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Form 990-PF

Return of Private Foundation

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

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service ▶ Do not enter Social Security numbers on this form as it may be made public.
 ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

For calendar year 2013 or tax year beginning , and ending Name of foundation Employer identification number WOLFF FAMILY FOUNDATION 76-0236381 Number and street (or P O box number if mail is not delivered to street address) Telephone number (see instructions) Room/suite 20 BRIAR HOLLOW LANE 713-626-8050 City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here 77027 HOUSTON G Check all that apply Initial return of a former public charity Initial return 1 Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the Address change Name change 85% test, check here and attach computation H Check type of organization X Section 501(c)(3) exempt private foundation If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation J Accounting method X Cash Fair market value of all assets at If the foundation is in a 60-month termination under section 507(b)(1)(B), check here end of year (from Part II, col (c), Other (specify) 2,824,682 line 16) ▶ \$ (Part I, column (d) must be on cash basis) (d) Disbursements Part I Analysis of Revenue and Expenses (The total of (a) Revenue and (b) Net investment (c) Adjusted net for charitable expenses per amounts in columns (b), (c), and (d) may not necessarily equal income income the amounts in column (a) (see instructions)) books (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 1 Check > X if the foundation is **not** required to attach Sch B 2 11,410 11,390 Interest on savings and temporary cash investments 3 64,315 64,315 Dividends and interest from securities 4 5a **Gross rents** b Net rental income or (loss) 76,414 Net gain or (loss) from sale of assets not on line 10 6a 368,386 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 76,414 7 8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances Less: Cost of goods sold b Gross profit or (loss) (attach schedule) C 11 Other income (attach schedule) 152,139 152, 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc SCANNED DEC 0 8 2014)
ng and Administrative Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits Legal fees (attach schedule) 16a STMT 1 570 570 Accounting fees (attach schedule) Other professional fees (attach schedule) 17 18 STMT 2 1,172 1,172 Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications STMT 3 Other expenses (att sch) 1,456 6 23 Total operating and administrative expenses. 3,198 1,748 Add lines 13 through 23 136,128 Contributions, gifts, grants paid 136,128 Total expenses and disbursements. Add lines 24 and 25 26 139,326 1,748 136,128 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements 12,813 150,371 Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-)

1,055

5

6

5 Decreases not included in line 2 (itemize) ► SEE STATEMENT 6

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Part IV Capital Gains a	and Losses for Tax on Investm	ent Income					
	cribe the kind(s) of property sold (e.g., real estate, varehouse, or common stock, 200 shs MLC Co.)			(b) How acquired P – Purchase D – Donation		ate acquired , day, yr)	(d) Date sold (mo , day, yr)
1a SEE WORKSHEET							
		· · · · · · · · · · · · · · · · · · ·					
_c				'	_		
_d							
е							
(e) Gross sales price	(f) Depreciation allowed (or allowable)			other basis ose of sale			or (loss)) minus (g)
_a	<u></u>						
_b							
<u>C</u>		 					
<u>d</u>	 	 					
	ng gain in column (h) and owned by the	foundation on 1	2/31/6	9			
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k)) Excess	of col (i) (j), if any			(h) gain minus less than -0-) or om col (h))
a							
_b							
<u> </u>		 					
d		 					
<u>e</u>		Port Line 7	$\overline{}$				
2 Capital gain net income or (net or	capital loss) If gain, also enter if (loss), enter -0- if				2		76,414
	ess) as defined in sections 1222(5) and (3, column (c) (see instructions) if (loss),	(6)	_ _				, , , , , , ,
Part I, line 8	,,, (0) (000, (1000),		_		3		
	nder Section 4940(e) for Redu	ced Tax on	Net I	nvestment Inco	me		
(For optional use by domestic private	e foundations subject to the section 494	0(a) tax on net i	nvestr	ment income)			
If section 4940(d)(2) applies, leave to	his part blank.						
	ction 4942 tax on the distributable amou	nt of any year in	the h	ase period?			Yes X No
	alify under section 4940(e) Do not comp	, ,	i tile b	asc periou:			les zi No
	each column for each year; see the inst		makın	o any entries			
(a)	(b)			(c)	Т		(d)
Base period years Calendar year (or tax year beginning in	Adjusted gualifying distribution	s N	et value	of nonchantable-use assets	s		bution ratio
2012		.,358		2,596,6	538		0.042885
2011		759		2,606,3	398		0.027148
2010		3,932		2,571,0			0.022921
2009		,340		2,549,			0.057007
2008	147	,198		3,056,9	984		0.048151
					İ	_	0 100110
2 Total of line 1, column (d)	m I I I I I I I I A A A A A A A A A A A	101. 51			}-	2	0.198112
_	5-year base period – divide the total on	=	by the		ŀ		0 020622
number of years the foundation i	has been in existence if less than 5 year	rs			-	3	0.039622
4 Enter the net value of nonchanta	able-use assets for 2013 from Part X, lin	e 5			-	4	2,717,255
5 Multiply line 4 by line 3					_	5	107,663
6 Enter 1% of net investment incom	me (1% of Part I, line 27b)					6	1,504
7 Add lines 5 and 6						7	109,167
8 Enter qualifying distributions from	n Part XII, line 4					8	136,128
• • -	in line 7, check the box in Part VI, line 1	b, and complete	that p	part using a 1% tax r	ate Se		

