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# EXTENDED TO NOVEMBER 16, 2015 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. Information about Form 990-PF and its separate instructions is at <a href="https://www.irs.gov/form990pf">www.irs.gov/form990pf</a>.

OMB No 1545-0052

Form **990-PF** Department of the Treasury
Internal Revenue Service

For calendar year 2014 or tax year beginning

101	Jaici	toal year 2014 of tax year beginning			, and or	iiuiiig		
Nar	ne o	foundation		<del></del>			A Employer identification	number
M	~w	EOLINIDAMTON					26 0010014	
		FOUNDATION and street (or P O box number if mail is not delivered to street	add	(rece)		Room/suite	26-0018914	-
		5 4TH STREET	auu	11655)		Noonvalite	B Telephone number 510-704-57	0.7
		own, state or province, country, and ZIP or foreign p	net	al code			C If exemption application is p	<del></del>
		KELEY, CA 94710	USu	ai code			o if exemption application is p	ending, check here
	_	all that apply: Initial return		Initial return of a fo	ormer public c	harity	D 1. Foreign organizations	check here
		Final return		Amended return		,		
		Address change		Name change			2. Foreign organizations me check here and attach co	eting the 85% test,
H C	heck	type of organization: X Section 501(c)(3) ex	æm	pt private foundation		-	E If private foundation sta	
	] Se	ction 4947(a)(1) nonexempt charitable trust	Oth	ier taxable private founda	ation		under section 507(b)(1)	
l Fa	ır ma	arket value of all assets at end of year   J   Accounts	ng i	method: X Cash	Accr	ual	F If the foundation is in a	• •
(fr	om i			(specify)			under section 507(b)(1)	
<b>&gt;</b>		2,584,661. (Part I, colu	mn	(d) must be on cash i	basis.)			
Pa	ırt l	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not		(a) Revenue and	(b) Net in		(c) Adjusted net	(d) Disbursements for charitable purposes
		necessarily equal the amounts in column (a) )		expenses per books	inco	me ————	income	(cash basis only)
	1	Contributions, gifts, grants, etc., received	L	497,574.				
	2	Check fithe foundation is not required to attach Sch. B. Interest on savings and temporary	L					
	3	cash investments	L	40 406		<del>- 436</del>		
	4	Dividends and interest from securities	L	42,436.	4	2,436.		STATEMENT 1
	_	. Gross rents	L					
	_	Net rental income or (loss)	┞-	202 020				
9	Ва	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 679, 250.	H	392,039.			<u> </u>	
Je J	7	absolution of the or	┝	<del></del>	30	2,039.	<del>                                     </del>	
UNN ACKENING	7	Capital gain net income (from Part IV, line 2)  Net short-term-capital gain	-		33	4,033.		
$\mathbb{S}$	٥	Income modifications	Н					
Z	10a	Gross sates less returns 1 3 3	H					
₹		Less Cost of goods sold ( T	<u> </u>					
ij		Gross profit or (loss)	H					
,	11	Other income	H	20.		0.	20.	STATEMENT 2
	12	Total. Add lines 1 through 11	Ť	932,069.	43	4,475.	20.	
_	13	Compensation of officers, directors, trustees, etc	-4	0.		0.	0.	0.
ی	14	Other employee salaries and wages						
<b>ى</b> _	15	Pension plans, employee benefits						
3 6 C	16a	Legal fees						
xbeuses	b	Accounting fees STMT 3	L	3,125.		1,563.	0.	1,562.
ŵ		Other professional fees	L					
Ιį	17	Interest	L					
Operating and Administrative	18	Taxes STMT 4	$\vdash$	4,750.		1,795.	0.	13.
inis	19	Depreciation and depletion	L					
퉏	20	Occupancy	L				ļ	
Ψp.	21	Travel, conferences, and meetings	$\vdash$					
au	22	Printing and publications Other expenses STMT 5	<u> </u>	11,854.	1	1,755.	0.	
ting	23 24	•	$\vdash$	11,004.		<u> </u>	ļ·	0.
era	24	Total operating and administrative expenses. Add lines 13 through 23		19,729.	1	5,113.	0.	1,575.
g	25	Contributions, gifts, grants paid	$\vdash$	161,000.		J, 11J.	<del> </del>	161,000.
		Total expenses and disbursements.	$\vdash$				<del> </del>	101,000.
	20	Add lines 24 and 25		180,729.	1	5,113.	0.	162,575.
	27		H			_ ,	<del>                                     </del>	
	_	Excess of revenue over expenses and disbursements	l	751,340.				
		Net investment income (if negative, enter -0-)	$\vdash$		41	9,362.		
	C	Adjusted net income (if negative, enter -0-)	Г		-		20.	
42350 11-24	)† -14	LHA For Paperwork Reduction Act Notice, see	insi	tructions.				Form <b>990-PF</b> (2014

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P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	92,723.	553,066.	553,066.
		Accounts receivable ▶			<u> </u>
	`	Less: allowance for doubtful accounts ▶		İ	
	4	Pledges receivable >			-
	١.	Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
		Receivables due from officers, directors, trustees, and other		-	
	ľ	disqualified persons			
	٦,	Other notes and loans receivable	· · · · · · · · · · · · · · · · · · ·		
	l ′	Less; allowance for doubtful accounts	·		
		Inventories for sale or use			<u>.</u>
Assets	Į.	Prepaid expenses and deferred charges			
Ą	i i				
-	ŀ	Investments - U.S. and state government obligations Investments - corporate stock STMT 7	1,347,691.	712,304.	960,299.
		The state of the s	0.	615,631.	639,553.
				013,631.	633,333.
	יין	Investments - land, buildings, and equipment basis			
	١.,	Less accumulated depreciation			
		Investments - mortgage loans	275 (02	201 006	421 742
		Investments - other STMT 9	275,603.	301,986.	431,743.
	14	Land, buildings, and equipment basis		}	
	i	Less accumulated depreciation			<del></del>
		Other assets (describe)			
	16	Total assets (to be completed by all filers - see the	1 716 017	0 100 007	0 504 661
	_	instructions. Also, see page 1, item I)	1,716,017.	2,182,987.	2,584,661.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
<u>ia</u>	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.			
ő	24	Unrestricted .			
alances	25	Temporarily restricted .			
	26	Permanently restricted			
or Fund B		Foundations that do not follow SFAS 117, check here		·	
Ę		and complete lines 27 through 31.			
80	27	Capital stock, trust principal, or current funds	0.	0.	
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Ą	29	Retained earnings, accumulated income, endowment, or other funds	1,716,017.	2,182,987.	
횾	30	Total net assets or fund balances	1,716,017.	2,182,987.	
_	l				
	31	Total liabilities and net assets/fund balances	1,716,017.	2,182,987.	
P	art	III Analysis of Changes in Net Assets or Fund B			
=			20		
1		I net assets or fund balances at beginning of year - Part II, column (a), line	JU	1.1	1 716 017
_		st agree with end-of-year figure reported on prior year's return)		1	1,716,017. 751,340.
_		r amount from Part I, line 27a		2	
		r increases not included in line 2 (itemize)	<del></del>	3	0. 2 467 357
		lines 1, 2, and 3	ana ana	memerum 6	2,467,357.
		eases not included in line 2 (itemize)		TEMENT 6 5	284,370.
<u>6</u> _	ıota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	numn (b), ine 30	6	2,182,987.
					Form <b>990-PF</b> (2014)

