. FORD PRESIDENTIAL		501(C)(3)	HUMANITARIAN	
FOUNDATION 303 PEARL STREET, NW				
GRAND RAPIDS, MI 49504				10,00
SLORIA DEI LUTHERAN CHURCH		501(C)(3)	HUMANITARIAN	
1000 QUINCY ST.				
HANCOCK, MI 49930				1,00
HABITAT FOR HUMANITY		501(C)(3)	HUMANITARIAN	
170 APRILL DR., SUITE A				
NN ARBOR, MI 48103	<u> </u>			1,00
INTERFAITH HOSPITALITY NETWORK		501(C)(3)	HUMANITARIAN	
4200 JACKSON RD ANN ARBOR <u>MI</u> 48103				1,50
MAI FALLON, ELA TOLOS				1,50
JACOBSVILLE COMMUNITY CENTER		501(C)(3)	HUMANITARIAN	
312 N. EAST AVE.			TOTALL TAKEN	
DAK PARK, IL 60302				1,00
JALEN ROSE LEADERSHIP ACADEMY		501(C)(3)	EDUCATIONAL	
15000 TROJAN ST.				
DETROIT, MI 48235				5,00

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THE MARTIN FAMILY FOUNDATION

Part XV Supplementary Information			<del></del>	
3 Grants and Contributions Paid During the	·		<del></del>	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Namę and address (home or business)	or substantial contributor	recipient		
KENYON COLLEGE		501(C)(3)	EDUCATIONAL	
209 CHASE AVE GAMBIER, OH 43022				1,000
KEWEENAW COMMUNITY FOUNDATION 236 QUINCY ST.		501(C)(3)	HUMANITARIAN	
HANCOCK, MI 49930				1,000
KEWEENAW HERITAGE CENTER		501(C)(3)	HUMANITARIAN	
25880 RED JACKET RD. CALUMET, MI 49913				1,000
				. —
LEGACY LAND CONSERVANCY 1100 N. MAIN ST., #203		501(C)(3)	HUMANITARIAN	
ANN ARBOR, MI 48104				1,000
LINKS		501(C)(3)	HUMANITARIAN	
1779 MAPLE ST. NORTHFIELD, IL 60093				750
MICHIGAN ENGINDAMENTAL COUNCIL		501(C)(3)	HUMANITARIAN	
MICHIGAN ENVIRONMENTAL COUNCIL 602 W. IONIA STREET LANSING MI 48933		501(0)(3)	TOTAL TAKEN	1,500
IMBING, MI 40555				_,
MICHIGAN THEATER 603 E. LIBERTY		501(C)(3)	MUSICAL	
ANN ARBOR, MI 48104		-		1,000
NATIONAL SAILING HALL OF FAME		501(C)(3)	EDUCATIONAL	
69 PRINCE GEORGE ST. ANNAPOLIS, MD 21401				1,000
NEUTRAL ZONE 310 E. WASHINGTON		501(C)(3)	HUMANITARIAN	
ANN ARBOR, MI 48104				1,000
NEW ORLEANS JAZZ ORCHESTRA		501(C)(3)	MUSICAL	
2020 ST. CHARLES AVENUE NEW ORLEANS, LA 70130				250
Total from continuation sheets				

