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EXTENDED TO FEBRUARY 15, 2017

Form **990-PF**Department of the Treasury  
Internal Revenue Service**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](http://www.irs.gov/form990pf)

OMB No 1545-0052

**2015**

Open to Public Inspection

For calendar year 2015 or tax year beginning **APR 1, 2015**, and ending **MAR 31, 2016**

|                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                 |                                                                                                                                                                              |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Name of foundation<br><b>THE MARC &amp; MATTYE SILVERMAN FAMILY FOUNDATION</b>                                                                                                                                                                                                                         |                                                                                                                                                                 | A Employer identification number<br><b>56-1678118</b>                                                                                                                        |
| Number and street (or P.O. box number if mail is not delivered to street address)<br><b>6707-C FAIRVIEW ROAD</b>                                                                                                                                                                                       | Room/suite                                                                                                                                                      | B Telephone number<br><b>(704) 362-0400</b>                                                                                                                                  |
| City or town, state or province, country, and ZIP or foreign postal code<br><b>CHARLOTTE, NC 28210</b>                                                                                                                                                                                                 |                                                                                                                                                                 | C If exemption application is pending, check here <input type="checkbox"/>                                                                                                   |
| G Check all that apply:<br><input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity<br><input type="checkbox"/> Final return <input type="checkbox"/> Amended return<br><input type="checkbox"/> Address change <input type="checkbox"/> Name change |                                                                                                                                                                 | D 1. Foreign organizations, check here <input type="checkbox"/><br>2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> |
| H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation<br><input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation                                                      |                                                                                                                                                                 | E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>                                                                |
| I Fair market value of all assets at end of year (from Part II, col (c), line 16)<br>▶ \$ <b>2,541,814.</b>                                                                                                                                                                                            | J Accounting method: <input type="checkbox"/> Cash <input type="checkbox"/> Accrual<br><input checked="" type="checkbox"/> Other (specify) <b>MODIFIED CASH</b> | F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>                                                             |

| Part I Analysis of Revenue and Expenses<br>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) |  | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------|---------------------------|-------------------------|-------------------------------------------------------------|
| 1 Contributions, gifts, grants, etc., received                                                                                                      |  | 27,640.                            |                           | N/A                     |                                                             |
| 2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B                                                                 |  |                                    |                           |                         |                                                             |
| 3 Interest on savings and temporary cash investments                                                                                                |  | 17,333.                            | 17,333.                   |                         | STATEMENT 1                                                 |
| 4 Dividends and interest from securities                                                                                                            |  | 33,917.                            | 33,917.                   |                         | STATEMENT 2                                                 |
| 5a Gross rents                                                                                                                                      |  |                                    |                           |                         |                                                             |
| b Net rental income or (loss)                                                                                                                       |  |                                    |                           |                         |                                                             |
| 6a Net gain or (loss) from sale of assets not on line 10                                                                                            |  | 199,534.                           |                           |                         |                                                             |
| b Gross sales price for all assets on line 6a                                                                                                       |  | 1,102,293.                         |                           |                         |                                                             |
| 7 Capital gain net income (from Part IV, line 2)                                                                                                    |  |                                    | 199,534.                  |                         |                                                             |
| 8 Net short-term capital gain                                                                                                                       |  |                                    |                           |                         |                                                             |
| 9 Income modifications                                                                                                                              |  |                                    |                           |                         |                                                             |
| 10a Gross sales less returns and allowances                                                                                                         |  |                                    |                           |                         |                                                             |
| b Less Cost of goods sold                                                                                                                           |  |                                    |                           |                         |                                                             |
| c Gross profit or (loss)                                                                                                                            |  |                                    |                           |                         |                                                             |
| 11 Other income                                                                                                                                     |  | 10,441.                            | 10,441.                   |                         | STATEMENT 3                                                 |
| 12 Total. Add lines 1 through 11                                                                                                                    |  | 288,865.                           | 261,225.                  |                         |                                                             |
| 13 Compensation of officers, directors, trustees, etc.                                                                                              |  | 0.                                 | 0.                        |                         | 0.                                                          |
| 14 Other employee salaries and wages                                                                                                                |  |                                    |                           |                         |                                                             |
| 15 Pension plans, employee benefits                                                                                                                 |  |                                    |                           |                         |                                                             |
| 16a Legal fees                                                                                                                                      |  |                                    |                           |                         |                                                             |
| b Accounting fees STMT 4                                                                                                                            |  | 6,550.                             | 0.                        |                         | 6,550.                                                      |
| c Other professional fees STMT 5                                                                                                                    |  | 9,595.                             | 9,595.                    |                         | 0.                                                          |
| 17 Interest                                                                                                                                         |  |                                    |                           |                         |                                                             |
| 18 Taxes STMT 6                                                                                                                                     |  | 8,774.                             | 0.                        |                         | 0.                                                          |
| 19 Depreciation and depletion                                                                                                                       |  |                                    |                           |                         |                                                             |
| 20 Occupancy                                                                                                                                        |  |                                    |                           |                         |                                                             |
| 21 Travel, conferences, and meetings                                                                                                                |  | 446.                               | 0.                        |                         | 0.                                                          |
| 22 Printing and publications                                                                                                                        |  |                                    |                           |                         |                                                             |
| 23 Other expenses STMT 7                                                                                                                            |  | 737.                               | 0.                        |                         | 737.                                                        |
| 24 Total operating and administrative expenses. Add lines 13 through 23                                                                             |  | 26,102.                            | 9,595.                    |                         | 7,287.                                                      |
| 25 Contributions, gifts, grants paid                                                                                                                |  | 144,181.                           |                           |                         | 144,181.                                                    |
| 26 Total expenses and disbursements. Add lines 24 and 25                                                                                            |  | 170,283.                           | 9,595.                    |                         | 151,468.                                                    |
| 27 Subtract line 26 from line 12:                                                                                                                   |  |                                    |                           |                         |                                                             |
| a Excess of revenue over expenses and disbursements                                                                                                 |  | 118,582.                           |                           |                         |                                                             |
| b Net investment income (if negative, enter -0-)                                                                                                    |  |                                    | 251,630.                  |                         |                                                             |
| c Adjusted net income (if negative, enter -0-)                                                                                                      |  |                                    |                           | N/A                     |                                                             |

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Form 990-PF (2015)

