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Form 990-PF

Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. OMB No 1545-0052

Fo	r cale	ndar year 2015 or tax year beginning		, and ending		
N	ame o	f foundation			A Employer identification	number
1	MAR	KSBURY FAMILY FOUNDATION	ON, INC.		26-4737208	
Ni	umber	and street (or P O box number if mail is not delivered to stree	B Telephone number			
	<u> 243</u>	3 OLDE BRIDGE LANE			859-333-26	61
		town, state or province, country, and ZIP or foreign	postal code		C If exemption application is p	ending, check here
		INGTON, KY 40513				
G	Chec	k all that apply: Initial return		rmer public charity	D 1. Foreign organizations	s, check here
		Final return	Amended return		2 Foreign organizations me check here and attach co	eting the 85% test.
		Address change	Name change		check here and attach co	mputation
н	_		exempt private foundation Other taxable private founda	tion	E If private foundation sta	
		ection 4947(a)(1) nonexempt charitable trust arket value of all assets at end of year J Accoun	ting method: X Cash	Accrual	under section 507(b)(1)	• •
			Other (specify)	Accidal	F If the foundation is in a under section 507(b)(1)	
	> \$	12,896,026. (Part I, col.		pasis)	Brider Section 507(b)(1)	(D), check here
	art	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	3,203,945.			
ون	2	Check In the foundation is not required to attach Sch. B				
201E	3	Interest on savings and temporary cash investments	19,722.	19,722		STATEMENT 1
	4	Dividends and interest from securities	232,230.	232,230.		STATEMENT 2
e	5a	a Gross rents				
		Net rental income or (loss)	100 500			
APR	5 68	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 100,509.	100,509.		-	
FIN A	7	Capital gain net income (from Part IV, line 2)		100,509		
¥ 8	בן <u>'</u>	Net short-term capital gain		100,505		
CANNED	9	Income modifications				
	10a	Gross sales less returns				
Ğ.	l t	Less Cost of goods sold				
	0	Gross profit or (loss)				
	11	Other income				
	12	Total Add lines 1 through 11	3,556,406.	352,461.		
	13	Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
	14	Other employee salaries and wages Pension plans, employee benefits				
	8 46.	Legal fees				
<u>0</u>	2 '0	Accounting fees STMT 3	1,900.	950.	0.	950.
	<u>}</u>	Other professional fees				
9	17	Interest				
Onorating and Administrative Evenes	18	Taxes STMT 4	7,967.	0.	0.	0.
<u>.</u>	19	Depreciation and depletion; 15				
Ę	20	Occupancy			ļ	
₹	21	Travel, conferences, and meetings				
5	22	Printing and públications	275		0.	275
<u>;</u>	23	Other expenses STMT 5	375.	0.		375.
ç	ត្ត 24 ភ្ន	Total operating and administrative expenses Add lines 13 through 23	10,242.	950	0.	1,325.
ć	25		195,000.			195,000.
	26					
		Add lines 24 and 25	205,242.	950	0.	196,325.
	27					
	a	Excess of revenue over expenses and disbursements	3,351,164.			
	t	Net investment income (if negative, enter -0-)		351,511		
		Adjusted net income (if negative, enter -0-)			0.	