THE MARTIN FAMILY FOUNDATION 38-3340278

3 Grants and Contributions Paid During the		· · · · · · · · · · · · · · · · · · ·		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Namę and address (home or business)	any foundation manager or substantial contributor	recipient	COLIGIDATION	711100111
NOBLE NETWORK OF CHARTER SCHOOLS		501(C)(3)	MUSICAL	
l n. state st.				
CHICAGO, IL 60602				1,00
PLANNED PARENTHOOD		501(C)(3)	HUMANITARIAN	
P.O. BOX 3673				
ANN ARBOR, MI 48106				1,00
RONALD KNOX MONTESSORI SCHOOL		501(C)(3)	EDUCATIONAL	
2031 ELMWOOD AVE.				1 00
VILMETTE, IL 60091				1,00
ROTARY CLUB OF ANN ARBOR		501(C)(3)	HUMANITARIAN	
P.O. BOX 131217 ANN ARBOR MI 48113-1217				50
WW ARBOR, MI 40113-1217				
SALVAMION ADMY AND ADDOD		501(C)(3)	WINANT MAD TAN	
SALVATION ARMY - ANN ARBOR 100 S. ARBANA DR		501(0)(3)	HUMANITARIAN	
ANN ARBOR, MI 48107				5,00
SALVATION ARMY - HANCOCK 408 RAVINE ST.		501(C)(3)	HUMANITARIAN	
HANCOCK, MI 49930				2,00
SHAKE-A-LEG MIAMI		501(C)(3)	HUMANITARIAN	
2620 SOUTH BAYSHORE DR. MIAMI FL 33133				1,00
				1,00
THE ARBOR HOSPICE FOUNDATION		501(C)(3)	HUMANITARIAN	
2366 OAK VALLEY DRIVE				
ANN ARBOR, MI 48103				50
THE KITE NETWORK		501(C)(3)	HUMANITARIAN	
24 FRANK LLOYD WRIGHT DRIVE, SUITE				
14100 ANN ARBOR, MI 48106				50
JNIV OF MICH - BURNS FUND - 796684		501(C)(3)	EDUCATIONAL	
OFFICE OF GIFT ADM., 3003 S. STATE ST., STE. 8000 ANN ARBOR, MI				
18109-1288				1,00
Total from continuation sheets			***	

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THE MARTIN FAMILY FOUNDATION

3 Grants and Contributions Paid During the Ye	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
UNIV OF MICH - CEW - 310560		501(C)(3)	EDUCATIONAL	
330 E. LIBERTY				2 500
ANN ARBOR, MI 48104-2274				2,500
UNIV OF MICH - EVENT ON MAIN - 314925		501(C)(3)	EDUCATIONAL	
1000 OAKBROOK DR., SUITE 100				
ANN ARBOR MI 48104				3,000
UNIV OF MICH - HEALING WALL - 321466		501(C)(3)	EDUCATIONAL	
OFFICE OF GIFT ADM., 3003 S. STATE				
ST., STE. 8000 ANN ARBOR, MI				1,500
48109-1288 UNIV OF MICH - MICHIGAN RADIO -		501(C)(3)	MUSICAL	1,300
307220				
OFFICE OF GIFT ADM., 3003 S. STATE				
ST., STE. 8000 ANN ARBOR, MI				1 000
48109-1288				1,000
UNIV OF MICH - MICHIGAN SEA GRANT -		501(C)(3)	EDUCATIONAL	
311949				
520 E. LIBERTY, SUITE 310				
ANN ARBOR, MI 48104		<del>-</del>		1,000
UNIV OF MICH - MUSICAL THEATRE -		501(C)(3)	MUSICAL	
364820				
1100 BAITS DRIVE				
ANN ARBOR, MI 48109-2085				2,500
UNIV OF MICH - PEDIATRIC - 314815		501(C)(3)	EDUCATIONAL	
OFFICE OF GIFT ADM., 3003 S. STATE				
ST., STE. 8000 ANN ARBOR, MI				
48109-1288	<u>.</u>			1,000
UNIV OF MICH - REC SPORTS 100TH ANNIV		501(C)(3)	EDUCATIONAL	
300462				
IM BUILDING				
ANN ARBOR, MI 48109	_			2,500
UNIV OF MICH - SAILING REPLACEMENT -		501(C)(3)	EDUCATIONAL	
313132				
OFFICE OF GIFT ADM., 3003 S. STATE				
ST., STE, 8000 ANN ARBOR, MI 48109			1	2,500
UNIV OF MICH - TEETER LAB - 308404		501(C)(3)	EDUCATIONAL	
TAUBMAN HEALTH CARE CENTER - ROOM				
3875 / 1500 E. MEDICAL CENTER DR.,				
SPC5330 ANN ARBOR MI 48109-5330  Total from continuation sheets	l			2,000