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**THE MARC & MATTYE SILVERMAN FAMILY  
FOUNDATION**

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| <b>Part II Balance Sheets</b> <small>Attached schedules and amounts in the description column should be for end-of-year amounts only</small> |                                                                                                                            |                                                                                    |            | Beginning of year | End of year    |                       |
|----------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|------------|-------------------|----------------|-----------------------|
|                                                                                                                                              |                                                                                                                            |                                                                                    |            | (a) Book Value    | (b) Book Value | (c) Fair Market Value |
| <b>Assets</b>                                                                                                                                | 1                                                                                                                          | Cash - non-interest-bearing                                                        |            | 263,301.          | 465,816.       | 465,816.              |
|                                                                                                                                              | 2                                                                                                                          | Savings and temporary cash investments                                             |            |                   |                |                       |
|                                                                                                                                              | 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 ▶                                            |            |                   |                |                       |
|                                                                                                                                              | 8                                                                                                                          | Inventories for sale or use                                                        |            |                   |                |                       |
|                                                                                                                                              | 9                                                                                                                          | Prepaid expenses and deferred charges                                              |            |                   |                |                       |
|                                                                                                                                              | 10a                                                                                                                        | Investments - U.S. and state government obligations <b>STMT 8</b>                  |            | 223,615.          | 193,065.       | 195,963.              |
|                                                                                                                                              | b                                                                                                                          | Investments - corporate stock <b>STMT 9</b>                                        |            | 1,409,264.        | 1,066,925.     | 1,043,380.            |
|                                                                                                                                              | c                                                                                                                          | Investments - corporate bonds <b>STMT 10</b>                                       |            | 265,281.          | 310,834.       | 305,304.              |
|                                                                                                                                              | 11                                                                                                                         | Investments - land, buildings, and equipment basis ▶                               |            |                   |                |                       |
|                                                                                                                                              | Less: accumulated depreciation ▶                                                                                           |                                                                                    |            |                   |                |                       |
| 12                                                                                                                                           | Investments - mortgage loans                                                                                               |                                                                                    |            |                   |                |                       |
| 13                                                                                                                                           | Investments - other <b>STMT 11</b>                                                                                         |                                                                                    | 71,970.    | 315,373.          | 531,351.       |                       |
| 14                                                                                                                                           | Land, buildings, and equipment: basis ▶ <b>1,851.</b>                                                                      |                                                                                    |            |                   |                |                       |
|                                                                                                                                              | Less: accumulated depreciation <b>STMT 12</b> ▶ <b>1,851.</b>                                                              |                                                                                    |            |                   |                |                       |
| 15                                                                                                                                           | Other assets (describe ▶)                                                                                                  |                                                                                    |            |                   |                |                       |
| 16                                                                                                                                           | <b>Total assets</b> (to be completed by all filers - see the instructions. Also, see page 1, item I)                       |                                                                                    | 2,233,431. | 2,352,013.        | 2,541,814.     |                       |
| <b>Liabilities</b>                                                                                                                           | 17                                                                                                                         | Accounts payable and accrued expenses                                              |            |                   |                |                       |
|                                                                                                                                              | 18                                                                                                                         | Grants payable                                                                     |            |                   |                |                       |
|                                                                                                                                              | 19                                                                                                                         | Deferred revenue                                                                   |            |                   |                |                       |
|                                                                                                                                              | 20                                                                                                                         | Loans from officers, directors, trustees, and other disqualified persons           |            |                   |                |                       |
|                                                                                                                                              | 21                                                                                                                         | Mortgages and other notes payable                                                  |            |                   |                |                       |
|                                                                                                                                              | 22                                                                                                                         | Other liabilities (describe ▶)                                                     |            |                   |                |                       |
|                                                                                                                                              | 23                                                                                                                         | <b>Total liabilities</b> (add lines 17 through 22)                                 |            | 0.                | 0.             |                       |
| <b>Net Assets or Fund Balances</b>                                                                                                           | Foundations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31 |                                                                                    |            |                   |                |                       |
|                                                                                                                                              | 24                                                                                                                         | Unrestricted                                                                       |            |                   |                |                       |
|                                                                                                                                              | 25                                                                                                                         | Temporarily restricted                                                             |            |                   |                |                       |
|                                                                                                                                              | 26                                                                                                                         | Permanently restricted                                                             |            |                   |                |                       |
|                                                                                                                                              | Foundations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 31   |                                                                                    |            |                   |                |                       |
|                                                                                                                                              | 27                                                                                                                         | Capital stock, trust principal, or current funds                                   |            | 2,233,431.        | 2,352,013.     |                       |
|                                                                                                                                              | 28                                                                                                                         | Paid-in or capital surplus, or land, bldg., and equipment fund                     |            | 0.                | 0.             |                       |
|                                                                                                                                              | 29                                                                                                                         | Retained earnings, accumulated income, endowment, or other funds                   |            | 0.                | 0.             |                       |
|                                                                                                                                              | 30                                                                                                                         | <b>Total net assets or fund balances</b>                                           |            | 2,233,431.        | 2,352,013.     |                       |
| 31                                                                                                                                           | <b>Total liabilities and net assets/fund balances</b>                                                                      |                                                                                    | 2,233,431. | 2,352,013.        |                |                       |

**Part III Analysis of Changes in Net Assets or Fund Balances**

|   |                                                                                                                                                               |   |            |
|---|---------------------------------------------------------------------------------------------------------------------------------------------------------------|---|------------|
| 1 | Total net assets or fund balances at beginning of year - Part II, column (a), line 30<br>(must agree with end-of-year figure reported on prior year's return) | 1 | 2,233,431. |
| 2 | Enter amount from Part I, line 27a                                                                                                                            | 2 | 118,582.   |
| 3 | Other increases not included in line 2 (itemize) ▶                                                                                                            | 3 | 0.         |
| 4 | Add lines 1, 2, and 3                                                                                                                                         | 4 | 2,352,013. |
| 5 | Decreases not included in line 2 (itemize) ▶                                                                                                                  | 5 | 0.         |
| 6 | <b>Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30</b>                                                  | 6 | 2,352,013. |

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**Part IV Capital Gains and Losses for Tax on Investment Income**

| (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) | (b) How acquired<br>P - Purchase<br>D - Donation | (c) Date acquired<br>(mo., day, yr.) | (d) Date sold<br>(mo., day, yr.) |
|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|--------------------------------------|----------------------------------|
| <b>1a PUBLICLY TRADED SECURITIES</b>                                                                                               |                                                  |                                      |                                  |
| <b>b CAPITAL GAINS DIVIDENDS</b>                                                                                                   |                                                  |                                      |                                  |
| c                                                                                                                                  |                                                  |                                      |                                  |
| d                                                                                                                                  |                                                  |                                      |                                  |
| e                                                                                                                                  |                                                  |                                      |                                  |

| (e) Gross sales price | (f) Depreciation allowed<br>(or allowable) | (g) Cost or other basis<br>plus expense of sale | (h) Gain or (loss)<br>(e) plus (f) minus (g) |
|-----------------------|--------------------------------------------|-------------------------------------------------|----------------------------------------------|
| a 1,023,776.          |                                            | 902,759.                                        | 121,017.                                     |
| b 78,517.             |                                            |                                                 | 78,517.                                      |
| c                     |                                            |                                                 |                                              |
| d                     |                                            |                                                 |                                              |
| e                     |                                            |                                                 |                                              |

| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 |                                      |                                                 | (l) Gains (Col. (h) gain minus<br>col. (k), but not less than -0-) or<br>Losses (from col. (h)) |
|---------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------------------|-------------------------------------------------------------------------------------------------|
| (i) F.M.V. as of 12/31/69                                                                   | (j) Adjusted basis<br>as of 12/31/69 | (k) Excess of col. (i)<br>over col. (j), if any |                                                                                                 |
| a                                                                                           |                                      |                                                 | 121,017.                                                                                        |
| b                                                                                           |                                      |                                                 | 78,517.                                                                                         |
| c                                                                                           |                                      |                                                 |                                                                                                 |
| d                                                                                           |                                      |                                                 |                                                                                                 |
| e                                                                                           |                                      |                                                 |                                                                                                 |

|                                                                                                                                                                                 |                                                                                     |   |          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|---|----------|
| 2 Capital gain net income or (net capital loss)                                                                                                                                 | { If gain, also enter in Part I, line 7<br>If (loss), enter -0- in Part I, line 7 } | 2 | 199,534. |
| 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):<br>If gain, also enter in Part I, line 8, column (c).<br>If (loss), enter -0- in Part I, line 8 | }                                                                                   | 3 | N/A      |