For	m 99	0-PF (2015) MARKSBURY FAMILY FOUNDAT			4737208 Page 2
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
	art	Balance Sneets 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	3,523,764.	3,751,271.	3,751,271.
	3	Accounts receivable ►	:		
		Less: allowance for doubtful accounts			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other	:		
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
ets	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
•	1	Investments - U.S. and state government obligations			
	1	Investments - corporate stock			
	i i	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans		2 624 726	
	13	Investments - other STMT 6	5,507,923.	8,621,726.	9,103,810.
	14	Land, buildings, and equipment: basis			
		Less accumulated depreciation	24 224	40.045	
	15	Other assets (describe STATEMENT 7)	31,091.	40,945.	40,945.
	16	Total assets (to be completed by all filers - see the	0 060 550	10 110 010	10 006 006
_	_	instructions. Also, see page 1, item I)	9,062,778.	12,413,942.	12,896,026.
	l	Accounts payable and accrued expenses			
	18	Grants payable			
les	19	Deferred revenue			
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable			
	22	Other liabilities (describe)			
	22	Total liabilities (add lines 17 through 22)	0.	0.	Á
-	23	Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
es	24	Unrestricted			¢.
anc	25	Temporarily restricted			
3al	26	Permanently restricted			
힏	-	Foundations that do not follow SFAS 117, check here			
Ξ		and complete lines 27 through 31			
ō	27	Capital stock, trust principal, or current funds	0.	0.	
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Ass	29	Retained earnings, accumulated income, endowment, or other funds	9,062,778.	12,413,942.	
Net Assets or Fund Balances	30	Total net assets or fund balances	9,062,778.	12,413,942.	i
_					1
	31	Total liabilities and net assets/fund balances	9,062,778.	12,413,942.	į
Р	art	Analysis of Changes in Net Assets or Fund Ba	alances		
_					
1		net assets or fund balances at beginning of year - Part II, column (a), line 3	30		0 060 770
_	•	st agree with end-of-year figure reported on prior year's return)		1 1	9,062,778.
		r amount from Part I, line 27a		2	3,351,164.
		r increases not included in line 2 (itemize) lines 1, 2, and 3		3	$ \begin{array}{c} 0. \\ 12,413,942. \end{array} $
		eases not included in line 2 (itemize)		4 5	12,413,942.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (h), line 30		12,413,942.
		The state of the s			

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(a) List and desc	rıbe the k	ind(s) of property sold (e.g. or common stock, 200 shs	, real estate,	. moome	(b) Ho P - F D - I	w acquired Purchase Donation	(c) Date (mo., d	acquired lay, yr.)	(d) Date sold (mo , day, yr.)
1a CAPITAL GAINS	DIVI	DENDS							
b									
d e					 				
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		st or other basis expense of sale		<u> </u>		ain or (loss) s (f) minus (
a 100,509.									100,509.
b						-			
<u>C</u>									
<u>d</u>		-				-			-
Complete only for assets shown	o dain in	column (h) and owned by t	he foundation	on 12/31/60) Cours (C	\al (b) as a	
Complete only for assets shown		(j) Adjusted basis		cess of col. (i)			. (k), but ı	Col. (h) gain not less thar	1 -0-) or
(ı) F.M.V. as of 12/31/69		as of 12/31/69		col. (j), if any			Losses	(from col. (i	h)) ´
a									100,509.
b									
C									
<u>d</u>									
e						1-			
2 Capital gain net income or (net ca	pital loss	If gain, also enter If (loss), enter -0-	ın Part I, line ın Part I, line	7 7	}	2			100,509.
3 Net short-term capital gain or (los	s) as def	ned in sections 1222(5) and	q (e).						
If gain, also enter in Part I, line 8,	column (c).			\downarrow			37/3	
If (loss), enter -0- in Part I, line 8 Part V Qualification U	nder S	Section 4940(e) for	Reduced	Tay on Not	Inve	3 stment inc	ome	N/A	
If section 4940(d)(2) applies, leave the Was the foundation liable for the sec if "Yes," the foundation does not qual 1. Enter the appropriate amount in a contract of the section of the	tion 4942 lify under	tax on the distributable ame section 4940(e). Do not cor	mplete this pa	rt.					Yes X No
(a) Base period years		(b)			(c)			Distrib	(d) ution ratio
Calendar year (or tax year beginnii	ng in)	Adjusted qualifying dist		Net value of no				(col (b) div	ided by col. (c))
2014			1,402.			<u>222,322</u>			.171475
2013			2,352.			$\frac{117,692}{478,409}$.029855
2012 2011			3,591. 0,362.			<u>478,498</u> 942,972			.292706 .772199
2010			6,224.			243,772			6.178823
		= 7 - 3	- /						01270023
2 Total of line 1, column (d)							2		7.445058
3 Average distribution ratio for the	5-year ba	se period - divide the total o	n line 2 by 5,	or by the number	of years	3			· ·
the foundation has been in exister	nce if less	than 5 years					3		1.489012
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5			4	1	0,096,004.				
5 Multiply line 4 by line 3			5	1	5,033,071.				
6 Enter 1% of net investment incom	ne (1% of	Part I, line 27b)					6		3,515.
7 Add lines 5 and 6							7	_1	<u>5,036,586.</u>
8 Enter qualifying distributions from If line 8 is equal to or greater than See the Part VI instructions.			1b, and comp	elete that part usin	ng a 1%	tax rate	8		196,325.