THE MARTIN FAMILY FOUNDATION

3 Grants and Contributions Paid During the Ye	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	QUITAL DATE.	
		501/01/21		
UNIV OF MICH - TELLING IT PROGRAM - 312781		501(C)(3)	EDUCATIONAL	
OFFICE OF GIFT ADM., 3003 S. STATE				
ST. STE. 8000 ANN ARBOR MI 48109				5,00
		501(0)(2)		
UNIV OF MICH - TURNER SENIOR RESOURCE - 365615		501(C)(3)	EDUCATIONAL	
300 N. INGALLS, ROOM 907				
ANN ARBOR, MI 48109-2007				1,00
		504 (5) (0)		
UNIVERSITY MUSICAL SOCIETY BURTON MEMORIAL TOWER / 881 N.		501(C)(3)	MUSICAL	
JNIVERSITY AVE. ANN ARBOR, MI				
48109-1011				5,50
UNIVERSITY OF MICHIGAN - ANN ARBOR		501(C)(3)	HUMANITARIAN	
MEALS ON WHEELS - 212580 2025 TRAVERWOOD DR., SUITE A2		İ		
ANN ARBOR MI 48105				1.00
JNIVERSITY OF MICHIGAN - HOWARD WIKEL		501(C)(3)	EDUCATIONAL	
SCHOLARSHIP 306071				
OFFICE OF GIFT ADM., 3003 S. STATE ST., STE, 8000 ANN ARBOR, MI 48108				1,00
51. SIE. 0000 ANN ARBOR MI 40100				1,00
JPPER PENINSULA ENVIRONMENTAL		501(C)(3)	HUMANITARIAN	
COALITION			}	
P.O. BOX 673				
HOUGHTON, MI 49931				1,00
				Í
WASHTENAW LITERACY		501(C)(3)	EDUCATIONAL	
5577 WHITTAKER RD				
YPSILANTI, MI 48197	-			1,00
WILMETTE PARK DISTRICT		501(C)(3)	EDUCATIONAL	
1200 WILMETTE AVE				
WILMETTE, IL 60091				1,00
YOUTH CHORAL THEATER OF CHICAGO		501(C)(3)	MUSICAL	
708 CHURCH ST., SUITE 203				
EVANSTON, IL 60201		-		1,00
YPSILANTI MEALS ON WHEELS		501(C)(3)	HUMANITARIAN	
1110 W. CROSS ST.				
YPSILANTI, MI 48197  Total from continuation sheets	<u> </u>	<u> </u>		1,00

FORM 990-PF INTERE	ST ON SAVI	NGS AND T	EMPOR.	ARY CASH	INVESTMENTS	STATEMENT	' 1
SOURCE		RE'	(A) REVENUE NE PER BOOKS		(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME	
INTEREST INCOME				05.	105.		
MINOT HI INVESTORS	LLC	•	122,5	05. 	122,505.	•	
TOTAL TO PART I, LI	NE 3	-	122,6	10. —— ——	122,610.		
FORM 990-PF	DIVIDENDS	S AND INT	EREST	FROM SEC	URITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPIT. GAIN DIVIDE	S	(A) REVENUE PER BOOK			TED
BANK OF ANN ARBOR	73,536	. 6,	692.	66,84	4. 66,8	44.	·
TO PART I, LINE 4	73,536	6,	6,692. 66,844		66,8	44.	
FORM 990-PF		OTHER	INCO	ME		STATEMENT	3
DESCRIPTION			RE	(A) VENUE BOOKS	(B) NET INVEST MENT INCOM		
MINOT HI INVESTORS BUSINESS INCOME/(LC		LATED		-23,452.		0.	
TOTAL TO FORM 990-F	F, PART I,	LINE 11		-23,452.		0.	
FORM 990-PF		ACCOUN	TING	FEES		STATEMENT	' 4
DESCRIPTION		(A) EXPENSES PER BOOK		(B) T INVEST- NT INCOME			ABLE
ACCOUNTING FEES		3,40	0.	0	•	3,	400.
TO FORM 990-PF, PG	1, LN 16B	3,40	0.	0	•	3,	400.
	_			<del></del>			