	cribe the kind(s) of	property sold (e.g. mon stock, 200 shs	, real estate,	t income	( <b>b</b> )	How ac - Purc - Don	cquired hase ation	(c) Date (mo., c	acquired fay, yr.)	(d) Date sold (mo., day, yr.)
1a										
b SEE ATTACHED	STATEME	NT								
C										
d										
<u>e</u>										
(e) Gross sales price		ation allowed owable)		st or other basis expense of sale					ain or (loss) s (f) mınus (	
<u>a</u> b		····	-				· <u> </u>			
C									<del></del>	
d 670 050				005 04						
e 679,250.				287,21	1.					392,039.
Complete only for assets show									col. (h) gain not less thar	
(i) F.M.V. as of 12/31/69		ited basis 2/31/69		cess of col. (1) col. (1), if any					(from col. (	
<u>a</u>					_					
_ b										<u>.</u>
<u>c</u>										
<u>d</u>								_		
<u>e</u>										392,039.
2 Capital gain net income or (net ca	apıtal loss)	f gain, also enter If (loss), enter -0-	ın Part I, line ın Part I, line	7 7	}	2				392,039.
3 Net short-term capital gain or (lo If gain, also enter in Part I, line 8,		ections 1222(5) an	d (6):		٦					-
If (loss), enter -0- in Part I, line 8	-				引	3			N/A	
Part V Qualification U	Inder Sectio	n 4940(e) for	Reduced	Tax on Net	Inv	estn	nent Inc	ome		
If section 4940(d)(2) applies, leave t Was the foundation liable for the sec If "Yes," the foundation does not qua 1 Enter the appropriate amount in	tion 4942 tax on t	4940(e). Do not cor	mplete this pa	rt.		<u>.                                    </u>				Yes X No
(a) Base period years		(b)			(c)				Distrib	(d) ution ratio
Calendar year (or tax year beginni	ing in) Adju	sted qualifying dist		Net value of no					(col. (b) div	ided by col. (c))
2013			2,573.				6,480			.062331
			1,808.		_1_	<u>,88</u>	1,618	-	_	.070050
2011			0,170.		_1	<u>,96</u>	1,928	•		.066348
2010	<b></b> ∤.		6,811.				6,495			.067579
2009	<u> </u>		3,874.			,67	4,902	•		.044106
2 Total of line 1, column (d)	_							2	_	.310414
3 Average distribution ratio for the the foundation has been in existe			n line 2 by 5,	or by the number	of ye	ars		3		.062083
			_						-	
4 Enter the net value of noncharitat	ole-use assets for a	2014 from Part X, II	ne 5					4		2,317,639.
5 Multiply line 4 by line 3	-							5		143,886.
6 Enter 1% of net investment incom	ne (1% of Part I, Iı	ne 27b)						6		4,194.
7 Add lines 5 and 6				-				7		148,080.
8 Enter qualifying distributions from	n Part XII, line 4							8	! 	162,575.
If line 8 is equal to or greater than See the Part VI instructions.	n line 7, check the	box in Part VI, line	1b, and comp	lete that part using	g a 19	% tax r	ate.			·

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	irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	1948 - see i	nstru	ictioi	1S)
18	ı 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)				
t	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🗶 and enter 1%	1		<u>4,1</u>	<u>94.</u>
	of Part I, line 27b				
C	e All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			0.
3	Add lines 1 and 2	3		4,1	94.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		4,1	94.
6	Credits/Payments;				
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 1,440.	.			
b	Exempt foreign organizations - tax withheld at source	1			
	Tax paid with application for extension of time to file (Form 8868)	1			
	I Backup withholding erroneously withheld 6d	1			
	Total credits and payments. Add lines 6a through 6d	1 7		1,4	40.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			16.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		2,7	<del>70.</del>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		<del>,,</del>	<del>/ 0 •</del>
	Enter the amount of line 10 to be: Credited to 2015 estimated tax	11			
	art VII-A   Statements Regarding Activities				
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interveni	3 10		Yes	No
10	any political campaign?	5 III	1a		X
	any pontical campaign? Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition	.\0			X
0		•	1 b		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish	ea or		•	
	distributed by the foundation in connection with the activities.		١.	Į l	37
	Did the foundation file Form 1120-POL for this year?		10		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation. $\blacktriangleright$ \$ (2) On foundation managers. $\blacktriangleright$ \$ 0	<u>-</u>	l		
E	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
	managers. ▶ \$0 .				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		<u> </u>
<b>4</b> a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	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	e law			
	remain in the governing instrument?		6	Х	
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 X	V	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				
	CA				
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)		1		
	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 cal	endar			
	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV		9		X
10		TMT 10	10	Х	

_		<u>-001891</u>	4	Page 5
Pa	art VII-A   Statements Regarding Activities (continued)	-		-
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			Τ
	section 512(b)(13)? If "Yes," attach schedule (see instructions)		. ]	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privile	ges?		
	If "Yes," attach statement (see instructions)	12	<u>:</u>	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ►N/A	<u></u>		
14	The books are in care of ► MACGREGOR READ Telephone no. ► 5	10-704-	<b>2823</b>	
	Located at ► 2025 4TH STREET, BERKELEY, CA ZIP	+4 <b>▶</b> 9471	0	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	<u></u>		
	and enter the amount of tax-exempt interest received or accrued during the year	5 <u> </u> :	N/A	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16	;_ <b>[</b>	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the	he		
	foreign country			L
Pá	art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
18	a During the year did the foundation (either directly or indirectly);			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	X No		•
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		1	
		X No		
	<u> </u>	X No		ł
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	X No		l
	(5) Transfer any income or assets to a disqualified person (or make any of either available			l
		X No		l
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			l
		X No		l
t	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	.		ļ
		N/A 1b		
	Organizations relying on a current notice regarding disaster assistance check here	▶□	1	
C	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		į į	
	before the first day of the tax year beginning in 2014?	1c	$\bot$	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	ļ		
	defined in section 4942(j)(3) or 4942(j)(5)):	ŀ		
a	a At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2014?	& LiNo		
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,	-		
	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	37/3		
		N/A 2b		
	c If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			
0	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
38		<del>ਦ</del> ਾ		
L	during the year?  Ves I did it have expect business holdings in 2014 as a result of (1) any surphase by the foundation or disqualified pages of the	AL NO		
0	b if "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of heldings acquired by arthur periods (3) the lapse of the 10. 15. or 20 year first phase helding accord 2.4 for 0.5 he did 0.	ie		
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,	NT / N		
4-		N/A 3b	+-	-
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	<u>_4a</u>	+-	Х
J	had not been removed from jeopardy before the first day of the tax year beginning in 2014?			X
	nee not been terroted from joopardy boloro alo labtaay of alo any year beginning in 2017!	4b		ι Δ