	n 990-PF (2013) WOLFF FAMILY FOUNDATION /6-0236381			P	<u>age 4</u>
_=	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)	,			··········
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)				
b		ļ		1,	<u>504</u>
	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)	1			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				0
3	Add lines 1 and 2			1,	504
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		~	1,	504
6	Credits/Payments				
а	2013 estimated tax payments and 2012 overpayment credited to 2013 6a 520				
b	Exempt foreign organizations – tax withheld at source				
С	Tax paid with application for extension of time to file (Form 8868) 6c 675				
d	Backup withholding erroneously withheld 6d 6			_	
7	Total credits and payments Add lines 6a through 6d	<u> </u>		1,	<u> 195</u>
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				310
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	ļ — —			
<u> 11 </u>	Enter the amount of line 10 to be: Credited to 2014 estimated tax ▶ Refunded ▶ 11				
	art 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			Yes	No
	participate 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				v
	Instructions for the definition)? If the answer of "Yee" to the earth attach a detailed description of the activities and copies of any materials.		1b	-	X
	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. Did the foundation file Form 1120-POL for this year?		4.		x
C	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.		1c		
d	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
e	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		<u> </u>		
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		x
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
b		N/A	4b		
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	
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) ▶ TX				
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		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 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes,"				
	complete Part XIV		9		X
0	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				
	names and addresses		10		X
-	1/15 INT 4 FTP 9 TOT 3	323	om 99	JU-PF	(2013)

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X

3b

4a

N/A

foundation had excess business holdings in 2013)

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

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 2013?

	1990-PF (2013) WOLLE PARTILL FOUNDATION		230301			Page b
	art VII-B Statements Regarding Activities for Which Form	4720 May Be R	Required (con	tinued)		
5a				()		
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section	,		Yes X No		
	(2) Influence the outcome of any specific public election (see section 4955), or	to carry on,		(==)		
	directly or indirectly, any voter registration drive?		=	Yes X No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?			Yes 🗓 No		
	(4) Provide a grant to an organization other than a charitable, etc., organization	described in		(
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)			Yes 🗓 No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, of	or educational		[==]		
	purposes, or for the prevention of cruelty to children or animals?			Yes X No		
þ	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify unc	•		4-		
	Regulations section 53.4945 or in a current notice regarding disaster assistance	•	>	N/A	5b	
	Organizations relying on a current notice regarding disaster assistance check h			>		
C	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from	om the tax				
	because it maintained expenditure responsibility for the grant?		N/A 🗌	Yes No	1 1	
	If "Yes," attach the statement required by Regulations section 53 4945–5(d)					
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to p	ay premiums			1	`
	on a personal benefit contract?			Yes 🗓 No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a pe	ersonal benefit conti	ract?		6b	X
	If "Yes" to 6b, file Form 8870					
7a	At any time during the tax year, was the foundation a party to a prohibited tax sl			Yes X No	1 1	
	If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b	
Pa	int VIII Information About Officers, Directors, Trustees, Fo	oundation Man	agers, Highly	Paid Employ	ees,	
	and Contractors					
<u>1 L</u>	ist all officers, directors, trustees, foundation managers and their compens	sation (see instruc	tions).			
		(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(a) Evn	once seemet
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	plans and deferred		ense account, allowances
		-		compensation	 	
SE	E STATEMENT 7		<u> </u>			
				<u> </u>		
			İ		ļ	
		 		ļ	 	
	· · · · · · · · · · · · · · · · · · ·	<u> </u>		<u> </u>	↓	
					1	
			L	<u> </u>	<u> </u>	
2	Compensation of five highest-paid employees (other than those included	on line 1 – see ins	tructions). If nor	ne, enter		
	"NONE."	,			,	
		(b) Title, and average	,	(d) Contributions to employee benefit	(a) Eva	ense account,
	(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred		allowances
		devoted to position		compensation	<u> </u>	
NO	NE					
			<u> </u>		<u> </u>	
			1			
			<u> </u>		Ļ	
]	
		<u> </u>		<u> </u>		
otal	number of other employees paid over \$50,000				•	1 0
				F	orm 99 (0-PF (2013)
				•		,,