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

| (a) Base period years<br>Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitable-use assets | (d) Distribution ratio<br>(col. (b) divided by col. (c)) |
|-------------------------------------------------------------------|---------------------------------------|-------------------------------------------|----------------------------------------------------------|
| 2014                                                              | 189,693.                              | 2,846,205.                                | .066648                                                  |
| 2013                                                              | 185,491.                              | 2,650,767.                                | .069976                                                  |
| 2012                                                              | 175,344.                              | 2,345,571.                                | .074755                                                  |
| 2011                                                              | 175,445.                              | 2,331,241.                                | .075258                                                  |
| 2010                                                              | 214,750.                              | 2,368,089.                                | .090685                                                  |

|                                                                                                                                                                                |   |            |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|------------|
| 2 Total of line 1, column (d)                                                                                                                                                  | 2 | .377322    |
| 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years | 3 | .075464    |
| 4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5                                                                                                 | 4 | 2,621,711. |
| 5 Multiply line 4 by line 3                                                                                                                                                    | 5 | 197,845.   |
| 6 Enter 1% of net investment income (1% of Part I, line 27b)                                                                                                                   | 6 | 2,516.     |
| 7 Add lines 5 and 6                                                                                                                                                            | 7 | 200,361.   |
| 8 Enter qualifying distributions from Part XII, line 4                                                                                                                         | 8 | 151,468.   |

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.  
See the Part VI instructions.

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**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)**

|                                                                                                                                                                                                                                          |    |        |        |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|--------|--------|
| 1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1.<br>• Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions) |    |        |        |
| b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b                                                                                        |    | 1      | 5,033. |
| c 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      | 5,033. |
| 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      | 5,033. |
| 6 Credits/Payments:                                                                                                                                                                                                                      |    |        |        |
| a 2015 estimated tax payments and 2014 overpayment credited to 2015                                                                                                                                                                      | 6a | 1,641. |        |
| b Exempt foreign organizations - tax withheld at source                                                                                                                                                                                  | 6b |        |        |
| c Tax paid with application for extension of time to file (Form 8868)                                                                                                                                                                    | 6c | 4,760. |        |
| d Backup withholding erroneously withheld                                                                                                                                                                                                | 6d |        |        |
| 7 Total credits and payments. Add lines 6a through 6d                                                                                                                                                                                    | 7  | 6,401. |        |
| 8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached                                                                                                                      | 8  | 33.    |        |
| 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed                                                                                                                                                          | 9  |        |        |
| 10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid                                                                                                                                              | 10 | 1,335. |        |
| 11 Enter the amount of line 10 to be: Credited to 2016 estimated tax <input type="checkbox"/> 1,335. Refunded <input type="checkbox"/>                                                                                                   | 11 | 0.     |        |

**Part VII-A Statements Regarding Activities**

|                                                                                                                                                                                                                                                                                                                                              | Yes | No |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?                                                                                                                                                                      |     | X  |
| b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?<br>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities |     | X  |
| c Did the foundation file Form 1120-POL for this year?                                                                                                                                                                                                                                                                                       |     | X  |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:<br>(1) On the foundation. <input type="checkbox"/> \$ 0. (2) On foundation managers. <input type="checkbox"/> \$ 0.                                                                                                                     |     |    |
| e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="checkbox"/> \$ 0.                                                                                                                                                                       |     |    |
| 2 Has the foundation engaged in any activities that have not previously been reported to the IRS?<br>If "Yes," attach a detailed description of the activities.                                                                                                                                                                              |     | X  |
| 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                                                                                                                 |     | X  |
| 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?                                                                                                                                                                                                                                               | X   |    |
| b If "Yes," has it filed a tax return on Form 990-T for this year?                                                                                                                                                                                                                                                                           | X   |    |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?<br>If "Yes," attach the statement required by General Instruction T                                                                                                                                                                         |     | X  |
| 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:<br>• By language in the governing instrument, or<br>• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?         | 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                                                                                                                                                                                                           | X   |    |
| 8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> NC                                                                                                                                                                                                            |     |    |
| 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) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV                                                                                       |     | X  |
| 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses                                                                                                                                                                                                        |     | X  |

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**Part VII-A Statements Regarding Activities** (continued)

|                                                                                                                                                                                                                                                                                                                                    |    | Yes | No |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-----|----|
| 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)                                                                                                                                         | 11 |     | X  |
| 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)                                                                                                                                        | 12 |     | X  |
| 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?<br>Website address ► <u>N/A</u>                                                                                                                                                                             | 13 | X   |    |
| 14 The books are in care of ► <u>MATTYE SILVERMAN</u> Telephone no. ► <u>704-362-0400</u><br>Located at ► <u>6707-C FAIRVIEW RD., CHARLOTTE, NC</u> ZIP+4 ► <u>28210</u>                                                                                                                                                           |    |     |    |
| 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year<br>► <u>15</u> <u>N/A</u>                                                                                                                   | 15 | N/A |    |
| 16 At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?<br>See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ► | 16 |     | X  |

**Part 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 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|-----|----|
| <b>1a During the year did the foundation (either directly or indirectly):</b>                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                     |     |    |
| (1) Engage in the sale or exchange, or leasing of property with a disqualified person?                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |     |    |
| (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |     |    |
| (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?                                                                                                                                                                                                                                                                                                                                                                                                              | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |     |    |
| (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?                                                                                                                                                                                                                                                                                                                                                                                                                    | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |     |    |
| (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |     |    |
| (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 termination of government service, if terminating within 90 days.)                                                                                                                                                                                                                                                         | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |     |    |
| <b>b</b> If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?<br>Organizations relying on a current notice regarding disaster assistance check here ► <input type="checkbox"/>                                                                                                                                                          | 1b                                                                  |     | X  |
| <b>c</b> Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015?                                                                                                                                                                                                                                                                                                        | 1c                                                                  |     | X  |
| <b>2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):</b>                                                                                                                                                                                                                                                                                                                 |                                                                     |     |    |
| <b>a</b> At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015?<br>If "Yes," list the years ► _____, _____, _____                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |     |    |
| <b>b</b> 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 statement - see instructions.)                                                                                                                                                                               | N/A                                                                 |     |    |
| <b>c</b> If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.<br>► _____, _____, _____                                                                                                                                                                                                                                                                                                                                                      | 2b                                                                  |     |    |
| <b>3a</b> Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |     |    |
| <b>b</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, Form 4720, to determine if the foundation had excess business holdings in 2015) | N/A                                                                 |     |    |
| <b>4a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?                                                                                                                                                                                                                                                                                                                                                                               | 4a                                                                  |     | X  |
| <b>b</b> Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?                                                                                                                                                                                                                                                              | 4b                                                                  |     | X  |