orm 990-PF (2014) MCM_FOUNDATION_			26-00189	14	Page 6
Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be I	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	1 4945(e))?	Y	es 🗶 No		ı
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire			ı	
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes'	?	Y	es 🗶 No		Į.
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				ŀ
4945(d)(4)(A)? (see instructions)		Y	es 🗶 No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t			ľ	ŀ
the prevention of cruelty to children or animals?		Y	es 🗓 No	ľ	
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify und	ler the exceptions described i	n Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see instru-	ctions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check hi	ere .		▶□ [		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it mainta	ıned			
expenditure responsibility for the grant?	N	I/A 🔲 Y	es 🔲 No		
If "Yes," attach the statement required by Regulations section 53 4945	5-5(d)				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on				
a personal benefit contract?		Y	es X No		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Y	es X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu	table to the transaction?		N/A	7b	
Part VIII Information About Officers, Directors, Trustoral Employees, and Contractors	ees, Foundation Ma	nagers, Highl	у		-
1 List all officers, directors, trustees, foundation managers and their	compensation.				
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e)	Expense ount, other
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	acc	ount, other lowances
				1	
SEE STATEMENT 11		0.	0.		0.
				1	
				ļ	
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."			
(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 punt, other
	devoted to position	(C) compensation	and deferred compensation	al	lowances
NONE					
		_			-
				L	
				<u>L</u>	
Total number of other employees paid over \$50,000					O

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	ation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	r "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(5) 1) po el cel·lice	(C) Compensusion
	<del>-</del> -	
		<del></del>
	<del></del>	
	<del></del>	<del></del>
	_	
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis	haalisfa waastaa ayah aa Aba	<del></del> -
number of organizations and other beneficiaries served, conferences convened, research papers pro		Expenses
1 N/A	2000, 010.	<del></del>
1 24/11	-	
2		
3	-	<del></del>
<u> </u>		
A		<del></del>
<u> </u>		
Part IX-B   Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on	lines 1 and 2.	Amount
1 N/A		
2		
	<del></del>	
All other program-related investments. See instructions.		
3		
Total Add lines 1 through 3		0

Form **990-PF** (2014)

	m 990-FF (2014) MCM FOUNDATION	20-0010314	raye o
LP	art X 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, etc., purposes:		
a	Average monthly fair market value of securities	1a 2,144	,707.
b	Average of monthly cash balances	1a         2,144           1b         208	,226.
C	Fair market value of all other assets	1c	
đ	Total (add lines 1a, b, and c)	1d 2,352	,933.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3 2,352	,933.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4 35	,294.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5 2,317	,639.
6	Minimum investment return. Enter 5% of line 5	6 115	,882.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and	d certain	
_	foreign organizations check here  and do not complete this part.)	115	000
1	Minimum investment return from Part X, line 6	1 115	,882.
_	Tax on investment income for 2014 from Part VI, line 5  2a 4,194.		
b	Income tax for 2014. (This does not include the tax from Part VI.)		104
C	Add lines 2a and 2b	2c 4	,194. ,688.
3	Distributable amount before adjustments. Subtract line 2c from line 1		
4	Recoveries of amounts treated as qualifying distributions	4 111	0. ,688.
5	Add lines 3 and 4		<u>, 666.</u>
6	Deduction from distributable amount (see instructions)	6	600
7 13	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7 111	,688.
Ŀ	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a 162	,575.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Surtability 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	4 162	,575.
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	5 4	,194. ,381.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6 158	,381.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of		
	4940(e) reduction of tax in those years.		

Form **990-PF** (2014)

Part XIII Undistributed Income (s	ee instructions)			
	(a)	(b)	(c)	(d)
` l	Corpus	Years prior to 2013	2013	2014
Distributable amount for 2014 from Part XI, line 7				111,688.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			0.	
b Total for prior years:		0		
3 Excess distributions carryover, if any, to 2014:		0.		<u></u>
a From 2009				
bFrom 2010 33,478.				
cFrom 2011 32,798.				
dFrom 2012 38,257.	1			
eFrom 2013 25,679.				
f Total of lines 3a through e	130,212.			
4 Qualifying distributions for 2014 from				
Part XII, line 4: ►\$ 162,575.				
a Applied to 2013, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus			<u> </u>	
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount				111,688.
e Remaining amount distributed out of corpus	50,887.			
Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	181,099.			
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		0.		
d Subtract line 6c from line 6b. Taxable		_		
amount - see instructions		0.		
e Undistributed income for 2013. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2014. Subtract				
lines 4d and 5 from line 1. This amount must				0.
be distributed in 2015 7 Amounts treated as distributions out of				0.
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2009				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2015.				
Subtract lines 7 and 8 from line 6a	181,099.			
10 Analysis of line 9:				
a Excess from 2010 33,478.				
b Excess from 2011 32,798.				
c Excess from 2012 38, 257.				
dExcess from 2013 25,679.				
e Excess from 2014 50,887.			<u> </u>	5 000 DE 100 100
11-24-14				Form <b>990-PF</b> (2014)