Total. Add lines 1 through 3

P	Wart X Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	n fou	ndations,
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	<u>1a</u>	2,484,918
b	Average of monthly cash balances	1b	247,489
C	Fair market value of all other assets (see instructions)	1c	26,228
d	Total (add lines 1a, b, and c)	1d	2,758,635
е	Reduction claimed for blockage or other factors reported on lines 1a and	1	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	2,758,635
4	Cash deemed held for chantable activities Enter 1½% of line 3 (for greater amount, see	I	
	instructions)	4	41,380
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,717,255
6	Minimum investment return. Enter 5% of line 5	6	135,863
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating		-
	foundations and certain foreign organizations check here ▶ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	135,863
2a	Tax on investment income for 2013 from Part VI, line 5		
b	Income tax for 2013. (This does not include the tax from Part VI)		
С	Add lines 2a and 2b	2c	1,504
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,504 134,359
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	134,359
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7_	134,359
	and With Applifying Dictable tions (and partitions)		
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	1 <u>a</u>	136,128
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	136,128
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	1,504
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	134,624
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundar	tion	
_	qualifies for the section 4940(e) reduction of tax in those years		

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3 Grants and Contributions Paid During th		Future Payment		
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		
a Paid during the year SEE STATEMENT 9				136,128
Total			> 3a	136,128
b Approved for future paymentN/A				
•				
Total			> 3b	

Part AVI-A Analysis of Income-Producing	Activities				
Enter gross amounts unless otherwise indicated	Unrelated t	usiness income	Excluded by	section 512, 513, or 514	(e)
4. December 2020 2020	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
1 Program service revenue:			++-		
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	11,410	
4 Dividends and interest from securities			14	64,315	
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			14	31,559	44,855
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue: a					
b					
c					
d					
e			_		
2 Subtotal Add columns (b), (d), and (e)			0	107,284	44,855
3 Total. Add line 12, columns (b), (d), and (e)				13	152,139
See worksheet in line 13 instructions to verify calculations)	- Accemplishes	of Everynt	Durmana		
Part XVI-B Relationship of Activities to the					
Line No. Explain below how each activity for which industrial accomplishment of the foundation's exempt					ine \
N/A	perpedes (other than b	y providing funds	tor sacri parpe	(Oce manucho	
					
					
		 			

Form 990-PF (20	13) WOLFF FAMILY	FOUNDATION	76-0236381
Part XVII	Information Regarding	Transfers To and	Transactions and Relationships With Noncharitable
	Exempt Organizations		

	-	anization directly or ind 01(c) of the Code (others?		•		•			Yes	No
а	Transfers fr	om the reporting found	lation to a no	onchantable exemp	t organization o	f				
	(1) Cash							1a(1)	<u> </u>	X
1	(2) Other a	ssets						1a(2)		X
b	Other trans	actions								
		f assets to a nonchant						1b(1)		X
	-	ses of assets from a no			on			1b(2)		X
		of facilities, equipment		sets				1b(3)		X
		rsement arrangements	3					1b(4)		X
		or loan guarantees						1b(5)		X
		nance of services or mo	•	-				1b(6)		X
	-	acilities, equipment, m	-	•			and the state of the state of	1c	i	X
							lys show the fair market eived less than fair market			
		*	-		-		eived less than fair market issets, or services received			
	Line no	(b) Amount involved		e of noncharitable exemp			ition of transfers, transactions, and sharing	arrangeme	ents	
N/A										
									•	
_										
						<u> </u>				
						ļ.—				
			<u> </u>							
										