	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(<u> 20-4/3</u>			age 4
			940 - See	msuu	Clioi	15)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line					
	Date of ruling or determination letter: (attach copy of letter if necessary-see ins					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and en	ier 1%	1		7,0	<u> 30.</u>
	of Part I, line 27b					
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line	' '				•
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2			<u> 0.</u>
3	Add lines 1 and 2		3		7,0	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5		7,0	<u> 30.</u>
6	Credits/Payments:					
	2015 estimated tax payments and 2014 overpayment credited to 2015	6,160.				
	Exempt foreign organizations - tax withheld at source					
C	: Tax paid with application for extension of time to file (Form 8868)		1			
d	Backup withholding erroneously withheld 6d					
	Total credits and payments. Add lines 6a through 6d		7		<u>6,1</u>	<u>60.</u>
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶ :	9		<u>8</u>	<u>70.</u>
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	, ▶	10			
	Enter the amount of line 10 to be: Credited to 2016 estimated tax	Refunded ►	11			
	art VII-A Statements Regarding Activities			т	· ·	•
1a	ı During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it p	participate or intervene	เก		Yes	
	any political campaign?			1a		<u>X</u>
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instruc			1b		<u>X</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of air	ny materials publishe	d or			
	distributed by the foundation in connection with the activities					
C	Did the foundation file Form 1120-POL for this year?			1c		<u> </u>
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.				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposes	ed on foundation				
	managers. ► \$ 0 .					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		<u> </u>
	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	cles of incorporation, o	r			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		<u>X</u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		<u> </u>
	olf "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b		
5	, , , , , , , , , , , , , , , , , , , ,			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	it 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	Х	
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	KY					
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					X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3		ndar			
	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part			9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their nar	nes and addresses		10	<u> </u>	_ X

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X

3b

4a

N/A

b If "Yes," did it have excess business holdings in 2015 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 holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could leopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2015)

had not been removed from jeopardy before the first day of the tax year beginning in 2015?