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or **Amount** status of contribution Name and address (home or business) recipient a Paid during the year BONEFISH & TARPON UNLIMITED INC. NONE PC NATURE CONSERVANCY 24 DOCKSIDE LANE, #83 KEY LARGO, FL 33037 2,500. CALIFORNIA ACADEMY OF SCIENCES NONE PC EDUCATION 55 MUSIC CONCOURSE DRIVE SAN FRANCISCO, CA 94118 7,500. EDGEWOOD CENTER FOR CHILDREN AND NONE PC CHILDREN AND FAMILY **FAMILIES** CRISIS FUND 1801 VICENTE STREET SAN FRANCISCO, CA 94116 500. EDUCATIONAL FOUNDATION OF ORINDA NONE PC EDUCATION 21 'C' ORINDA WAY, #123 ORINDA, CA 94563 4,000. FIRST GRADUATE, THE PRESIDIO NONE PC EDUCATION P.O. BOX 29415 SAN FRANCISCO, CA 94129 17,500. SEE CONTINUATION SHEET(S) 161,000. ▶ 3a b Approved for future payment NONE Total **▶** 3b

Part XVI-A	Analy	sis of Inc	ome-Prod	lucina A	ctivities
COILVAI-V	711413	313 OI 1110		auving r	

Enter gross amounts unless otherwise indicated.			-,		
•	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code	Allibuilt	∞de	Aniount	
a	.		+		
b	.		+		
·	·		+		
d	.		+-+		
·	·		+		
1	.				
g Fees and contracts from government agencies	<del></del>		+		
2 Membership dues and assessments	<b>—</b>		11		<del> </del>
3 Interest on savings and temporary cash					
investments	<del></del>		+ 7 1	42 426	
4 Dividends and interest from securities	<b>—</b>		14	42,436.	
5 Net rental income or (loss) from real estate:	$\longrightarrow$		+		
a Debt-financed property	$\vdash$		+-+		
b Not debt-financed property	<b>—</b>		+		
6 Net rental income or (loss) from personal					
property	<u> </u>		+		<del> </del>
7 Other investment income	$\vdash$				
8 Gain or (loss) from sales of assets other			امدا	202 020	
than inventory	<b>—</b>		18	392,039.	
9 Net income or (loss) from special events	<b>—</b>				
10 Gross profit or (loss) from sales of inventory	<del></del>		+		<u></u>
11 Other revenue:			01	20	
a MISCELLANEOUS	·		01	20.	
b	.		+		_
<u> </u>	·		1		<del> </del>
d	·		+		
e	·		+ +	424 405	
12 Subtotal. Add columns (b), (d), and (e)		0 .	<u>•1.                                      </u>	434,495.	0. 434,495.
13 Total. Add line 12, columns (b), (d), and (e)				13	434,493.
(See worksheet in line 13 instructions to verify calculations.)		<del></del>		. <u></u>	-
<del></del>		mplishment of F	xempt	Purposes	
Part XVI-B Relationship of Activities	to the Acco	inpusition of E			
Part XVI-B Relationship of Activities			A contrib	utad importantly to the accome	plichment of
Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	column (e) of Part XVI-	A contrib	uted importantly to the accomp	olishment of
Part XVI-B Relationship of Activities	ome is reported in	column (e) of Part XVI-	A contrib	uted importantly to the accomp	olishment of
Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	column (e) of Part XVI-	A contrib	uted importantly to the accomp	olishment of
Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	column (e) of Part XVI-	A contrib	uted importantly to the accomp	olishment of
Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	column (e) of Part XVI-	A contrib	uted importantly to the accomp	olishment of
Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	column (e) of Part XVI-	A contrib	uted importantly to the accomp	olishment of
Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	column (e) of Part XVI-	A contrib	uted importantly to the accomp	olishment of
Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	column (e) of Part XVI-	A contrib	uted importantly to the accomp	olishment of
Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	column (e) of Part XVI-	A contrib	uted importantly to the accomp	olishment of
Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	column (e) of Part XVI-	A contribi	uted importantly to the accomp	olishment of
Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	column (e) of Part XVI-	A contribi	uted importantly to the accomp	plishment of
Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	column (e) of Part XVI-	A contribi	uted importantly to the accomp	plishment of
Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	column (e) of Part XVI-	A contribi	uted importantly to the accomp	plishment of
Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	column (e) of Part XVI-	A contribi	uted importantly to the accomp	plishment of
Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	column (e) of Part XVI-	A contribi	uted importantly to the accomp	plishment of
Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	column (e) of Part XVI-	A contribi	uted importantly to the accomp	plishment of
Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	column (e) of Part XVI-	A contribi	uted importantly to the accomp	plishment of
Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	column (e) of Part XVI-	A contribi	uted importantly to the accomp	plishment of
Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	column (e) of Part XVI-	A contribi	uted importantly to the accomp	plishment of

	990-PF (2014) MCM FOUNDATION	26-0018914	Pa	ige 13				
Par	Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations							
	Did the organization directly or indirectly engage in any of the following with any other organizat	` '	res	No				
t	the Code (other than section 501(c)(3) organizations) or in section 527, relating to political orga	inizations?						

1 Did t	the organization directly or indi	rectly engage in any of thi	e following with any other organiza:	tion described in section 501(c) of		Yes	No
the C	Code (other than section 501(c	)(3) organizations) or in s	ection 527, relating to political orga	anizations?			
a Tran	sfers from the reporting found	ation to a noncharitable e	xempt organization of:				
(1)	Cash				1a(1)		X
(2)	Other assets				1a(2)		X
<b>b</b> Othe	r transactions;			•	<b></b>		
(1)	Sales of assets to a noncharita	ble exempt organization			1b(1)	1	X
	Purchases of assets from a no		uzation	•	1b(2)	-	X
	Rental of facilities, equipment,		-		1b(3)		X
	Reimbursement arrangements		•	•	1b(4)		X
	Loans or loan guarantees				1b(5)		X
	Performance of services or me	mhershin or fundraising	enlicitatione		1b(6)		X
	ing of facilities, equipment, ma	· · · · · ·			10(0)		X
		<del>-</del> :	· · ·	always show the fair market value of the goods, (	لتنا		
				illue in any transaction or sharing arrangement, s		ers,	
	mn (d) the value of the goods,			ine in any transaction of snaring arrangement, s	IIOW III		
(a)Line no	(b) Amount involved		charitable exempt organization	(d) p			
(a)Line no	(b) Amount myored	1 '	N/A	(d) Description of transfers, transactions, and	snaring am	angeme	nts
	<del> </del>		N/A				
-	<u> </u>	<del>                                     </del>					
		<del></del>					
	ļ.————						
	<del> </del>						
	<u>-</u>						
	<u> </u>					_	
2a is the	e foundation directly or indirect	tly affiliated with, or relate	d to, one or more tax-exempt organ	nizations described			
in se	ction 501(c) of the Code (other	r than section 501(c)(3))	or in section 527?		Yes	X	No
b If "Ye	es," complete the following sch	edule.					
	(a) Name of org	janization	(b) Type of organization	(c) Description of relations	nip		
	N/A						_
		<del>-</del>					
				d statements, and to the best of my knowledge	y the IRS d	iscuss t	his
Sign	and belief, los true, correct, and cor	hiplete beclaration of preparer	r (other than taxpayer) is based on all info	retu	irn with the wn below (	prepare	Br
Here			110/1/15		X Yes	` <u> </u>	No
	Signature of officer or trustee		Date	Title			
	Print/Type preparer's na	nme Pre	parer's signature	Date Check X if PTIN			
			II h A	self- employed			
Paid	LAWRENCE B	. WOOD	11/1001	9-14-15 PO	0011	493	
Prepar		PHILLIPS L	KR .	Firm's EIN ► 26-4	5 <b>771</b>	83	
Use O	nly	•					
	Firm's address ▶ 13	5 MAIN STRE	ET, 9TH FL.				
		N FRANCISCO		Phone no. (415)	781	-25	00
			<del></del>				