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**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required** (continued)

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |   |  |  |  |    |  |  |  |  |    |  |  |  |   |    |  |  |  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---|--|--|--|----|--|--|--|--|----|--|--|--|---|----|--|--|--|--|
| <p><b>5a</b> During the year did the foundation pay or incur any amount to</p> <p>(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?</p> <p>(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?</p> <p>(3) Provide a grant to an individual for travel, study, or other similar purposes?</p> <p>(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions)</p> <p>(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?</p> <p><b>b</b> If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?</p> <p>Organizations relying on a current notice regarding disaster assistance check here</p> <p><b>c</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?</p> <p>If "Yes," attach the statement required by Regulations section 53.4945-5(d)</p> <p><b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</p> <p><b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</p> <p>If "Yes" to 6b, file Form 8870</p> <p><b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?</p> <p><b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?</p> | <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p align="center">N/A</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p align="center">N/A</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p align="center">N/A</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p align="center">N/A</p> | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%; height: 40px;"></td> <td style="width: 20%;"></td> <td style="width: 20%;"></td> <td style="width: 20%;"></td> <td style="width: 20%;"></td> </tr> <tr> <td style="text-align: center;">5b</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">6b</td> <td></td> <td></td> <td></td> <td align="center">X</td> </tr> <tr> <td style="text-align: center;">7b</td> <td></td> <td></td> <td></td> <td></td> </tr> </table> |  |   |  |  |  | 5b |  |  |  |  | 6b |  |  |  | X | 7b |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |   |  |  |  |    |  |  |  |  |    |  |  |  |   |    |  |  |  |  |
| 5b                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |   |  |  |  |    |  |  |  |  |    |  |  |  |   |    |  |  |  |  |
| 6b                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | X |  |  |  |    |  |  |  |  |    |  |  |  |   |    |  |  |  |  |
| 7b                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |   |  |  |  |    |  |  |  |  |    |  |  |  |   |    |  |  |  |  |

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

**1 List all officers, directors, trustees, foundation managers and their compensation.**

| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|----------------------|-----------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|---------------------------------------|
| SEE STATEMENT 13     |                                                           | 0.                                        | 0.                                                                    | 0.                                    |
|                      |                                                           |                                           |                                                                       |                                       |
|                      |                                                           |                                           |                                                                       |                                       |
|                      |                                                           |                                           |                                                                       |                                       |
|                      |                                                           |                                           |                                                                       |                                       |
|                      |                                                           |                                           |                                                                       |                                       |
|                      |                                                           |                                           |                                                                       |                                       |
|                      |                                                           |                                           |                                                                       |                                       |

**2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."**

| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|---------------------------------------------------------------|-----------------------------------------------------------|------------------|-----------------------------------------------------------------------|---------------------------------------|
| NONE                                                          |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |

**Total number of other employees paid over \$50,000**

0

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3 Five highest-paid independent contractors for professional services. If none, enter "NONE."

**Total number of others receiving over \$50,000 for professional services**

## Expenses

Amount**Total.** Add lines 1 through 3

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**Part X**

**Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, 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 | 2,330,784. |
| b                                                                                                             | Average of monthly cash balances                                                                            | 1b | 330,852.   |
| c                                                                                                             | Fair market value of all other assets                                                                       | 1c |            |
| d                                                                                                             | <b>Total</b> (add lines 1a, b, and c)                                                                       | 1d | 2,661,636. |
| e                                                                                                             | 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  | 2,661,636. |
| 4                                                                                                             | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)   | 4  | 39,925.    |
| 5                                                                                                             | <b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5  | 2,621,711. |
| 6                                                                                                             | <b>Minimum investment return.</b> Enter 5% of line 5                                                        | 6  | 131,086.   |

**Part XI**

**Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

|    |                                                                                                           |    |          |
|----|-----------------------------------------------------------------------------------------------------------|----|----------|
| 1  | Minimum investment return from Part X, line 6                                                             | 1  | 131,086. |
| 2a | Tax on investment income for 2015 from Part VI, line 5                                                    | 2a | 5,033.   |
| b  | Income tax for 2015. (This does not include the tax from Part VI.)                                        | 2b | 1,040.   |
| c  | Add lines 2a and 2b                                                                                       | 2c | 6,073.   |
| 3  | Distributable amount before adjustments. Subtract line 2c from line 1                                     | 3  | 125,013. |
| 4  | Recoveries of amounts treated as qualifying distributions                                                 | 4  | 0.       |
| 5  | Add lines 3 and 4                                                                                         | 5  | 125,013. |
| 6  | Deduction from distributable amount (see instructions)                                                    | 6  | 0.       |
| 7  | <b>Distributable amount as adjusted.</b> Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7  | 125,013. |

**Part 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 | 151,468. |
| 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                                                                                            | Suitability test (prior IRS approval required)                                                                                    | 3a |          |
| b                                                                                            | Cash distribution test (attach the required schedule)                                                                             | 3b |          |
| 4                                                                                            | <b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4                 | 4  | 151,468. |
| 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                                                                                            | <b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4                                                             | 6  | 151,468. |

**Note.** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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**Part XIII Undistributed Income** (see instructions)

|                                                                                                                                                                            | (a)<br>Corpus | (b)<br>Years prior to 2014 | (c)<br>2014 | (d)<br>2015 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------------------------|-------------|-------------|
| 1 Distributable amount for 2015 from Part XI, line 7                                                                                                                       |               |                            |             | 125,013.    |
| 2 Undistributed income, if any, as of the end of 2015                                                                                                                      |               |                            |             |             |
| a Enter amount for 2014 only                                                                                                                                               |               |                            | 0.          |             |
| b Total for prior years:                                                                                                                                                   |               | 0.                         |             |             |
| 3 Excess distributions carryover, if any, to 2015:                                                                                                                         |               |                            |             |             |
| a From 2010                                                                                                                                                                | 12,953.       |                            |             |             |
| b From 2011                                                                                                                                                                | 61,799.       |                            |             |             |
| c From 2012                                                                                                                                                                | 60,963.       |                            |             |             |
| d From 2013                                                                                                                                                                | 58,640.       |                            |             |             |
| e From 2014                                                                                                                                                                | 50,669.       |                            |             |             |
| f Total of lines 3a through e                                                                                                                                              | 245,024.      |                            |             |             |
| 4 Qualifying distributions for 2015 from Part XII, line 4: ► \$                                                                                                            | 151,468.      |                            |             |             |
| a Applied to 2014, but not more than line 2a                                                                                                                               |               |                            | 0.          |             |
| b Applied to undistributed income of prior years (Election required - see instructions)                                                                                    |               | 0.                         |             |             |
| c Treated as distributions out of corpus (Election required - see instructions)                                                                                            | 0.            |                            |             |             |
| d Applied to 2015 distributable amount                                                                                                                                     |               |                            |             | 125,013.    |
| e Remaining amount distributed out of corpus                                                                                                                               | 26,455.       |                            |             |             |
| 5 Excess distributions carryover applied to 2015 (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:                                                                                                                   |               |                            |             |             |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5                                                                                                                          | 271,479.      |                            |             |             |
| 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 2014. Subtract line 4a from line 2a. Taxable amount - see instr.                                                                                |               |                            | 0.          |             |
| f Undistributed income for 2015. Subtract lines 4d and 5 from line 1 This amount must be distributed in 2016                                                               |               |                            |             | 0.          |
| 7 Amounts treated as distributions out of 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 2010 not applied on line 5 or line 7                                                                                                 | 12,953.       |                            |             |             |
| 9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a                                                                                              | 258,526.      |                            |             |             |
| 10 Analysis of line 9:                                                                                                                                                     |               |                            |             |             |
| a Excess from 2011                                                                                                                                                         | 61,799.       |                            |             |             |
| b Excess from 2012                                                                                                                                                         | 60,963.       |                            |             |             |
| c Excess from 2013                                                                                                                                                         | 58,640.       |                            |             |             |
| d Excess from 2014                                                                                                                                                         | 50,669.       |                            |             |             |
| e Excess from 2015                                                                                                                                                         | 26,455.       |                            |             |             |