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

Compensation of five highest-paid employees (other than those inc			(d) Contributions to employee benefit plans and deferred	(e) Expe	
LEXINGTON, KY 40513	0.25	0.	0.		0.
2433 OLDE BRIDGE LANE					
DAVIS L. MARKSBURY, III	DIRECTOR				
LEXINGTON, KY 40513	0.25	0.	0.		0.
2433 OLDE BRIDGE LANE					
	DIRECTOR				
LEXINGTON, KY 40513	0.25	0.	0.		0.
2433 OLDE BRIDGE LANE					
	TREASURER/SEC	RETARY			
LEXINGTON, KY 40513	0.25	0.	0.		0.
2433 OLDE BRIDGE LANE			_		_
	CHAIRMAN/EXEC	UTIVE DIR	•		
.,	to position	enter -0-)	compensation	allowan	ces
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expe account, o	nse other
List all officers, directors, trustees, foundation managers and their		(-) Company	(d) Contributions to		
Paid Employees, and Contractors					
Part VIII Information About Officers, Directors, Trusto		nagers, Highly		<u>- 1l</u>	
b If "Yes," did the foundation receive any proceeds or have any net income attribu			_	′Ь	
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	☐ Ya	s X No		
If "Yes" to 6b. file Form 8870	5.55/iai bonont oomitaat			-	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			ы	Х
a personal benefit contract?	pay profitation off	☐ Va	s X No		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to					
If "Yes," attach the statement required by Regulations section 53 4945		., 43 16	.5 110		
expenditure responsibility for the grant?		I/A 🗀 Ye	s No		
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 fr		uned	~ L		
section 53.4945 or in a current notice regarding disaster assistance (see instru	•		N/A	''	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		iii neguialions	NI/A	ы	
•	for the exceptions described :		ו מאובביו פו		
(5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals?	or concanonal purposes, or t		s X No		
	or adjugational purposes, or f		ו אונבט פּי		
(4) Provide a grant to an organization other than a charitable, etc., organization 4945(d)(4)(A)? (see instructions)	11 069011060 III 960(IOII	□ v.	s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes (4) Provide a grant to an organization other than a charitable, etc., organization		Ye	000 لما ۵:		
any voter registration drive?	2		es X No		
	i to carry on, directly or indire		s X No		
(1) Carry on propagation, or otherwise attempt to influence registation (section 4943(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	□ v _a	s X No		
5a During the year did the foundation pay or incur any amount to.					
Part VII-B Statements Regarding Activities for Which I				<u> </u>	age 6
orm 990-PF (2015) MARKSBURY FAMILY FOUNDAT	ION, INC.		26-47372	ng p	2006

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NON	IE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		<u>▶</u> <u>0</u>
<u> </u>		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical info number of organizations and other beneficiaries served, conferences convened, research papers produced, e	ormation such as the	Expenses
1 N/A	10.	
1 N/A		
		
2	·	
	···	
3		
4		
D. H.W. D.L.		
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		
-		
All other program-related investments. See instructions.		
3		
-		
Total. Add lines 1 through 3	>	0.

P	art X Minimum Investment Beturn	20	4/3/200 Tage 0
<u>-</u>	Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	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	7,801,970.
b	Average of monthly cash balances	1b	2,447,780.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	10,249,750.
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	10,249,750.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	153,746.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	10,096,004.
6	Minimum investment return. Enter 5% of line 5	6	504,800.
P	art XI Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations are	nd certain	
	foreign organizations check here 🕨 🔃 and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	504,800.
2a	Tax on investment income for 2015 from Part VI, line 5]	
b	Income tax for 2015. (This does not include the tax from Part VI.)]	
C	Add lines 2a and 2b	2c	7,030.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	497,770.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	497,770.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	497,770.
Р	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	196,325.
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:		
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	196,325.
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	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	196,325.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies fo	r the section

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4940(e) reduction of tax in those years.

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Par	rt XI,			405 550
line 7				497,770.
2 Undistributed income, if any, as of the end of 2	2015			
a Enter amount for 2014 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to	0.2015:	0.		
a From 2010 1, 336,	1			
b From 2011 1, 404,				
c From 2012 1,330,				
d From 2013	022.			
e From 2014 1,126,	413.			
f Total of lines 3a through e	5,198,312.			
4 Qualifying distributions for 2015 from				
Part XII, line 4: ►\$ 196,	325.			
a Applied to 2014, but not more than line			0.	
b Applied to undistributed income of prio				
years (Election required - see instruction		0.		
c Treated as distributions out of corpus	,			
(Election required - see instructions)	0.			
d Applied to 2015 distributable amount				196,325.
e Remaining amount distributed out of co				
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same must be shown in column (a).)				301,445.
6 Enter the net total of each column as indicated below:				·
a Corpus Add lines 3f, 4c, and 4e Subtract line	5 4 ,896,867.			
b Prior years' undistributed income. Subt	tract			
line 4b from line 2b		0.		
c Enter the amount of prior years				
undistributed income for which a notice deficiency has been issued, or on which				
the section 4942(a) tax has been previous		2		
assessed		0.		
d Subtract line 6c from line 6b. Taxable		0		
amount - see instructions	-A 1	0.		
e Undistributed income for 2014. Subtract			0.	
4a from line 2a. Taxable amount - see ii f Undistributed income for 2015. Subtract			U •	
lines 4d and 5 from line 1. This amount				
be distributed in 2016	inust			0.
7 Amounts treated as distributions out of				<u></u>
corpus to satisfy requirements imposed				
section 170(b)(1)(F) or 4942(g)(3) (Ele	-			
may be required - see instructions)	0.			
8 Excess distributions carryover from 20				W* for - 1
not applied on line 5 or line 7	1,035,260.			1
9 Excess distributions carryover to 2016	•	· · · ·	*****	
Subtract lines 7 and 8 from line 6a	3,861,607.			
0 Analysis of line 9:				·
a Excess from 2011 1,404,	372.			
b Excess from 2012 1,330,	822.			
c Excess from 2013				
d Excess from 2014 1,126,	413.			
e Excess from 2015				