										
						 				
						 				
										
							 _			
		ation directly or indirect section 501(c) of the	•			, -	ions	Y	es X	No
b _1	"Yes," con	nplete the following sch	nedule			т				
) Name of organization		(b) Type of or	rganization		(c) Description of relationship			
N,	/ <u>A</u>					 				
						 				
		 				 				
										
	Under pen	alties of perjury, I declare that	at I have examin	ned this return, including	accompanying sch	edules and statements,	and to the best of my knowledge and bel	ef, it is true	9,	
	correct, ar	d complete Declaration of p	reparer (otner t	nan taxpayer) is based	on all information of	wnich preparer has any	May the IRS di	scuss this r	eturn	
Sign						,	with the prepar (see instruction			٦
lere	1, 0	74				1.1.1		isi.	162	No
	—		~~~	· · · · · · · · · · · · · · · · · · ·		11414	President			
	Signa	ture of officer or trustee	(M)	· · · · · · · · · · · · · · · · · · ·	Date	·	Title			
	Pnnt/Tyj	pe preparer's name			Preparer's signatu	re	Date	1.	Check	ıf
aid		D H. KAMINSKI	<u> </u>		٤	- U	h /	cc/14	self-err	ployed
repar	l Firm's na				P.C.		PTIN P	00171	629	•
se Or	Firm's ac			OND STE	1150		Firm's EIN ▶ 20	-004	119	1
		HOUST	ON, TX	77042			Phone no 71	3-78		
								Form 99	90-PF	(2013)

		Capital Gains and Losses	s for Tax on Investment	Income	
Form	990-PF	-			2013
L Name	, For ca	alendar year 2013, or tax year beginning	, and end		entification Num
MOL	FF FAMILY FO			76-023	T
	(a) List and de 2-story bro	escribe the kind(s) of property sold, e.g., real estate, ck warehouse, or common stock, 200 shs. MLC Co	(b) How acqui P-Purchas D-Donation	e (mo.dav.vr)	(d) Date sold (mo , day, yr)
	ATERPILLAR 1		P	09/07/12	09/24/
	UALCOMM INC.	•	P	09/07/12	09/24/
	BBOTT LABS		P	10/19/01	09/24/
	<u>HEVRON CORP</u> ITIGROUP CA	TMAT	P	07/10/01	09/24/
		CAPITAL		05/16/11	04/16/
<u> </u>	XXON MOBIL	CAPITAL	P	10/29/02	09/24/
	SHARES EMERG	TNG MKT	P	01/01/11	09/24/
		COUNTRY ASIA	P	06/02/09	09/24/
	OHNSON & JOH		P	02/05/03	09/24/
	ESTLE		P	10/29/02	09/24/
	PMORGAN #100)7			
	PA FUNDS				
14)					
15)					<u></u>
		(8 -	(-)		
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(n) Gai (e) plus (n or (loss) f) minus (g)
1)	10,525		11,088		-563
2)	11,902		11,025		877
3)	5,155		3,562		1,593
4)	18,437		6,073		12,364
5)	125,000		125,987		-987
6)	62,373		62,600		-227
7)	8,740 35,987		3,289		5,451
B)	32,635		32,558 25,291		3,429
9) 10)	8,831	- 	5,289		7,344
11)	17,242		5,210		12,032
12)	4,272		3,220		4,272
13)	27,287				27,287
14)					
15)					
Comi	plete only for assets sho	owing gain in column (h) and owned by the	e foundation on 12/31/69		
	F M V as of 12/31/69		(k) Excess of col (i)	(I) Gains (C	ol (h) gain minus iss than -0-) or n col (h))
		(j) Adjusted basis as of 12/31/69	over col (j), if any	Losses (from	
<u>)) </u>			+		<u>-563</u>
2)			 		877 1,593
3) 1)			 		12,364
4) 5)			 		-987
3) 3)			T		-227
2) 7)			I		5,451
3)					3,429
9)					7,344
10)					3,542
11)					12,032
<u>'</u>					
					4,272
12) 13) 14)					4,272 27,287