FORM 990-PF	TAX	ES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
TAXES FOREIGN TAX WITHHOLDINGS	8,531. 615.		0. 615.	-		0.
TO FORM 990-PF, PG 1, LN 18	9,146.		615.			0.
FORM 990-PF	OTHER E	XPENSES		*	STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
DUES AND FEES MANAGEMENT FEES MISCELLANEOUS BANK FEES	1,300. 17,337. 41. 15.	13,	0. 870. 0. 0.			
TO FORM 990-PF, PG 1, LN 23	18,693.	13,	870.		4,8	23.
FORM 990-PF	CORPORAT	E STOCK			STATEMENT	7
DESCRIPTION			вос	OK VALUE	FAIR MARKE	r
CORPORATE STOCK			1	1,482,181.	2,477,3	05.
TOTAL TO FORM 990-PF, PART II	I, LINE 10B		1	1,482,181.	2,477,3	05.
FORM 990-PF	OTHER INV	ESTMENTS		<del></del>	STATEMENT	8
DESCRIPTION		LUATION ETHOD	вос	OK VALUE	FAIR MARKE	r
		EM7				
INVESTMENT IN MINOT HI INVEST	rors	FMV		056 763	0 E C 7	<b>(1)</b>
INVESTMENT IN MINOT HI INVEST LLC OTHER INVESTMENTS INVESTMENT IN RCA VG LLC		FMV FMV		856,762. 607,153. 421,343.	856,7 651,8 421,3	71.

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT 9

NAME OF MANAGER

SALLY A. MARTIN WILLIAM C. MARTIN

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Industry Analysis	Analysis					· 
Shares	Asset Description	Cost	Market	Est Ann Income	UNR Gain Loss	Yield
	Telecommunication Services					
1,530	AT&T inc	47,918.38	53,794.80	2,815.20	5,876.42	5.23%
1,530	** Sub Totals **	47,918.38	53,794.80	2,815.20	5,876.42	5.23%
	Energy					
328	BP PLC	13,535.00	15,944.08	747.84	2,409.08	4.69%
230	Chevron Corp	24,476.15	28,729.30	920.00	4,253.15	3.20%
1,240	JPMorgan Chase - Alerian MLP Index	55,712.20	57,474.00	2,713.99	1,761.80	4.72%
1,205	Marathon Petroleum Corp	50,259.97	110,534.65	2,024.40	60,274.68	1.83%
670	Schlumberger Ltd	16,316 85	60,373.70	837.50	42,751.07	1.39%
3,673	** Sub Totals **	160,300.17	273,055.73	7,243.73	111,449.78	2.65%
	Semiconductors & Semiconductor					
1,770	Intel Corp	49,475.07	45,940.35	1,593.00	-3,534.72	347%
1,770	** Sub Totals **	49,475.07	45,940.35	1,593.00	-3,534.72	3.47%
	Real Estate					
755	American Tower Corp	47,946.99	60,264.10	875.80	12,317.11	1.45%
756	** Sub Totals **	47,946.99	60,264.10	875.80	12,317.11	1.45%
	Taxable Bond Funds					
7,398.172	DoubleLine Core Fixed Income Fund Ci I	82,103.93	79,160.44	3,414.65	-2,943.49	4.31%
5,983.545	Templeton Global Bond Fund	80,000,00	78,324.60	3,070.76	-1,675.40	3.92%
8,018.279	Vanguard Interm-Term Investment - Grade Adm	81,048.92	77,536.76	2,640.29	-3,512.16	3.41%
21,399.996	** Sub Totals **	243,152.85	235,021.80	9,125.70	-8,131.05	3.88%
	Small/Mid Cap Equity Funds					
4,228.892	Eaton Vance Atlanta Capital Fd - Cl I	75,000.00	104,411.34	0.00	29,411.34	0.00%
4,228.892	** Sub Totals **	75,000.00	104,411.34	00.0	29,411.34	0.00%