Form 990-PF		RY FAMILY F	OUNDATION,	INC.	26-47	37208 Page 10
	Private Operating F			I-A, question 9)	<u> N/A</u>	
	undation has received a ruling o					
	on, and the ruling is effective fo			▶ ∟	7	
	ox to indicate whether the found		ng foundation described		4942(j)(3) or 494	42(j)(5)
	e lesser of the adjusted net	Tax year	(1) 0044	Prior 3 years	1 (1) 0040	
	from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
investme	ent return from Part X for					
each yea						
b 85% of I	ine 2a				_	
•	ig distributions from Part XII,					
	r each year listed					
	s included in line 2c not					
used dir	ectly for active conduct of					
exempt a						
•	g distributions made directly					
for active	e conduct of exempt activities.					
3 Complet alternativ a "Assets"	line 2d from line 2c e 3a, b, or c for the ve test relied upon: alternative test - enter: ue of all assets					
(2) Valu	ie of assets qualifying er section 4942(j)(3)(B)(i)					
b "Endown 2/3 of m	nent" alternative test - enter inimum investment return in Part X, line 6 for each year					
	" alternative test - enter:					
(1) Tota inve divid sect	It support other than gross stment income (interest, dends, rents, payments on urities loans (section (a)(5)), or royalties)					
(2) Sup and orga	port from general public 5 or more exempt anizations as provided in ion 4942(j)(3)(B)(iii)					
	jest amount of support from					
• •	xempt organization					
	ss investment income					
	Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or mo	re in accete
Tartito	at any time during t			ii tiic iodildatioi	1 11au 40,000 01 1110	ie iii assets
a List any year (but	ntion Regarding Foundation managers of the foundation white only if they have contributed in L. MARKSBURY,	o have contributed more nore than \$5,000). (See s	than 2% of the total contr ection 507(d)(2).)	ributions received by the	e foundation before the clos	e of any tax
b List any	managers of the foundation whi lity) of which the foundation has	o own 10% or more of th		or an equally large porti	ion of the ownership of a pa	rtnership or
NONE		2				
2 Informa	ere X if the foundation o	nly makes contributions t	to preselected charitable	organizations and does	not accept unsolicited reque	ests for funds. If
	dation makes gifts, grants, etc.					<u>d.</u>
a The nam	e, address, and telephone numl	per or e-mail address of t	the person to whom appli	cations should be addre	essed:	
b The form	ı ın which applications should b	e submitted and informat	tion and materials they sh	nould include:		
c Any subr	mission deadlines:					
d Any restr	rictions or limitations on awards	s, such as by geographica	al areas, charitable fields,	kınds of institutions, or	other factors:	