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

Department of the Treasury Internal Revenue Service

Name of the organization

### **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 <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

OMB No 1545-0047

**Employer identification number** 

2014

MCM FOUNDATION 26-0018914 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, contributions totaling \$5,000 or more (in money or property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) 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), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions 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 an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. IJ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled 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 totaling \$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

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) (2014)

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Solication D (1 cm) 500, 500 EE, 67 500 1 1 / (2014)	
Name of organization	Employer identification number
MCM FOUNDATION	26-0018914

MCM F	OUNDATION	26	<u>5-0018914                                   </u>
Part I	Contributors (see instructions). Use duplicate copies of Part I	if additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	STEVEN AND MARY READ  2025 4TH STREET  BERKELEY, CA 94710	s <u>497,574.</u>	Person Payroll Noncash X (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
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(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
		\$	Person Payroll Oncash (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
23452 11-05	-14	Schedule B (Form	noncash contributions.) 990, 990-EZ, or 990-PF) (2014)

Employer identification number

### MCM FOUNDATION

26-0018914

art II	Noncash Property (see instructions). Use duplicate copies of Part I	I 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
	360 SHARES 3M CO.		
_1		_	
			07/08/14
(a) No. rom	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	675 SHARES ACCENTURE PLC CL A		
_1		_	
		ss	07/08/14
(a) No. rom art l	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	675 SHARES AMERICAN EXPRESS CO.		
_1	-	_	
		63,835.	07/08/14
(a)		(c)	
No. rom art I	(b)  Description of noncash property given	FMV (or estimate) (see instructions)	(d) Date received
arti	275 SHARES BANK OF NEW YORK MELLON		
_1	CORP.	_	
		_ s 10,340.	07/08/14
		_   \$10,340.	07/00/14
(a) No. rom Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	900 SHARES CINTAS CORP		
		\$57,150.	07/08/14
(a) No. rom art I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	725 SHARES COMERICA INC.		
_1		_	

Employer identification number

# MCM FOUNDATION

26-0018914

art II	Noncash Property (see instructions) Use duplicate copies of Part II	If additional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	725 SHARES ILLINOIS TOOL WORKS INC.	_	
_1		 s62,952.	07/08/14
(a) No. rom Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	475 SHARES SCHLUMBERGER LTD.	_	
			07/08/14
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	1510 SHARES TE CONNECTIVITY LTD.	_	
		 s96,036.	07/08/14
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	125 SHARES TIME WARNER INC.	_	_
_1		s	07/08/14
(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
453 11-0		\$	90, 990-EZ, or 990-PF) (

Employer Identification number

₹ III ·	UNDATION  Exclusively religious, charitable, etc., cont	ributions to organizations described i	26 – 0018914 n section 501(c)(7), (8), or (10) that total more than \$1,000 ting line entry. For organizations				
	the year from any one contributor. Complete	columns (a) through (e) and the follow	ing line entry. For organizations				
	completing Part III, enter the total of exclusively religiou		ess for the year (Enterthis info once)				
No.	Use duplicate copies of Part III if addition	al space is needed	<del></del>				
om	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
rt I		(0,000 0. g	(2) 2000. page 10. 10.10				
.							
1.			1				
			_				
	(e) Transfer of gift						
		(,,					
- 1	Transferee's name, address, a	nd 7IP + 4	Relationship of transferor to transferee				
⊢	Transferee s name, address, a	10211 7 7	Trelationship of dansier of to dansier ee				
-		<del></del>   <del></del>					
-							
	······	<del></del>   <del></del>	_ <del></del>				
No. om	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
rt I	(a) i di podo di giil	(0, 000 0. g	(4) 2000 Page 10 10 10 10 10 10 10 10 10 10 10 10 10				
[							
1							
		(e) Transfer of gift					
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		<del></del>					
	<del></del>	———— I ——					
		<del></del>   <del></del>					
(a) No.		<del></del>	<del></del>				
m	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
rtl							
<u> </u>			<del></del>				
			_				
L	(e) Transfer of gift						
-	(e) Transfer of gift						
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
H							
No.		(1)					
No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
No. om rt I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
No. om irt I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
No. om rt I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
No. om rt I	(b) Purpose of gift						
No. om rrt I	(b) Purpose of gift	(c) Use of gift  (e) Transfer of gift					
No. om irt I		(e) Transfer of gift					
No. om ort I	(b) Purpose of gift  Transferee's name, address, a	(e) Transfer of gift					
No. om ort I		(e) Transfer of gift					
No. om rt I		(e) Transfer of gift					



# Guidelines

- MCM Foundation will consider grants to assist credible agencies and
  institutions serving children and youth, and projects benefiting general
  education endeavors. Grant requests from credible agencies or
  institutions will be entertained both for specific programs and for
  capital expenditures.
- Consideration will be given to the support of well conceived experimental or demonstration projects in program areas of grant focus that promise significant positive results and are likely to produce longterm multiplier effects.
- Grants are usually awarded for a limited period of time. Some grants
  may be paid over a multi-year period; however, the Foundation
  generally does not approve grants to any organization on a continuing
  annual basis Final action on all grants will be determined by the
  Foundation Board of Directors.
- Grants are awarded to children and institutions located in the Bay Area including San Francisco, Marin, Alameda, Contra Costa, Sonoma, Solano, San Mateo, Napa and Santa Clara counties.

## Send Request Letter

If, after reviewing the guidelines, there is sufficient reason to believe that the Foundation's funding priorities and interests are compatible with the needs of the organization seeking support, then a brief test letter should be addressed to the President of mcm Foundation.

All test letters will be given an in-depth screening to determine their relevance to the Foundation's funding priorities and interests. In most instances, written responses will be sent promptly to the applicant.