76-0236381	F	ederal Stat	ements		
<u>Statem</u>	ent 1 - Form	990-PF, Part I,	Line 16b - Acco	ounting Fees	
Description		_			
		Total	Net nvestment	Adjusted Net	Charitable Purpose
ACCOUNTING FEES	\$	570 \$	570 \$	Ş	\$
TOTAL	\$	570 \$	570 \$	0 5	<u> </u>
<u></u>	tatement 2 -	Form 990-PF,	Part I, Line 18 -	<u>Taxes</u>	
Description		_			
		Total I	Net Investment	Adjusted Net	Charitable Purpose
FOREIGN TAX	<u></u>	1.172 S	1.172 \$		5
TOTAL	\$	1,172 \$	1,172 \$ 1,172 \$	0	\$
Staten	nent 3 - Form	990-PF, Part I	, Line 23 - Othe	r Expenses	
Description		_			
		Total	Net Investment	Adjusted Net	Charitable Purpose
TY DONGE O	\$	\$	\$:	\$
EXPENSES	•				
MISCELLANEOUS EXP		_	_		
		6 1,450	6		

Statement 4 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Description				
	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
CORPORATE EQUITIES				
	\$ <u>2,140,478</u> \$	2,314,629	COST	\$ 2,664,428
TOTAL	\$ 2,140,478 \$	2,314,629		\$ 2,664,428

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-76	-02	236	วั.3	R	1

Federal Statements

Statement 5 - Form 990-PF, Part II, Line 14 - Land, Building, and Equipment

11000	rintion
DESU	ription

		Beginning Net Book	_	End Cost / Basis	Accumulated Depreciation	Net FMV
WESTWAY						
	\$_	26,228	\$_	26,228	\$ \$	26,228
TOTAL	\$_	26,228	\$_	26,228	\$ 0 \$	26,228

Statement 6 - Form 990-PF, Part III, Line 5 - Other Decreases

Description	Amount	Amount	
INCOME TAX	\$1,0	55	
TOTAL	\$1,0	55	

Statement 7 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees, Etc.

Name and Address

	Title	– Average Hours	Compensation	Benefits	Expenses
DAVID S. WOLFF					
20 BRIAR HOLLOW LANE	PRESIDENT	1.00	0	0	0
HOUSTON TX 77027					
DAVID L. LANE 20 BRIAR HOLLOW LANE HOUSTON TX 77027	VP	1.00	0	0	0
KRIS Y. MARNEY 20 BRIAR HOLLOW LANE HOUSTON TX 77027	SECRETARY	1.00	0	0	0
DAVID W. HIGHTOWER 20 BRIAR HOLLOW LANE HOUSTON TX 77027	TREASURER	1.00	0	0	0

Federal Statements

Statement 7 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees, Etc. (continued)

Name	and
Addre	ess

	Title	Average Hours	Compensation	Benefits	Expenses
MARY C. WOLFF 20 BRIAR HOLLOW LANE HOUSTON TX 77027	TRUSTEE	1.00	0	0	0
CAROLYN W. DORROS 20 BRIAR HOLLOW LANE HOUSTON TX 77027	TRUSTEE	1.00	0	0	0
ELIZABETH W. ROGERS 20 BRIAR HOLLOW LANE HOUSTON TX 77027	TRUSTEE	1.00	0	0	0
RICHARD J. BRAEMER 20 BRIAR HOLLOW LANE HOUSTON TX 77027	TRUSTEE	1.00	0	0	0

Statement 8 - Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000

Name of Manager	Amount
DAVID S. WOLFF IN 1996	\$ 46,500
DAVID S. WOLFF IN 1987	150,000
TOTAL	\$ 196,500

Statement 9 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

Name		Address			Address		
Relationship	Status		Purpose		Amount		
CONGREGATION BETH ISRA		5600 NORTH E	BRAESWOOD	HOUSTON TX			
	KEL	IGIOUS			11,728		