3 Grants and Contributions Paid During the		Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				_
BLUE GRASS COMMUNITY FOUNDATION	NONE	501(C)(3)	DONATION TO ENHANCE	
499 EAST HIGH STREET, SUITE 112	NONE	PUBLIC	QUALITY OF LIFE IN THE	
LEXINGTON, KY 40507		DDDIC	BLUEGRASS REGION	125,000
LEXINGTON HEARING & SPEECH CENTER	NONE	501(C)(3)	DONATION TO PROVIDE	
350 HENRY CLAY BLVD		PUBLIC	SERVICES FOR HEARING,	
LEXINGTON, KY 40502			SPEECH, AND LANGUAGE	
,			IMPAIRED INDIVIDUALS	50,000
THE LIVING ARTS & SCIENCE CENTER	NONE	501(C)(3)	DONATION FOR NEW	
362 N. MARTIN LUTHER KING BLVD.	NONE	PUBLIC	BUILDING CONSTRUCTION	
LEXINGTON, KY 40508			DOTED THE CONSTRUCTION	20,000
Total		1	▶ 3a	_195_000
b Approved for future payment				
LEXINGTON HEARING & SPEECH CENTER	NONE	501(C)(3)	DONATION TO PROVIDE	
350 HENRY CLAY BLVD	NONE	PUBLIC	SERVICES FOR HEARING,	
LEXINGTON, KY 40502		00000	SPEECH, AND LANGUAGE	
			IMPAIRED INDIVIDUALS	150,000
				•
	-			
Total			▶ 3b	150 000

Part XVI-A **Analysis of Income-Producing Activities**

Form 990-PF (2015)

Enter gross amounts unless otherwise indicated.		DUSINESS INCOME	(C) Exclu-	led by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
a	3000		† †		
			1 1	-	
			!		
· ····			1		
d		_ -	 		
e	- - -		1 1	-	
g Fees and contracts from government agencies	-				
2 Membership dues and assessments			+		
3 Interest on savings and temporary cash			1 1		
investments			14	10 722	
4 Dividends and interest from securities			14	19,722. 232,230.	
5 Net rental income or (loss) from real estate:			1 4	232,230.	
			}		
a Debt-financed property			1		
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				100 500	
than inventory			14	100,509.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			-		
11 Other revenue:					
a	-		 -		
b			 		
C		· · · · · · · · · · · · · · · · · · ·			
d	_		<u> </u>		
e	_			0.70 4.61	
12 Subtotal. Add columns (b), (d), and (e)		0.		352,461.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	352,461.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	 				Ishment of
the foundation's exempt purposes (other that					
				1.00	<u> </u>
	** ***	<u> </u>			
		- 	-		
		~			
					
					
					
				· · · · · · · · · · · · · · · · · · ·	
					

Form 990-PF (2015) MARKSBURY FAMILY FOUNDATION, INC. 26-4737208 Page 13 Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash 1a(1) (2) Other assets 1a(2) **b** Other transactions. (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) X c Sharing of facilities, equipment, mailing lists, other assets, or paid employees If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge May the IRS discuss this return with the preparer Sign Here DIRECTOR X Yes Signature of officer or trustee Title Print/Type preparer's name PTIN Check [ıf self- employed Paid JENNIFER SHAH P00448795 Preparer Firm's name ► DEAN DORTON Firm's EIN $\triangleright 27 - 3858252$ **Use Only** Firm's address $\triangleright 106$ W. VINE STREET, SUITE 600

Form **990-PF** (2015)

Phone no. (859)255-2341

LEXINGTON, KY 40507

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

2015

Name of the organization

Employer identification number

M	MARKSBURY FAMILY FOUNDATION, INC.	26-4737208					
Organization type(check							
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	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
· ·	<u></u>						
	n is covered by the General Rule or a Special Rule. c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	le. See instructions					
General Rule							
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling by one contributor. Complete Parts I and II. See instructions for determining a contributor.						
Special Rules							
sections 509(a)(1 any one contribu	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						
year, total contrib	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						
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.							
but it must answer "No" o	that is not covered by the General Rule and/or the Special Rules does not file Schedule E on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fo et the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

Employer identification number

MARKSBURY FAMILY FOUNDATION, INC.