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**Part XV** **Supplementary Information** (continued)

**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

| Recipient<br>Name and address (home or business)                                | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution | Amount          |
|---------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------|-----------------|
| <b>a Paid during the year</b>                                                   |                                                                                                                    |                                      |                                     |                 |
| 24 HOURS OF BOOTY<br>500 EAST MOREHEAD STREET, SUITE 218<br>CHARLOTTE, NC 28202 | NONE                                                                                                               | PC                                   | CANCER RESEARCH                     | 250.            |
| A CHILD'S PLACE<br>601 E 5TH ST # 130<br>CHARLOTTE, NC 28202                    | NONE                                                                                                               | PC                                   | HOMELESS CHILDREN                   | 100.            |
| ARTS & SCIENCE COUNCIL<br>227 W. TRADE STREET<br>CHARLOTTE, NC 28202            | NONE                                                                                                               | PC                                   | PUBLIC ART SUPPORT                  | 3,125.          |
| BECHTLER MUSEUM OF MODERN ART<br>420 SOUTH TRYON STREET<br>CHARLOTTE, NC 28202  | NONE                                                                                                               | NC-GOVERNMENT<br>ENTITY              | PUBLIC ART SUPPORT                  | 900.            |
| BLUMENTHAL PERFORMING ARTS CENTER<br>130 N TRYON ST<br>CHARLOTTE, NC 28202      | NONE                                                                                                               | PC                                   | PUBLIC ART SUPPORT                  | 1,150.          |
| <b>Total</b>                                                                    | <b>SEE CONTINUATION SHEET(S)</b>                                                                                   |                                      |                                     | <b>144,181.</b> |
| <b>b Approved for future payment</b>                                            |                                                                                                                    |                                      |                                     |                 |
| NONE                                                                            |                                                                                                                    |                                      |                                     |                 |
|                                                                                 |                                                                                                                    |                                      |                                     |                 |
|                                                                                 |                                                                                                                    |                                      |                                     |                 |
| <b>Total</b>                                                                    |                                                                                                                    |                                      |                                     | <b>0.</b>       |





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**Part XV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient<br>Name and address (home or business)                              | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution                   | Amount          |
|-------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------------------------|-----------------|
| BIRTHRIGHT ISRAEL FOUNDATION<br>4610 BELLAIRE BOULEVARD<br>BELLAIRE, TX 77401 | NONE                                                                                                               | NC-CHURCH                            | SUPPORT OF THE JEWISH<br>RELIGION                     | 54.             |
| CAROLINAS HEALTHCARE FOUNDATION<br>PO BOX 32861<br>CHARLOTTE, NC 28232        | NONE                                                                                                               | PC                                   | HEALTH RESEARCH                                       | 2,289.          |
| CHABAD OF CHARLESTON<br>734 YORK ST<br>MT. PLEASANT, SC 29464                 | NONE                                                                                                               | PC                                   | SUPPORT OF THE JEWISH<br>RELIGION                     | 5,000.          |
| CHARLOTTE BRIDGE HOME<br>2200 E 7TH ST<br>CHARLOTTE, NC 28204                 | NONE                                                                                                               | PC                                   | SUPPORT FOR VETERANS                                  | 250.            |
| CHARLOTTE FAMILY HOUSING<br>300 HAWTHORNE LANE<br>CHARLOTTE, NC 28204         | NONE                                                                                                               | PC                                   | HOUSING FOR THE NEEDY                                 | 360.            |
| CHARLOTTE JEWISH DAY SCHOOL<br>5007 PROVIDENCE RD<br>CHARLOTTE, NC 28226      | NONE                                                                                                               | PC                                   | SUPPORT OF EDUCATIONAL<br>SERVICES                    | 500.            |
| CHILD CARE RESOURCES<br>4601 PARK ROAD, SUITE 500<br>CHARLOTTE, NC 28209      | NONE                                                                                                               | PC                                   | PROVIDE CHILD CARE FOR<br>UNDERPRIVILEGED<br>FAMILIES | 1,000.          |
| CHILDRENS THEATER<br>300 E. 7TH STREET<br>CHARLOTTE, NC 28202                 | NONE                                                                                                               | PC                                   | SUPPORT FOR THE ARTS                                  | 250.            |
| CONGREGATION B'NAI SHALOM<br>117 E MAIN ST<br>WESTBOROUGH, MA 01581           | NONE                                                                                                               | NC-CHURCH                            | SUPPORT CHURCH'S<br>MISSION                           | 108.            |
| COMMUNITY BUILDING INSTITUTE<br>127 S. HIGHLAND ST<br>ARLINGTON, VA 22204     | NONE                                                                                                               | PC                                   | HELPING COMMUNITIES<br>SOLVE PROBLEMS                 | 100.            |
| <b>Total from continuation sheets</b>                                         |                                                                                                                    |                                      |                                                       | <b>138,656.</b> |