Page 7

December 01, 2013 To December 31, 2013

Account No : 19-1077

Industry Analysis	Analysis			D 4 A m m		
Shares	Asset Description	Cost	Market	Income	Gain Loss	Yield
	International Large Cap Equity					
3,322.455	Matthews Pacific Tiger Fund - Institutional	75,000.00	82,961.70	0.00	7,961.70	0.00%
3,322,455	** Sub Totals **	75,000.00	82,961.70	0.00	7,961.70	0.00%
	International Small/Mid Cap Eq					
1,881.545	Columbia Acom International Fund Z	74,000.00	87,830.52	2,241.35	13,830.52	2.55%
1,881.545	** Sub Totals **	74,000.00	87,830.52	2,241.35	13,830.52	2.55%
	International Equity Funds					
1,763.429	Oppenheimer international Growth - Y	65,000.00	67,292 45	624.01	2,292,45	0.93%
1,763.429	** Sub Totals **	65,000.00	67,292.45	624.01	2,292,45	0.93%
	Money Market Funds					
44,674.51	Northem Institutional U S Government Select	44,674.51	44,674.51	4.47	0.00	0.01%
44,674.51	** Sub Totals **	44,674.51	44,674.51	4.47	0.00	0.01%
	Software & Services					
22,894	Activision Blizzard Inc	2,780.53	408,200.02	4,349.86	405,419.49	1.07%
245	Intl Business Machines Corp	50,221.55	45,954.65	931.00	4,266.90	2.03%
23,139	** Sub Totals **	53,002.08	454,154.67	5,280.86	401,152.59	1.16%
	Utilities					
2,700	NiSource Inc Common	49,528.22	88,776.00	2,700.00	39,247.78	3.04%
2,700	** Sub Totals **	49,528.22	88,776.00	2,700.00	39,247.78	3.04%
	Media					
1,650	Comcast Corp CI A	49,403.04	85,742.25	1,287.00	36,339.21	1.50%
1,650	** Sub Totals **	49,403.04	86,742.25	1,287.00	36,339.21	1.50%
	Consumer Services					
200	McDonalds Corp Common Stock	48,654.74	48,515.00	1,620.00	-139.74	3.34%
Holdings By Industry - INDUST	- INDUST					Page 8

Account Name : The Martin Family Foundation

Industry Analysis						
	ysis					
Shares Asset]	Asset Description	Cost	Market	Est Ann Income	UNR Gain Loss	Yield
500	** Sub Totals **	48,654.74	48,515.00	1,620.00	-139.74	3.34%
	Food & Staples Retailing					
860 Wal Ma	Wai Mart Stores Inc	52,102 02	67,673.40	1,616.80	15,571.38	2.39%
860	** Sub Totals **	52,102.02	67,673,40	1,616.80	15,571.38	2.39%
	Retailing					
1,245 eBay Inc	Ų	45,544.28	68,306.93	0.00	22,762.65	0.00%
1,245	** Sub Totals **	45,544,28	68,306.93	0.00	22,762.65	0.00%
	Food, Beverage, & Tobacco					
490 Diageo Pic	Pic	48,205.28	64,885.80	1,469.24	16.680.52	2 26%
735 Pepsico inc	o Inc	48,374.96	60,960.90	1,668.45	12,585.94	2.74%
1,225	** Sub Totals **	96,580.24	125,846.70	3,137.69	29,266.46	2.49%
	Household & Personal Products					
780 Procter	Procter & Gamble	39,345.65	63,499.80	1,876.68	24,154.15	2.96%
780	** Sub Totals **	39,345.65	63,499.80	1,876.68	24,154.15	2.96%
	Banks					
590 Toronto	Toronto Dominion	49,989.69	55,601.60	1,901.13	5,611.91	3,42%
630	** Sub Totals **	49,989.69	55,601.60	1,901.13	5,611.91	3.42%
	<u>Diversified Financials</u>					
350 Visa Inc		55,929.99	77,938.00	560.00	22,008.01	0 72%
2,310 WP Carey Inc	rey Inc	76,295 03	141,718.50	8,038.80	66,745.32	5.67%
2,660	** Sub Totals **	132,225.02	219,656.50	8,598.80	88,753.33	3.91%
	Pharma, Biotech, & Life Scienc					
	Merck & Co Inc New Com	49,446.16	64,564.50	2,270.40	15,118.34	3.52%
905 Novartis AG	s AG	49,676.64	72,743.90	1,862.04	23,067.26	2.56%