26-4737208

Part I	Contributors (see instructions) Use duplicate copies of Part I if add	itional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MARKSBURY GIFTING TRUST C/O DEAN DORTON ALLEN FORD PLLC 106 WEST VINE STREET, SUITE 600 LEXINGTON, KY 40507	\$3,203,945.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
,		\$	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 Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll 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)

Name of organization

Employer identification number

MARKSBURY FAMILY FOUNDATION, INC.

26-4737208

Part II	Noncash Property (see instructions) Use duplicate copies of P	art II if additional space is needed		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$		
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$		
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$		
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$	 	
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
arti				
153 10-26-	15.	Schedule B (Form 9	990, 990-EZ, or 990-PF) (

Schedule B (Form 990, 990-EZ, or 990-PF) (2015) Page 4 Name of organization Employer identification number MARKSBURY FAMILY FOUNDATION INC. 26-4737208 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations Part III completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info once) Use duplicate copies of Part III if additional space is needed (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held

Relationship of transferor to transferee

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

FORM 990-PF INTERE	ST ON SAVI	NGS A1	ND TEM	PORAR	Y CASH I	NVESTMENTS	SI	TATEMENT	1	
SOURCE FIDELITY ACCOUNT GOODWILL ADJUSTMENT - FIDELITY ACCOUNT SCHWAB ACCOUNT TOTAL TO PART I, LINE 3			(A) REVENUE PER BOOKS 19,707.			(B) NET INVESTMENT INCOME		(C) ADJUSTED NET INCOME		
						19,707.		19,707.		
						3. 12.		3. 12.		
			19,722.		•	19,722.	19,722.			
FORM 990-PF	DIVIDEND	S AND	INTER	EST FI	ROM SECU	RITIES	SI	ATEMENT	2	
SOURCE	GROSS AMOUNT	(CAPITAL GAINS DIVIDENDS		(A) REVENUE ER BOOKS	(B) NET INVEST- MENT INCOME		(C) ADJUSTE NET INCO		
FIDELITY ACCOUNT SCHWAB ACCOUNT	138,797 193,942		0. 100,509.		138,797 93,433	138,797. 93,433.		138,79 93,43		
TO PART I, LINE 4	332,739	. 1	100,509.		232,230	232,23	232,230.		232,230.	
FORM 990-PF		ACC	COUNTI	NG FE	Ξ S		ST	ATEMENT	3	
DESCRIPTION		(/ EXPEN PER I		NET :	(B) INVEST- INCOME	(C) ADJUSTEI NET INCOM		(D) CHARITAE PURPOSE		
ACCOUNTING	_	1	1,900.		950.		0.		50.	
TO FORM 990-PF, PG	1, LN 16B	1	1,900.		950.		0.		50.	

FORM 990-PF	TAX	STATEMENT 4					
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC					
EXCISE TAX	7,967	•	0.		0.		0.
TO FORM 990-PF, PG 1, LN 18 =	7,967		0.		0.		0.
FORM 990-PF	OTHER I	STATEMENT 5					
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(C) ADJUSTED NET INCOME		(D) CHARITABLE PURPOSES	
FILING FEE WEBSITE EXPENSE	15 360		0.		0.		15. 50.
TO FORM 990-PF, PG 1, LN 23	375	0.		0.		375.	
FORM 990-PF	OTHER IN	/ESTMENTS			STA	TEMENT	6
DESCRIPTION		ALUATION METHOD	вос	OK VALUE		R MARKET VALUE	
MUTUAL FUNDS	_	COST				9,103,810.	
TOTAL TO FORM 990-PF, PART II	, LINE 13	13		8,621,726.		9,103,810.	
FORM 990-PF	OTHER	ASSETS			STA	TEMENT	7
DESCRIPTION		NNING OF OK VALUE		OF YEAR F		FAIR MARKET VALUE	
DIVIDENDS RECEIVABLE LTCG RECEIVABLE		25,190. 5,901.		30,066. 10,879.		30,06 10,87	
TO FORM 990-PF, PART II, LINE		31,091.		40,945.		40,94	