**THE MARC & MATTYE SILVERMAN FAMILY  
FOUNDATION**

56-1678118

**Part XV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient<br>Name and address (home or business)                              | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution                   | Amount          |
|-------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------------------------|-----------------|
| BIRTHRIGHT ISRAEL FOUNDATION<br>4610 BELLAIRE BOULEVARD<br>BELLAIRE, TX 77401 | NONE                                                                                                               | NC-CHURCH                            | SUPPORT OF THE JEWISH<br>RELIGION                     | 54.             |
| CAROLINAS HEALTHCARE FOUNDATION<br>PO BOX 32861<br>CHARLOTTE, NC 28232        | NONE                                                                                                               | PC                                   | HEALTH RESEARCH                                       | 2,289.          |
| CHABAD OF CHARLESTON<br>734 YORK ST<br>MT. PLEASANT, SC 29464                 | NONE                                                                                                               | PC                                   | SUPPORT OF THE JEWISH<br>RELIGION                     | 5,000.          |
| CHARLOTTE BRIDGE HOME<br>2200 E 7TH ST<br>CHARLOTTE, NC 28204                 | NONE                                                                                                               | PC                                   | SUPPORT FOR VETERANS                                  | 250.            |
| CHARLOTTE FAMILY HOUSING<br>300 HAWTHORNE LANE<br>CHARLOTTE, NC 28204         | NONE                                                                                                               | PC                                   | HOUSING FOR THE NEEDY                                 | 360.            |
| CHARLOTTE JEWISH DAY SCHOOL<br>5007 PROVIDENCE RD<br>CHARLOTTE, NC 28226      | NONE                                                                                                               | PC                                   | SUPPORT OF EDUCATIONAL<br>SERVICES                    | 500.            |
| CHILD CARE RESOURCES<br>4601 PARK ROAD, SUITE 500<br>CHARLOTTE, NC 28209      | NONE                                                                                                               | PC                                   | PROVIDE CHILD CARE FOR<br>UNDERPRIVILEGED<br>FAMILIES | 1,000.          |
| CHILDRENS THEATER<br>300 E. 7TH STREET<br>CHARLOTTE, NC 28202                 | NONE                                                                                                               | PC                                   | SUPPORT FOR THE ARTS                                  | 250.            |
| CONGREGATION B'NAI SHALOM<br>117 E MAIN ST<br>WESTBOROUGH, MA 01581           | NONE                                                                                                               | NC-CHURCH                            | SUPPORT CHURCH'S<br>MISSION                           | 108.            |
| COMMUNITY BUILDING INSTITUTE<br>127 S. HIGHLAND ST<br>ARLINGTON, VA 22204     | NONE                                                                                                               | PC                                   | HELPING COMMUNITIES<br>SOLVE PROBLEMS                 | 100.            |
| <b>Total from continuation sheets</b>                                         |                                                                                                                    |                                      |                                                       | <b>138,656.</b> |

THE MARC & MATTYE SILVERMAN FAMILY  
FOUNDATION

56-1678118

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

| Recipient<br>Name and address (home or business)                           | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution                                          | Amount  |
|----------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--------------------------------------|------------------------------------------------------------------------------|---------|
| COVENANT PRESBYTERIAN CHURCH<br>1000 E MOREHEAD ST<br>CHARLOTTE, NC 28204  | NONE                                                                                                               | NC-CHURCH                            | SUPPORT CHURCH'S<br>MISSION                                                  | 100.    |
| CRISIS ASSISTANCE MINISTRY<br>500-A SPRATT STREET<br>CHARLOTTE, NC 28206   | NONE                                                                                                               | PC                                   | FINANCIAL ASSISTANCE<br>TO THOSE IN NEED                                     | 250.    |
| DRESS FOR SUCCESS<br>32 EAST 31ST STREET, 7TH FLOOR<br>NEW YORK, NY 10016  | NONE                                                                                                               | PC                                   | PROMOTE ECONOMIC<br>INDEPENDENCE FOR WOMEN                                   | 100.    |
| DUKE BRAIN TUMOR CENTER<br>DUMC 3828<br>DURHAM, NC 27710                   | NONE                                                                                                               | PC                                   | DAVID SILVERMAN<br>RESEARCH ENDOWMENT                                        | 10,000. |
| FOUNDATION FOR THE CAROLINAS<br>217 S. TRYON STREET<br>CHARLOTTE, NC 28202 | NONE                                                                                                               | PC                                   | BUILDING PLEDGE                                                              | 25,200. |
| FOUNDATION OF SHALOM PARK<br>5007 PROVIDENCE ROAD<br>CHARLOTTE, NC 28226   | NONE                                                                                                               | PC                                   | FACILITIES MANAGEMENT                                                        | 20,000. |
| FREEDOM SCHOOLS PARTNERS<br>PO BOX 37363<br>CHARLOTTE, NC 28237            | NONE                                                                                                               | PC                                   | SUPPORT OF EDUCATIONAL<br>SERVICES                                           | 250.    |
| FRIENDSHIP TRAYS<br>2401 DISTRIBUTION STREET<br>CHARLOTTE, NC 28203        | NONE                                                                                                               | PC                                   | FEED THE HUNGRY                                                              | 100.    |
| GOOD FRIENDS<br>4600 PARK ROAD, SUITE 300<br>CHARLOTTE, NC 28209           | NONE                                                                                                               | PC                                   | PROVIDE FINANCIAL<br>ASSISTANCE TO<br>DISADVANTAGED IN<br>MECKLENBURG COUNTY | 1,190.  |
| HADASSAH<br>4100 ROTUNDA ROAD<br>CHARLOTTE, NC 28226                       | NONE                                                                                                               | PC                                   | PROMOTE THE UNITY<br>JEWISH PEOPLE                                           | 100.    |
| Total from continuation sheets                                             |                                                                                                                    |                                      |                                                                              |         |

**THE MARC & MATTYE SILVERMAN FAMILY  
FOUNDATION**

56-1678118

**Part XV Supplementary Information**

| <b>3 Grants and Contributions Paid During the Year (Continuation)</b>                     |                                                                                                                    |                                      |                                                                |        |
|-------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--------------------------------------|----------------------------------------------------------------|--------|
| Recipient<br>Name and address (home or business)                                          | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution                            | Amount |
| HABITAT FOR HUMANITY<br>3815 LATROBE DRIVE<br>CHARLOTTE, NC 28210                         | NONE                                                                                                               | PC                                   | SUPPORT FOR NEEDY                                              | 100.   |
| HEBREW CEMETERY ASSOCIATION OF<br>CHARLOTTE INC<br>PO BOX 35129<br>CHARLOTTE, NC 28235    | NONE                                                                                                               | PC                                   | MAINTENANCE OF<br>DIGNIFIED AND<br>SANCTIFIED RESTING<br>PLACE | 2,572. |
| HILLEL NORTH CAROLINA<br>210 W CAMERON AVE<br>CHAPEL HILL, NC 27516                       | NONE                                                                                                               | PC                                   | JEWISH EDUCATION                                               | 360.   |
| HORNET'S NEST JEWISH WAR VETERAN'S<br>POST<br>5101 PROVIDENCE ROAD<br>CHARLOTTE, NC 28226 | NONE                                                                                                               | PC                                   | SUPPORT FOR VETERANS                                           | 180.   |
| HOSPICE AT CHARLOTTE<br>1420 E. 7TH STREET<br>CHARLOTTE, NC 28204                         | NONE                                                                                                               | PC                                   | END OF LIFE CARE                                               | 100.   |
| HOSPICE&PALLIATIVE CARE- CABARRUS<br>COUNT<br>5003 HOSPICE LN<br>KANNAPOLIS, NC 28081     | NONE                                                                                                               | PC                                   | END OF LIFE CARE                                               | 50.    |
| HUMANE SOCIETY OF CHARLOTTE<br>2700 TOOMEY AVE<br>CHARLOTTE, NC 28203                     | NONE                                                                                                               | PC                                   | PROVIDE A HOME TO<br>HOMELESS ANIMALS                          | 100.   |
| INTERNATIONAL RESCUE COMMITTEE<br>122 EAST 42ND STREET<br>NEW YORK, NY 10168              | NONE                                                                                                               | PC                                   | HUMANITARIANISM                                                | 360.   |
| ISRAEL GUIDE DOG CENTER<br>968 EASTON RD. - SUITE H<br>WARRINGTON, PA 18976               | NONE                                                                                                               | PC                                   | SUPPORT TRAINING                                               | 108.   |
| JEWISH FAMILY SERVICES<br>5007 PROVIDENCE ROAD<br>CHARLOTTE, NC 28226                     | NONE                                                                                                               | PC                                   | FAMILY PROFESSIONAL<br>COUNSELING                              | 554.   |
| <b>Total from continuation sheets</b>                                                     |                                                                                                                    |                                      |                                                                |        |