On the letterhead of the applicant organization or institution, the following information must be included in the Test letter:

- Any of the following not included on the letterhead, organization's legal name, mailing address, city, state, zip, phone and fax numbers, email and web site address, if available.
- 2. A brief description of the organization.
- 3 A brief description of the project for which funding is sought.
- 4. The total cost of the project for which funding is sought.
- 5 The amount requested from the mcm Foundation. The Foundation expects all applicant organizations to show substantial support from internal sources as well as other outside sources.
- First time applicants must include a copy of the IRS 501(c)(3) ruling for the organization or institution.
- Optional one copy of any supporting data that the applicant selects may accompany the test letter.

Please limit the above information to not more that two pages; brevity and clarity are appreciated.

Click here to fill out the above in an online form or mail the above

information to:

MCM Foundation c/o MacGregor Read 2000 Fifth Street Berkeley, CA 94710

-MCM Foundation EIN: 26-0018914

Statement A

Tax Year: 12/31/14

Page 1 of 1

26-0018914

Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (d) Date sold 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo., day, yr.) (mó., day, yr.) 1a UBS SELECT SERIES III K-1 P 12/31/14 b PUBLICLY D 07/18/14TRADED SECURITIES P 12/18/14c PUBLICLY TRADED SECURITIES d PUBLICLY SECURITIES TRADED P 12/18/14 e PUBLICLY P 03/10/1405/02/14 TRADED SECURITIES P 05/19/08|05/02/14 PUBLICLY TRADED SECURITIES g CAPITAL GAINS DIVIDENDS h k m n 0 (g) Cost or other basis (f) Depreciation allowed (h) Gain or (loss) (e) Gross sales price plus expense of sale (e) plus (f) minus (g) (or allowable) 47,798. 47,798. 254,313. 495,479. 241,166. b 9,802. 9,802. C 28,209. 28,209. d 507. 506. е 59,444. 13,905. 45,539. f 38,011. 38,011. g h m n 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) but not less than "-0-") (i) F.M.V. as of 12/31/69 as of 12/31/69 over col. (j), if any 47,798. 254,313. 9,802. 28,209. d 13,905. 38,011 m n 0 { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } 2 Capital gain net income or (net capital loss) 392,039. 2 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8 N/A

Part XV Supplementary Informat				
3 Grants and Contributions Paid During th	e Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	
HAPPY VALLEY ELEMENTARY SCHOOL	NONE	PC	EDUCATION	
3855 HAPPY VALLEY ROAD				
LAFAYETTE, CA 94549				2,00
_				
HEAD ROYCE SCHOOL	NONE	PC	EDUCATION	
4315 LINCOLN AVE DAKLAND, CA 94602				30,00
INSIGHT PRISON PROJECT	NONE	PC	BEHAVIORAL PROGRAMS	
P.O. BOX 151642 SAN RAFAEL, CA 94915				2,00
·				<del></del>
KATHERINE DELMAR BURKE SCHOOL	NONE	PC	EDUCATION	
7070 CALIFORNIA STREET				
SAN FRANCISCO, CA 94121				12,50
MARIN HORIZON SCHOOL	NONE	PC	EDUCATION	
305 MONTFORD AVE				E 25
MILL VALLEY, CA 94941		-		5,25
THE NATURE CONSERVANCY	NONE	PC	NATURE CONSERVANCY	
4245 NORTH FAIRFAX DRIVE			i	
ARLINGTON, VA 22203		ļ		25,00
SAN FRANCISCO PARKS ALLIANCE	NONE	PC	CHILDREN'S SERVICES	
P.O. BOX 170160 SAN FRANCISCO, CA 94117				2,50
SLEEPY HOLLOW SCHOOL	NONE	PC	EDUCATION	
20 WASHINGTON LANE				
ORINDA, CA 94563	<del>-  </del>		<del>-</del>	4,00
SMART	NONE	PC	CHILDREN'S READING	
101 SW MARKET STREET	[		PROGRAMS	
PORTLAND, OR 97201			- <b> </b>	7,50
ST. CATHERINE'S SCHOOL	NONE	PC	EDUCATION	
17500 PEAK AVE MORGAN HILL, CA 95037				50
Total from continuation sheets	<del> </del>	L		129,00

Supplementary Information Part XV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation status of recipient Purpose of grant or contribution show any relationship to Amount any foundation manager Name and address (home or business) or substantial contributor TIPPING POINT COMMUNITY NONE PC COMMUNITY SERVICES 703 MARKET STREET, STE 708 SAN FRANCISCO, CA 94103 15,000. NONE TOWN SCHOOL FOR BOYS PC EDUCATION 2750 JACKSON STREET SAN FRANCISCO, CA 94115 12,500. VIRGINIA CENTER FOR THE CREATIVE ARTS NONE PC EDUCATION 154 SAN ANGELO DRIVE AMHERST, VA 24521 5,250. WILD SALMON CENTER NONE NATURE CONSERVANCY PC 721 NW 9TH AVE, STE 300 PORTLAND, OR 97209 5,000. Total from continuation sheets

4,18007

172

117

102, 198 09

140,674 57

242,872 66

33 9900

7,145 415

638 95

0 97

32

19,944 91

45,88197

65,826 88

22 1500

2,971868

98164

0 86

55

52,998 53 \$262,443.15

61,099 09 \$362,480.33

114,097 62 \$624,923.48

31 1500

3,662 845

Dfa US Small Cap Portfolio - DFSTX #31

Dfa US L/C Value Portfolio - DFLVX #35

\$7,123.26

30.2%

00-K-A -H-QI -006-01 01204501 0037856-00-03016-01

Ascent PRIVATE CAPITAL MANAGEMENT of US. BANK

Estimated Annual Income 730 31 1,322.60 \$0.00 \$730.31 Page 5 of 67 May 14, 2014 to December 31, 2014 \$730.31 Estimated Current Yield 0 65 0 20 17.7% Unrealized of Total Gain/Loss Portfollo 17.7% 0.0% 17.7 98 00 00 000 \$0.00 87,30162 \$0.00 \$0.00 548 55 114,824 70 548 55 \$0.00 **Cost Basis** 365, 156 34 \$365,156.34 \$365,156.34 PORTFOLIO DETAIL -548 55 \$0.00 548 55 202, 126 32 365, 156 34 \$365,156.34 **Market Value** \$365,156.34 1 0000 12 2000 Market Price 365, 156 340 16,567 731 Quantity MCM FOUNDATION MANAGED AGENCY Dia Invt Dimensions Group in US Trgt - DFFVX #96 Total Cash and Cash Equivalents ACCOUNT NUMBER: 080017738900 Día Enhanced US Large Company · DFELX Portfolio Ascent Private Client Mms - 8AMMF05G2 Total Taxable Cash Equivalents Cash and Cash Equivalents Taxable Cash Equivalents Security Description U.S. Equity Principal Cash Income Cash Total Cash Equity Cash