Shares				Est Ann	¥20	
	Asset Description	Cost	Market	Income	Gain Loss	Yield
2,175	Pfizer Inc	55,820.38	66,620.25	2,262.00	10,799.87	3.40%
4,370	** Sub Totals **	154,943.18	203,928.65	6,394.44	48,985.47	3.14%
	Health Care Equipment & Servic					
1,120	DaVita Healthcare Partners Inc	49,404.10	70,974.40	0.00	21,570.30	0.00%
870	Express Scripts Holding Company	49,472.18	61,108.80	0.00	11,636.62	0.00%
1,060	St Jude Medical Inc	44,337.22	65,667.00	1,060.00	21,329.78	1.61%
3,050	** Sub Totals **	143,213.50	197,750.20	1,060.00	54,536.70	0.54%
	Capital Goods					
915	Danaher Corp	49,802.65	70,638.00	91.50	20,835.35	0.13%
915	** Sub Totals **	49,802.66	70,638.00	91.50	20,835.35	0.13%
	Transportation					
150	Union Pacific Corp	16,751.00	25,200.00	474.00	8,449.00	1.88%
1,020	United Parcel Service Inc	74,980.40	107,181.60	2,529.60	32,201.20	2.36%
1,170	** Sub Totals **	91,731.40	132,381.60	3,003.60	40,650.20	2.27%
	Commercial & Professional Serv					
1,343	Waste Management Inc	23,547 00	60,260.41	1,960.78	60,260.41	3.25%
1,343	** Sub Totals **	23,547.00	60,260.41	1,960.78	60,260.41	3.25%
	Technology, Hardware, & Equipm					
85	Apple Inc	51,816.40	47,686.70	1,037.00	4,129.70	2.17%
725	Qualcomm inc	45,111.75	53,831.25	1,015.00	8,719.50	1.89%
810	** Sub Totals **	96,928.15	101,517.95	2,052.00	4,589.80	2.02%
	Emerging Market Equity					
5,138.451	Aberdeen Emerging Markets Fund - Inst'l	75,000.00	74,353.39	1,037.76	-646.61	1.40%
5,138,451	** Sub Totals **	75,000.00	74,353.39	1,037.76	-646.61	1.40%

Account Name: The Martin Family Foundation

Account Name : IT	Account Name : The martin Family Foundation				Account No : 19-1077	19-1077
Industry Analysis	Analysis					
Shares	Shares Asset Description	Cost	Market	Est Ann Income	UNR Gain Loss	Vield
	Cash					- 1
	Principal		0.00			
	Income		0.00			
	** Sub Totals **	•	0.00			
137,144.278	** Grand Totals **	2,134,008.83	3,173,850.35	68,142.30	1,063,404.59	2.15%

Form **8868** (Rev. January 2014) Application for Extension of Time To File an **Exempt Organization Return** 

File a separate application for each return.