Statement 9 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Name	Address	Address
Relationship Status	Purpose	Amount
GOOD SAMARITAN FOUNDATION	3355 W ALABAMA ST CIVIC	HOUSTON TX 77098
HOUSTON GRAND OPERA	510 PRESTON ST CIVIC	HOUSTON TX 77002 20,000
NANTUCKET MUSICAL ARTS	P.O. BOX 897	NANTUCKET MA 02554 500
NANTUCKET PRESERVATION	TWO UNION ST CIVIC	NANTUCKET MA 02554
EVELYN RUBENSTEIN JEWISH COMMUNI		HOUSTON TX 77096
NANTUCKET COTTAGE HOSPITAL	57 PROSPECT ST MEDICAL	NANTUCKET MA 02554 5,000
ST. JOHNS SCHOOL	2401 CLAREMONT LANE EDUCATION	HOUSTON TX 77019 2,500
ADAS YOSHURON SYNAGOGUE	P.O. BOX 1250 RELIGIOUS	ROCKLAND ME 04841 1,000
SEEDS OF PEACE	370 LEXINGTON AVE #1201 CIVIC	NEW YORK NY 10017 1,000
HOUSTON ARBORETUM & NATURE CENTE	R 45010 WOODWAY DR CIVIC	HOUSTON TX 77024 2,250
RUTHERFORD VOLUNTEER	P.O. BOX 160 CIVIC	RUTHERFORD CA 94573 250
CHILDRENS MUSEUM OF HOUSTON	1500 BINZ CIVIC	HOUSTON TX 77004 1,500
HEALTH AUTHORITY OF ANGUILLA	BOX 2004 MEDICAL	THE VALLEY
YES PREP PUBLIC SCHOOLS	6201 BONHOMME #168N EDUCATION	HOUSTON TX 77036 850
SAVE OUR SOUND	4 BARNSTABLE ROAD CIVIC	HYANNIS MA 02601 1,000
HOUSTON CENTER FOR LITERACY	2401 PORTSMOUTH #230 EDUCATION	HOUSTON TX 77098 2,250
NATIONAL TRUST FOR HISTORIC	1785 MASSACHUSETTS AVE CIVIC	WASHINGTON DC 20036 2,500
CIA OFFICERS MEMORIAL	P.O. BOX 405 CIVIC	HERNDON VA 20172 500
HOUSTON WILDERNESS INC	550 WESTCOTT ST CIVIC	HOUSTON TX 77007 5,000
HARVARD UNIVERSITY	124 MOUNT AUBURN ST EDUCATION	5,000
INDEPENDENCE PRESERVATION TRUST	20 BRIAR HOLLOW LANE	25,000
NEW HOPE HOUSING	1117 TEXAS AVE CIVIC	HOUSTON TX 77002 5,500
NANTUCKET CONSERVATION FOUNDATIO	CIVIC	NANTUCKET MA 02554 1,000
NANTUCKET PRESERVATION TRUST	P.O. BOX 158 CIVIC	NANTUCKET MA 02554 2,500
NANTUCKET HISTORICAL ASSN	P.O. BOX 1016 CIVIC	NANTUCKET MA 02554 1,000
TEXAS CHILDRENS HOSPITAL	P.O. BOX 300630 MEDICAL	HOUSTON TX 77230 200
CAMP FOR ALL	10500 NW FREEWAY CIVIC	HOUSTON TX 77092 2,500

Federal Statements

Statement 9 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Name		Address	Address			
Relationship	Status	Purpose	Amount			
RIVER OAKS FOUNDATION	-	3923 SAN FELIPE CIVIC	HOUSTON TX 77027			
HOUSTON TOMORROW		3015 RICHMOND #201 CIVIC	HOUSTON TX 77098			
HOUSTON CINEMA ARTS SOCI	ETY	4409 MONTROSE BLVD CIVIC	HOUSTON TX 77006			
NANTUCKET ANTHENEUM		ONE INDIA ST CIVIC	NANTUCKET MA 02554			
NANTUCKET COTTAGE HOSPIT	AL	57 PROSPECT ST MEDICAL	NANTUCKET MA 02554 20,000			
TEXAS HEART INSTITUTE		6770 BERTNER AVE MEDICAL	HOUSTON TX 77030			
TOTAL			136,128			

76-0236381	Federal Statements
•	Taxable Interest on Investments
Description	Unrelated Exclusion Postal US Amount Business Code Code Code Obs (\$ or %)
JPMORGAN #1007 JPMORGAN #3947	\$ 11,357 14 33 14
TOTAL	\$ 11,390
	Tax-Exempt Interest on Investments
Description	Unrelated Exclusion Postal InState Amount Business Code Code Muni (\$ or %)
JPMORGAN #1007 TOTAL	\$ <u>20</u> \$ 20
	<u> </u>
	Taxable Dividends from Securities
Description	Unrelated Exclusion Postal US Amount Business Code Code Code Obs (\$ or %)
JPMORGAN #1007 FPA FUNDS	\$ 64,153 162 14
TOTAL	\$ 64,315