**THE MARC & MATTYE SILVERMAN FAMILY  
FOUNDATION**

56-1678118

**Part XV Supplementary Information**

| <b>3 Grants and Contributions Paid During the Year (Continuation)</b>                    |                                                                                                                    |                                      |                                                                                    |         |
|------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--------------------------------------|------------------------------------------------------------------------------------|---------|
| Recipient<br>Name and address (home or business)                                         | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution                                                | Amount  |
| JEWISH FEDERATION OF GREATER<br>CHARLOTTE<br>5007 PROVIDENCE ROAD<br>CHARLOTTE, NC 28226 | NONE                                                                                                               | PC                                   | LION OF JUDAH                                                                      | 18,922. |
| JOURNEycare HOSPICE & PALLIATIVE CARE<br>405 LAKE ZURICH ROAD<br>BARRINGTON, IL 60010    | NONE                                                                                                               | PC                                   | END OF LIFE CARE                                                                   | 50.     |
| LEADERSHIP CHARLOTTE<br>1900 SELWYN AVE<br>CHARLOTTE, NC 28207                           | NONE                                                                                                               | PC                                   | EDUCATION                                                                          | 50.     |
| LEEDS ARTS COUNCIL<br>8140 PARKWAY DR<br>LEEDS, AL 35094                                 | NONE                                                                                                               | PC                                   | SUPPORT FOR ARTS                                                                   | 25.     |
| LEVINE-SKLUT JUDAIC LIBRARY<br>5007 PROVIDENCE ROAD, SUITE 107<br>CHARLOTTE, NC 28226    | NONE                                                                                                               | PC                                   | LIBRARY                                                                            | 100.    |
| LEVINE JEWISH COMMUNITY CENTER<br>5007 PROVIDENCE ROAD<br>CHARLOTTE, NC 28226            | NONE                                                                                                               | PC                                   | BUTTERFLY PROJECT FOR<br>MEMORIAL TO CHILDREN<br>THAT DIED DURING THE<br>HOLOCAUST | 1,700.  |
| LEVINE MUSEUM OF THE NEW SOUTH<br>200 E. SEVENTH STREET<br>CHARLOTTE, NC 28202           | NONE                                                                                                               | PC                                   | HISTORY MUSEUM                                                                     | 250.    |
| LOAVES AND FISHES<br>PO BOX 11234<br>CHARLOTTE, NC 28220                                 | NONE                                                                                                               | PC                                   | FEED THE HUNGRY                                                                    | 180.    |
| MCCOLL CENTER<br>721 N. TRYON STREET<br>CHARLOTTE, NC 28202                              | NONE                                                                                                               | PC                                   | SUPPORT FOR THE ARTS                                                               | 1,000.  |
| MEN'S SHELTER OF CHARLOTTE<br>1210 N TRYON ST<br>CHARLTOTE, NC 28206                     | NONE                                                                                                               | PC                                   | SUPPORT OF HOMELESS<br>MEN                                                         | 180.    |
| <b>Total from continuation sheets</b>                                                    |                                                                                                                    |                                      |                                                                                    |         |

THE MARC & MATTYE SILVERMAN FAMILY  
FOUNDATION

56-1678118

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

| Recipient<br>Name and address (home or business)                                           | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution                         | Amount  |
|--------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------------------------------|---------|
| MILESTONESNYC<br>286 FIFTH AVENUE SUITE H<br>NEW YORK, NY 10001                            | NONE                                                                                                               | PC                                   | MENTAL HEALTH SUPPORT                                       | 50.     |
| MINT MUSEUM<br>2730 RANDOLPH ROAD<br>CHARLOTTE, NC 28207                                   | NONE                                                                                                               | PC                                   | CAPITAL CAMPAIGN - ART<br>MUSEUM                            | 16,120. |
| MINT MUSEUM - FOUNDERS CIRCLE LTD<br>500 SOUTH TRYON STREET<br>CHARLOTTE, NC 28202         | NONE                                                                                                               | PC                                   | PROMOTE APPRECIATION<br>OF CONTEMPORARY CRAFT<br>AND DESIGN | 100.    |
| MISTY MEADOWS MITEY RIDERS INC.<br>455 PROVIDENCE ROAD SOUTH<br>WEDDINGTON, NC 28173       | NONE                                                                                                               | PC                                   | THERAPEUTIC RIDING<br>PROGRAM                               | 50.     |
| NC MEDASSIST<br>601 E 5TH ST, SUITE 350<br>CHARLOTTE, NC 28202                             | NONE                                                                                                               | PC                                   | DISPENSING HOPE FOR<br>THE UNINSURED                        | 200.    |
| OHIO WESLEYAN UNIVERSITY<br>61 S SANDUSKY ST<br>DELAWARE, OH 43015                         | NONE                                                                                                               | PC                                   | SUPPORT OF EDUCATIONAL<br>SERVICES                          | 100.    |
| PLANNED PARENTHOOD<br>4822 ALBEMARLE RD., SUITE 104<br>CHARLOTTE, NC 28205                 | NONE                                                                                                               | PC                                   | SEXUAL AND<br>REPRODUCTIVE HEALTH<br>CARE ADVOCATE SUPPORT  | 500.    |
| QUEENS UNIVERSITY OF CHARLOTTE<br>1900 SELWYN AVE<br>CHARLOTTE, NC 28274                   | NONE                                                                                                               | PC                                   | SUPPORT OF EDUCATIONAL<br>SERVICES                          | 750.    |
| READING PARTNER<br>180 GRAND AVE SUITE 800<br>OAKLAND, CA 94612                            | NONE                                                                                                               | PC                                   | CHILD LITERACY                                              | 100.    |
| SECOND HARVEST FOOD BANK OF METROLINA<br>INC<br>500 SPRATT ST STE B<br>CHARLOTTE, NC 28206 | NONE                                                                                                               | PC                                   | FEED THE HUNGRY                                             | 100.    |
| Total from continuation sheets                                                             |                                                                                                                    |                                      |                                                             |         |