OMB No. 1545-1709

	ment of the Treasury Revenue Service	•		instructions is at www.trs.gov/fo	rm8868			
• If v	ou are filing for an Auto	omatic 3-Month Extension, comple	te only Pa	art I and check this box			<b>▶</b> [X]	
		litional (Not Automatic) 3-Month Ex						
	<del>-</del>	ess you have already been granted			•			
		u can electronically file Form 8868 if y					or a corporation	
		or an additional (not automatic) 3-mo					•	
•		ns listed in Part I or Part II with the ex				•		
	•	which must be sent to the IRS in pap						
		ick on e-file for Charities & Nonprofits		<u> </u>			•	
Par		c 3-Month Extension of Time		submit original (no copies	neede	1)		
		Form 990-T and requesting an autor				Ψ		
Part I							ightharpoons	
		ling 1120-C filers), partnerships, REM		rusts must use Form 7004 to reque	st an exte	sion of tim	 ve	
	Income tax returns.	g					ying number	
Туре	or Name of exempt	t organization or other filer, see instru	ctions.				tion number (EIN) or	
print		,						
THE MARTIN FAMILY FOUNDATION 38-334027							340278	
File by the due date for Number, street, and room or suite no. If a P.O. box, see instructions.  Social security number (SS								
	ade date for return. See 115 DEPOT STREET							
Instruct		st office, state, and ZIP code. For a fo R , MI 48104	oreign add	fress, see instructions.				
	ANN ARDO	K, MI 40104			·			
Enter	the Return code for the	e return that this application is for (file	e a separa	te application for each return)		•	0 4	
Appli			Return	Application			Return	
Is For			Code	ls For			Code	
	990 or Form 990-EZ		01	Form 990-T (corporation)			07	
	990-BL		02	Form 1041-A			08	
	4720 (individual)		03	Form 4720 (other than individual)			09	
	990·PF		04	Form 5227			10	
	990-T (sec. 401(a) or 4	08(a) trust)	05	Form 6069			11	
	990-T (trust other than		06	Form 8870			12	
I OIIII	990 I those other than	KELLY FRITZSCH					112	
• The	e books are in the care	of ▶ 115 DEPOT STREE	ET - 2	ANN ARBOR, MI 4810	4			
Tel	ephone No. ► <u>(73</u>	4)994-5050		Fax No. ▶			· · · · · ·	
		ot have an office or place of business	s in the Ur	nited States, check this box		·	. ▶ □	
		m, enter the organization's four digit			f this is fo		group, check this	
box ▶		of the group, check this box		ich a list with the names and EINs o				
	I request an automatic	3-month (6 months for a corporation	required			_		
	AUGUST 15	<del></del>	τ organiza	tion return for the organization name	ed above.	The extens	sion	
	is for the organization's							
	► X calendar year							
	tax year begin	ning	, an	d ending		<u> </u>		
			h 4		-			
2	If the tax year entered Change in accou	in line 1 is for less than 12 months, curting period	neck reas	on: Initial return	Final retu	n		
3a		Forms 990-BL, 990-PF, 990-T, 4720,	or 6069	enter the tentative tax, less any	1			
	nonrefundable credits.		, 5. 5555,	entry the territories tany 1000 arry	За	\$	6,600.	
		Forms 990-PF, 990-T, 4720, or 6069	enter en	v refundable credits and		<b>-</b>	0,000.	
		ts made. Include any prior year overp			3b	\$	4,600.	
		t line 3b from line 3a. Include your pa			100	_ <del></del>	1,000.	
		ronic Federal Tax Payment System).			3c	\$	2,000.	
	OF COUNTY OF IT OF ITSOME	taring a general interest material managings.				—₹		

For Privacy Act and Paperwork Reduction Act Notice, see instructions. LHA 323841 12-31-13

instructions.