Som	•					
Interest and Penalty Worksheets 930-PF	•					
Solution Solution	•					
Solution Solution	Form . In	terest and Penalty	Worksheets			· · · · · · · · · · · · · · · · · · ·
For calendar year 2013. or tax year beginning Taxing the first of the Worksheet Taxing the Worksheet Taxing the first of the Works	990-PF	viidity				2013
Tax No. of Parally Total interest on late payments Parally Total interest on late payments		ax vear beginning	and enc	dına		
Total interest on late payments Total failure to File Worksheet		ax year beginning		anig	Taxpaver	Identification Number
Interest on Late Payments and Failure to File Worksheet Na. of Days Days	Namo				Taxpayor	rocitinoation (Autibe)
Interest on Late Payments and Failure to File Worksheet Na. of Days Days	WOLFF FAMILY FOUNDATION				76-02	36381
Description		n Late Payments and F	ailure to File Wor	rksheet	7000	.50501
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Total interest on late payments Total failure to file penalty Failure to Pay Penalty Worksheet Description TAX FOR PENALTY 5/15-11/15 Amount Balance Mo. of Months FTP Penalty 9						
Total interest on late payments Total failure to file penalty Failure to Pay Penalty Worksheet Description TAX FOR PENALTY 5/15-11/15 Amount Balance Mounts FTP Penalty 9					3 00	
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TAX FOR PENALTY 5/15-11/15 309 6 9	Description	Amount	Balance			FTP Penalty
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Total failure to pay penalty					-	
Total failure to pay penalty					-	
Total failure to pay penalty					-	
	Total failure to pay penalty					

Form . 8868

nonrefundable credits. See instructions

Application for Extension of Time To File an **Exempt Organization Return**

3a _ \$

3b

1,195

520

675

(Rev January 2014)		▶ File a	01110 1343-1703					
Department of the Treasury Internal Revenue Service			► File a separate application for each return. ► Information about Form 8868 and its instructions is at www.irs.gov/form8868,					
		tomatic 3-Month Extension, complet				▶ 2		
•	•	Iditional (Not Automatic) 3-Month Ex	-		e 2 of this form)			
		less you have already been granted an			•			
				•	-			
		u can electronically file Form 8868 if yo			•			
		Form 990-T), or an additional (not auton of time to file any of the forms listed in			•			
		ated With Certain Personal Benefit Con		·				
		is on the electronic filing of this form, vi						
Part I		c 3-Month Extension of Time.						
		Form 990-T and requesting an automa						
Part I only					•	▶ [
All other corpo	orations (includ	ing 1120-C filers), partnerships, REMIC	Os, and trust	ts must use Form 7004 to re	quest an extension of time	_		
o file income	tax returns							
	,			Enter filer's identifying number, see instruction				
Type or	Name of exe	empt organization or other filer, see inst	Employer identification number (EIN) or					
print								
		OLFF FAMILY FOUNDATION 76-0236381						
File by the due date for	1	eet, and room or suite no If a P O box	, see instruc	ctions	Social security number (SSN)			
iling your		D BRIAR HOLLOW LANE y, town or post office, state, and ZIP code For a foreign address, see instructions						
eturn See nstructions	HOUSTO		77027					
Enter the Retu	urn code for the	e return that this application is for (file a	separate a	pplication for each return)				
Application			Return	Application		Return		
is For		Code	is For		Code			
Form 990 or Form 990-EZ			01	Form 990-T (corporation)		07		
Form 990-BL			02	Form 1041-A				
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) Form 990-T (trust other than above)			05 06	Form 6069		11		
POIII 990-1	(trust other tha	KRIS Y. MARNEY, SECRE		Form 8870		12		
		20 BRIAR HOLLOW LANE						
 The books a 	are in the care of	► HOUSTON			T	x 77027		
						. ,		
Telephone	e No 🕨		FAX No	•				
 If the orga 	inization does i	not have an office or place of business	in the Unite	d States, check this box		▶ [
 If this is for 	or a Group Retu	ırn, enter the orga <u>nız</u> atıon's four digit G	Froup Exem	ption Number (GEN)	If this is	_		
or the whole (group, check th	is box If it is for part of	the group, o	check this box	and attach			
		is of all members the extension is for						
•		3-month (6 months for a corporation re						
		, to file the exempt organization retur	n for the org	ganization named above The	e extension is			
	organization's re	_						
► X	calendar year_	2013 or						
▶ □	tax year beginr	ning , and ending						
		ing , and ending in line 1 is for less than 12 months, cho	eck reason	Initial return F	inal return			
$\overline{}$	hange in accou		- 31. 1000011		mai (otal)]			
		Forms 990-BL, 990-PF, 990-T, 4720,	or 6069, en	ter the tentative tax, less any	y			
		, - , , ,	•	-				