MCM FOUNDATION Total U.S. Equity

EIN: 26-0018914

STATEMENT A

TAX YEAR: 12/31/14

PAGE: 1

ASCENTE PRIVATE CAPITAL MANAGEMENT of US BANK

MCM FOUNDATION MANAGED AGENCY

MCM FOUNDATION MANAGED AGENCY ACCOUNT NUMBER: 080017738900	AGENCY 900					May	Page 6 of 67 May 14, 2014 to December 31, 2014	Page 6 of 67
The state of the s	.	POF	PORTFOLIO DETAIL (continued)	(continued)	1000年の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の日本の			
Security Description	Quantity	Market Price	Market Value	Cost Basis	Unrealized Gain/Loss	Percent of Total Portfolio	Estimated Current Yield	Estimated Annual Income
Developed Foreign								
Dfa International Small Co - DFISX #89								
	5,736 107	16 9800	97,399 10	90,71691	6,682 19	4.7	2 63	2 558 30
Dfa Large Cap Intl Port - DFALX #28					•		}	) ) <del>[</del>
	7,614 232	20.7200	157,766 89	172,955 88	-15,188 99	9 2	3 54	5,588 85
Total Developed Foreign			\$255,165.99	\$263,672.79	-\$8,506.80	12.3%		\$8,147.15
Emerging Foreign								
Dfa Emerging Markets Portfolio - DFEMX Fund								
#26	1,514 892	25 0400	37,932,90	43 530 58	-5 597 68	α.	,	768 06
Dfa Emerging Mkts Sml Cap Inc - DEMSX #90						<u> </u>	70 7	CD 999
	2,125 532	19 8900	42,276 83	42,61993	-343 10	20	2 15	909 73
Total Emerging Foreign			\$80,209.73	\$86,150.51	-\$5,940.78	3.9%		\$1,677.78
Total Equity			\$960,299.20	\$712,303.63	\$247,995.57	46.4%		\$16,948.19
Fixed Income-Taxable								
Taxable U.S.								
Dfa Intm Govt Fixed Income - DFIGX Standard & Poors Rating N/A								
	43,781 772	12 5500	549,46124	526,589 48	22,87176	26 6	221	12,171 33

MCM FOUNDATION EIN: 26-0018914

STATEMENT A

TAX YEAR: 12/31/14 PAGE: 2

1.58

ASCENT PRIVATE CAPITAL MANAGEMENT of US BANK

MCM FOUNDATION MANAGED AGENCY ACCOUNT NUMBER: 080017738900

Page 7 of 67

Security Description			ORTEOLIO DETAIN (continue	(continued)		May	May 14, 2014 to December 31, 2014	ember 31, 2014
	Quantity	Market Price	Market Value	Cost Basis	Unrealized Galn/Loss	Percent of Total Portfolio	Estimated Current Yield	Estimated
Dfa One Year Fixed Income I - DFIHX								Tillings succession
Standard & Poors Rating N/A								
	8,746.725	10 3000	90,091 27	89,041 76	1,049 51	4 4	0.32	29127
Total Taxable U.S.			\$639,552.51	\$615,631.24	\$23,921.27	30.9%		C49 453 60
								412,462,60
Total Fixed Income-Taxable			\$639,552.51	\$615,631.24	\$23,921.27	30.9%		\$12 462 60
Real Estate								00.701
U.S. Listed Real Estate								
Dfa Real Estate Secs Port - DFREX #36								
	3,114870	33 0700	103,008 75	43,047 97	82 096'69	20	2.59	2,660,44
Total U.S. Listed Real Estate			\$103,008.75	\$43,047.97	\$59,960.78	2.0%		\$2.669.44
Total Real Estate			\$103,008.75	\$43,047.97	\$59,960.78	2.0%		\$2,669.44
Total Accept								
I Olai Assels			\$2,068,016.80	\$1,736,139.18	\$331,877.62	100.0%		\$32 840 54
								12.01.01.04

**Estimated Current Yield** 

Time of trade execution and trading party (if not disclosed) will be provided upon request

STATEMENT A

TAX YEAR: 12/31/14 PAGE: 3

MCM FOUNDATION EIN: 26-0018914

MCM FOUNDATION 26-0018914

FORM 990-PF	DIVIDENDS	AND INTER	EST FROM SE	CURITIES	S ST	PATEMENT	1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENU		(B) INVEST- INCOME	(C) ADJUSTI NET INCO	
ASCENT CHARLES SCHWAB UBS	64,849. 5,072. 3.			38. 72. 3.	26,838. 5,072. 3.	26,83 5,07	
UBS SELECT SERIES III WELLS FARGO BANK	10,496. 27.		0. 10,4 0.	96. 27.	10,496. 27.		96. 27.
TO PART I, LINE 4	80,447.	38,01	1. 42,4	36.	42,436.	42,43	36.
FORM 990-PF		OTHER I	NCOME		Sī	PATEMENT	2
DESCRIPTION			(A) REVENUE PER BOOKS	(E NET IN MENT I	IVEST-	(C) ADJUSTEI NET INCOM	
MISCELLANEOUS			20	•	0.	2	20.
TOTAL TO FORM 990-P	F, PART I,	LINE 11	20	•	0.	2	20.
FORM 990-PF		ACCOUNTI	NO PERO				
		ACCOUNTI	NG FEES		S'1	PATEMENT	3
DESCRIPTION	•	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM	- ADJ	C) USTED INCOME	(D) CHARITAE PURPOSE	BLE
	•	(A) EXPENSES	(B) NET INVEST MENT INCOM	- ADJ E NET	C) USTED	(D) CHARITAE	BLE ES

FORM 990-PF	TAX	ES	S1	STATEMENT 4	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
PAYROLL TAXES TAX & LICENSES FTB FILING FEE FOREIGN TAXES PAID BOARD EXPENSES	13. 1,729. 10. 56. 2,942.	1,729.	0. 0. 0. 0.	13. 0. 0. 0.	
TO FORM 990-PF, PG 1, LN 18	4,750.	1,795.	0.	13.	
FORM 990-PF	OTHER E	XPENSES	ទា	PATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
BANK FEES UBS SELECT SERIES III K-1 - INVESTMENT LOSS	290. 11,539.	290.	0.	0.	
REGISTRY OF CHARITABLE TRUSTS	25.	0.	0.	0.	
TO FORM 990-PF, PG 1, LN 23	11,854.	11,755.	0.	0.	
FORM 990-PF OTHER DECREASE	ES IN NET AS	SETS OR FUND E	BALANCES ST	PATEMENT 6	
DESCRIPTION				AMOUNT	
BASIS ADJUSTMENT OF DONATED S BOOK-TO-TAX ADJUSTMENT	STOCK			256,408. 27,962.	
TOTAL TO FORM 990-PF, PART II	II, LINE 5			284,370.	