Form 8868 (Rev 1-2014)

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment

Form 8868 (Rev. 1-2014)						Page 2
• If you are filing for an Additional (Not Automatic) 3-Month Ex	xtension,	complete only Part II and check thi	s box			► X
Note. Only complete Part II if you have already been granted an	automatic	3-month extension on a previously t	iled Form	8868		
• If you are filing for an Automatic 3-Month Extension, comple	ete only Pa	art I (on page 1).				
Part II Additional (Not Automatic) 3-Month E	Extensio	n of Time. Only file the origin	nal (no d	opies r	needed	d).
		Enter filer's	identifyi	na numb	er. see	instructions
Type or Name of exempt organization or other filer, see instru	uctions.					umber (EIN) or
print						` '
File by the THE MARTIN FAMILY FOUNDATION	N			38-	3340	278
due date for Number, street, and room or suite no. If a P O. box, s	see instruc	tions.	Social se	curity nu	ımber (S	SSN)
return See 115 DEPOT STREET						
instructions City, town or post office, state, and ZIP code. For a fe	oreign add	fress, see instructions				
ANN ARBOR, MI 48104						
Enter the Return code for the return that this application is for (fike	e a separa	te application for each return)				0 4
	· · · · · · · · · · · · · · · · · · ·					
Application	Return	Application				Return
ls For	Code	Is For				Code
Form 990 or Form 990-EZ	01					
Form 990·BL	02	Form 1041-A				08
Form 4720 (individual)	03	Form 4720 (other than individual)				09
Form 990-PF	04	Form 5227				10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069				11
Form 990-T (trust other than above)	06	Form 8870				12
STOP! Do not complete Part II if you were not already granted	l an auton	natic 3-month extension on a prev	iously file	d Form	8868.	
KELLY FRITZSCH						
<ul> <li>The books are in the care of ➤ 115 DEPOT STREI</li> </ul>	ET - 2	ANN ARBOR, MI 4810	4			
Telephone No ► <u>(734)994-5050</u>		Fax No. >				
<ul> <li>If the organization does not have an office or place of business</li> </ul>	s in the Un	ited States, check this box				<b> </b>
<ul> <li>If this is for a Group Return, enter the organization's four digit</li> </ul>	Group Exe	mption Number (GEN)	f this is fo	r the who	ole group	o, check this
box ▶ . If it is for part of the group, check this box ▶	and atta	ch a list with the names and EINs of	all memb	ers the e	xtensior	n is for
4 I request an additional 3-month extension of time until				_		
5 For calendar year 2013, or other tax year beginning		, and ending	9			
6 If the tax year entered in line 5 is for less than 12 months, c	heck reas	on: Initial return	Final	eturn		
Change in accounting period						
7 State in detail why you need the extension						
ADDITIONAL TIME IS NEEDED TO (	GATHE	R THE INFORMATION	VECES	SARY	TO I	FILE A
COMPLETE AND ACCURATE RETURN.						
8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any				
nonrefundable credits. See instructions			8a	\$	1	10,000.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069	, enter any	refundable credits and estimated		· · · · · · · · · · · · · · · · · · ·		
tax payments made Include any pnor year overpayment all	owed as a	credit and any amount paid				
previously with Form 8868			8b	\$	1	10,000.
C Balance due. Subtract line 8b from line 8a. Include your pa	yment with	h this form, if required, by using		•		
EFTPS (Electronic Federal Tax Payment System) See instru	uctions.		8c	\$		0.
Signature and Verificat	ion mus	t be completed for Part II o				
Under penalties of perjury, I declare that I have examined this form, including	ing accomp	anying schedules and statements, and to	the best o	f my know	ledge and	d belief.
it is true, correct, and complete, and that I am authorized to prepare this fo	orm.	,		•	<b>*</b>	- <b>,</b>
Signature ▶ Title ▶ C	CPA		Date	<b>&gt;</b>		
					m <b>8868</b>	(Rev 1-2014)
						, <i>1</i>

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