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 instructions For Brivacy Act and Panerwork Reduction Act Notice see instruction

b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and

c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using

estimated tax payments made. Include any prior year overpayment allowed as a credit

EFTPS (Electronic Federal Tax Payment System) See instructions

Form 8868 (F	Rev 1-2014)					Page 2				
	filing for an Additional (Not Autor	natic) 3-Month Extension,	complete only Part II and ch	eck this box		Page Z ► X				
	omplete Part II if you have already b					- (11)				
	filing for an Automatic 3-Month E	=	•	•						
Part II	Additional (Not Automat			original (no copie	s needed	d)				
				Enter filer's identify	ing numb	er, see instructions				
Type or	Name of exempt organization or		er identification number (EIN) or							
print										
File by the	WOLFF FAMILY FOU	76-0236381								
due date for	Number, street, and room or suit	Social security no	ımber (SSI	V)						
filing your	20 BRIAR HOLLOW									
return See instructions	City, town or post office, state, and ZIP code For a foreign address, see instructions									
	HOUSTON TX 77027									
Enter the Ret	turn code for the return that this app	lication is for (file a separate	e application for each return)			_04				
A 1: 4: -		D-4	A			Return				
Application	n	Return								
Is For	or Form 990-EZ	Code 01	Is For							
		02	Form 1041-A							
Form 990-BL Form 4720 (individual)			Form 4720 (other than in	dividual)	08					
Form 990-F	······································	03	Form 5227	trian individual)						
Form 990-T (sec 401(a) or 408(a) trust)			Form 6069							
	(trust other than above)	05 06	Form 8870			11				
070010	ot complete Part II if you were not									
	20 BRIAR H are in the care of ▶ HOUSTON	RNEY, SECRETARY OLLOW LANE			ТX	77027				
Telephor		FAX No								
	anization does not have an office or					▶ [_]				
	for a Group Return, enter the organic group, check this box	If it is for part of the gr	· · · · · · · · · · · · · · · · · · ·	If this is						
	group, check this box ames and EINs of all members the		oup, check this box	and attach a						
iist with the h	anies and Envs of an members the	extension is ioi				· · · · · · · · · · · · · · · · · · ·				
4 I reque	st an additional 3-month extension (of time until $11/17/1$	4							
	endar year 2013, or other t		, and ending							
6 If the ta	ax year entered in line 5 is for less th	nan 12 months, check reaso	on 🔲 Initial return 📗 I	Final return						
∐ Ch	ange in accounting period									
	n detail why you need the extension									
	TAXPAYER RESPECTFULLY REQUESTS ADDITIONAL TIME TO FILE IN ORDER TO GATHER									
INF	ORMATION NECESSARY	Y TO FILE A CO	MPLETE & ACCUR	ATE RETURN	•					
										
	application is for Form 990-BL, 990-	PF, 990-T, 4720, or 6069, e	nter the tentative tax, less any	i						
	undable credits. See instructions	T 4700 6060		8a	\$	1,195				
	application is for Form 990-PF 990-	•								
estimated tax payments made. Include any prior year overpayment allowed as a credit and any				<u> </u>	4	1 105				
amount paid previously with Form 8868				8b	\$	1,195				
c Balance due. Subtract line 8b from line 8a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions					\$	1,195				
(2.000)				8c	Ι Φ	1,195				
	Signati	ire and verification n	nust be completed for	raπ II only.						
	ies of perjury. I declare that I have end belief, it is true, correct, and com			nd statements and to	the best o	of my				
Knowledge al	no bener, it is true, confect, and com	piete, and that I am autijuit	red to biebate fills joint							

Title ▶ SECRETARY

Date ► 07/29/14 Form 8868 (Rev 1-2014)