FORM 990-PF	CORPORATE STOCK		STATEMENT 7
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
CHARLES SCHWAB US BANK (STATEMENT B)		712,304.	960,299.
TOTAL TO FORM 990-PF, PART II	, LINE 10B	712,304.	960,299.
FORM 990-PF	CORPORATE BONDS		STATEMENT 8
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
US BANK (STATEMENT B)		615,631.	639,553.
TOTAL TO FORM 990-PF, PART II	, LINE 10C	615,631.	639,553.
FORM 990-PF	OTHER INVESTMENTS		STATEMENT 9
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
US BANK (STATEMENT B) UBS SELECT SERIES III, LLC	COST	43,048. 258,938.	103,009. 328,734.
TOTAL TO FORM 990-PF, PART II	, LINE 13	301,986.	431,743.

FORM 990-PF LIST OF SUBSTANTIAL CONTRIBUTORS STATEMENT 10
PART VII-A, LINE 10

NAME OF CONTRIBUTOR

ADDRESS

STEVEN AND MARY READ

2025 4TH STREET BERKELEY, CA 94710

	PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS			
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
STEVEN M. READ 2025 FOURTH STREET BERKELEY, CA 94710	DIRECTOR 1.00	0.	0.	0.
MARY ANN READ 2025 FOURTH STREET BERKELEY, CA 94710	DIRECTOR 1.00	0.	0.	0.
STEVEN MACGREGOR READ, JR 2025 FOURTH STREET BERKELEY, CA 94710	SECRETARY 1.00	0.	0.	0.
COURTNEY BAMBERGER 2025 FOURTH STREET BERKELEY, CA 94710	DIRECTOR 1.00	0.	0.	0.
MORGAN READ 2025 FOURTH STREET BERKELEY, CA 94710	TREASURER 1.00	0.	0.	0.
BRENT BAMBERGER 2025 FOURTH STREET BERKELEY, CA 94710	DIRECTOR 1.00	0.	0.	0.
MARY KATHARINE READ 2025 FOURTH STREET BERKELEY, CA 94710	PRESIDENT 10.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAG	E 6, PART VIII	0.	0.	0.

Form 8	3868 (Rev. 1-2014)					Page 2			
	ou are filing for an Additional (Not Automatic) 3-Month E	xtension,	complete only Part II and check this	s box		▶ X			
Note.	Only complete Part II if you have already been granted an	automatic	3-month extension on a previously f	iled Form	8868				
lf yo	ou are filing for an Automatic 3-Month Extension, comple	ete only Pa	art I (on page 1).	_					
Parl	II Additional (Not Automatic) 3-Month I	Extensio	n of Time. Only file the origin	al (no c	opies ne	eded).			
			Enter filer's	identifyir	ng number	, see instructions			
Гуре	Name of exempt organization or other filer, see instr	uctions.		Employe	rıdentıficat	tion number (EIN) or			
orint									
le by t	MON HOUDING ON				26-0018914				
due date iling you	te for Number street, and room or suite no. If a P.O. box, see instructions.			Social se	ocial security number (SSN)				
eturn S	MANA TOUR COLUMN								
nstructi	Ons City, town or post office, state, and ZIP code. For a	foreign add	dress, see instructions.						
	BERKELEY, CA 94710								
Enter 1	he Return code for the return that this application is for (fil	le a separa	ite application for each return)			0 4			
					_				
Applic	ation	Return	Application			Return			
s For		Code	Is For			Code			
Form 9	990 or Form 990-EZ	01							
Form 9	990-BL	02	Form 1041-A			08			
Form 4	720 (individual)	03	Form 4720 (other than individual)	09					
Form 9	990-PF	04	Form 5227			10			
Form 9	990-T (sec 401(a) or 408(a) trust)	05	Form 6069	11					
	990-T (trust other than above)	06	Form 8870			12			
STOP	Do not complete Part II if you were not already grante		natic 3-month extension on a prev	iously file	d Form 80	368			
	MACGREGOR READ								
	books are in the care of books are in the care	т – в.							
	ephone No ▶ 510-704-2823		Fax No.			. —			
	ne organization does not have an office or place of busines					<b>▶</b> ∟			
	nis is for a Group Return, enter the organization's four digit	_	· · · · · · · · · · · · · · · · · · ·						
oox 🕨			ach a list with the names and EINs of	all memb	ers the ext	tension is for.			
	I request an additional 3-month extension of time until NOVEMBER 15, 2015.								
	For calendar year 2014, or other tax year beginning, and ending								
6	f the tax year entered in line 5 is for less than 12 months,	check reas	on· L Initial return L	Final r	etum				
_	L Change in accounting period								
	State in detail why you need the extension ADDITIONAL TIME IS REQUIRED TO GATHER INFORMATION NECESSARY FOR AN								
	ACCURATE AND COMPLETE RETURN								
:	RECORDING THE COMPANIE REPORT					<del></del>			
•	<u>-                                      </u>					<u> </u>			
						<del> </del>			
•									
8a	f this application is for Forms 990-BL, 990-PF, 990-T, 4720	or 6069	enter the tentative tay less any						
	nonrefundable credits. See instructions	, 0, 0000,	critic tile terrative tax, less ary	8a	\$	4,194.			
	f this application is for Forms 990-PF, 990-T, 4720, or 606	9 enter an	v refundable credits and estimated	<del>-   3</del>					
	ax payments made. Include any prior year overpayment a	•	•	1					
	previously with Form 8868.	nowed as a	a create and any amount paid	8b	\$	1,440.			
	Balance due. Subtract line 8b from line 8a Include your p	avment wit	th this form, if required, by using						
	EFTPS (Electronic Federal Tax Payment System). See insti	•		8c	s	2,754.			
			st be completed for Part II						
Jnder i	penalties of perjury, I declare that I have examined this form, include		=	_	f my knowie	dge and belief.			
t is tru	e, correct, and complete, and that I am authorized to prepare this f	orm.				-,			
Signati	Total D	ENROL	LED AGENT	Data	_				