THE MARC & MATTYE SILVERMAN FAMILY  
FOUNDATION

56-1678118

Part XV Supplementary Information

| 3 Grants and Contributions Paid During the Year (Continuation)                           |                                                                                                                    |                                      |                                                                                                              |        |
|------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--------------------------------------|--------------------------------------------------------------------------------------------------------------|--------|
| Recipient<br>Name and address (home or business)                                         | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution                                                                          | Amount |
| SIERRA CLUB FOUNDATION<br>85 SECOND STREET, SUITE 750<br>SAN FRANCISCO, CA 94105         | NONE                                                                                                               | PC                                   | ANNUAL PLEDGE -<br>ENVIRONMENT                                                                               | 100.   |
| SOUTHERN POVERTY LAW CENTER<br>400 WASHINGTON AVE<br>MONTGOMERY, AL 36104                | NONE                                                                                                               | PC                                   | FIGHTING HATE AND<br>BIGOTRY, AND TO<br>SEEKING JUSTICE FOR<br>THE MOST VULNERABLE<br>MEMBERS OF OUR SOCIETY | 100.   |
| ST. PETERS EPISCOPAL CHURCH<br>115 W 7TH ST<br>CHARLOTTE, NC 28202                       | NONE                                                                                                               | NC-CHURCH                            | RELIGIOUS SUPPORT                                                                                            | 1,000. |
| SYNAGOGUE EMANU-EL<br>5 WINDSOR DRIVE<br>CHARLESTON, SC 29407                            | NONE                                                                                                               | PC                                   | SUPPORT OF TEMPLE'S<br>MISSION                                                                               | 25.    |
| TEEN HEALTH CONNECTION<br>3541 RANDOLPH RD #206<br>CHARLOTTE, NC 28211                   | NONE                                                                                                               | PC                                   | MEDICAL AND MENTAL<br>HEALTH SUPPORT                                                                         | 100.   |
| TEMPLE BETH EL<br>5101 PROVIDENCE ROAD<br>CHARLOTTE, NC 28226                            | NONE                                                                                                               | NC-CHURCH                            | SUPPORT OF TEMPLE'S<br>MISSION                                                                               | 6,578. |
| TEMPLE ISRAEL<br>4901 PROVIDENCE ROAD<br>CHARLOTTE, NC 28226                             | NONE                                                                                                               | NC-CHURCH                            | SUPPORT OF TEMPLE'S<br>MISSION                                                                               | 5,654. |
| THE CHARLESTON ACADEMY OF MUSIC<br>189 RUTLEDGE AVE<br>CHARLESTON, SC 29403              | NONE                                                                                                               | PC                                   | SUPPORT FOR MUSIC                                                                                            | 50.    |
| THE FOUNDATION AT UNC-CHARLOTTE<br>9201 UNIVERSITY CITY BLVD<br>CHARLOTTE, NC 28223-0001 | NONE                                                                                                               | PC                                   | SUPPORT OF EDUCATIONAL<br>SERVICES                                                                           | 2,000. |
| THE GREATER CHARLOTTE CULTURAL TRUST<br>217 S. TRYON STREET<br>CHARLOTTE, NC 28202       | NONE                                                                                                               | PC                                   | SUPPORT OF ARTS AND<br>SCIENCE COUNCIL<br>THROUGH PLANNED<br>GIVING/ENDOWMENT                                | 7,000. |
| Total from continuation sheets                                                           |                                                                                                                    |                                      |                                                                                                              |        |

**THE MARC & MATTYE SILVERMAN FAMILY  
FOUNDATION**

56-1678118

**Part XV Supplementary Information**

| <b>3 Grants and Contributions Paid During the Year (Continuation)</b>                  |                                                                                                                    |                                      |                                                        |        |
|----------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--------------------------------------|--------------------------------------------------------|--------|
| Recipient                                                                              | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution                    | Amount |
| Name and address (home or business)                                                    |                                                                                                                    |                                      |                                                        |        |
| THE JOE MARTIN ALS FOUNDATION<br>100 N TRYON ST # 3420<br>CHARLOTTE, NC 28202          | NONE                                                                                                               | PC                                   | MEDICAL RESEARCH                                       | 100.   |
| THE SPOKES GROUP<br>8058 CORPORATE CENTER DRIVE, SUITE 200<br>CHARLOTTE, NC 28226      | NONE                                                                                                               | PC                                   | PROVIDING BICYCLES AND<br>HELMETS TO NEEDY<br>CHILDREN | 100.   |
| THE WEINSTEIN HOSPICE<br>3150 HOWELL MILL RD NW<br>ATLANTA, GA 30327                   | NONE                                                                                                               | PC                                   | END OF LIFE CARE                                       | 36.    |
| TREES CHARLOTTE FOUNDATION<br>701 TUCKASEEGEE ROAD<br>CHARLOTTE, NC 28208              | NONE                                                                                                               | PC                                   | GENERAL SUPPORT                                        | 1,000. |
| UNC CENTER FOR PUBLIC TELEVISION<br>P.O. BOX 14900<br>RESEARCH TRIANGLE PARK, NC 27709 | NONE                                                                                                               | PC                                   | PUBLIC TELEVISION                                      | 100.   |
| UNITED STATES HOLOCAUST MEMORIAL<br>100 RAOUL WALLENBERG PL SW<br>WASHINGTON, DC 20024 | NONE                                                                                                               | PC                                   | SUPPORT OF MUSEUM<br>ACTIVITIES                        | 36.    |
| WFAE<br>8801 JM KEYNES DR., SUITE 91<br>CHARLOTTE, NC 28262                            | NONE                                                                                                               | PC                                   | PUBLIC RADIO                                           | 1,000. |
| WOMEN'S COLLECTIVE GIVING NETWORK<br>101 N TRYON ST STE 1900<br>CHARLOTTE, NC 28246    | NONE                                                                                                               | PC                                   | PUBLIC SUPPORT                                         | 65.    |
| WOMEN'S IMPACT FUND<br>217 S. TRYON ST.<br>CHARLOTTE, NC 28202                         | NONE                                                                                                               | PC                                   | FEMALE PHILANTHROPY                                    | 1,400. |
|                                                                                        |                                                                                                                    |                                      |                                                        |        |
| <b>Total from continuation sheets</b>                                                  |                                                                                                                    |                                      |                                                        |        |

**Schedule B**

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury  
Internal Revenue Service**Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and  
its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

**2015**

Name of the organization

THE MARC & MATTYE SILVERMAN FAMILY  
FOUNDATION

Employer identification number

56-1678118

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

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

Name of organization  
**THE MARC & MATTYE SILVERMAN FAMILY  
 FOUNDATION**

Employer identification number

**56-1678118**

**Part I Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                            | (c)<br>Total contributions | (d)<br>Type of contribution                                                                                                                                        |
|------------|------------------------------------------------------------------------------|----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1          | MARC & MATTYE SILVERMAN<br><br>6707-C FAIRVIEW RD<br><br>CHARLOTTE, NC 28210 | \$ 27,640.                 | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input checked="" type="checkbox"/><br>(Complete Part II for noncash contributions) |
|            |                                                                              |                            | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions)            |
|            |                                                                              |                            | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions)            |
|            |                                                                              |                            | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions)            |
|            |                                                                              |                            | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions)            |
|            |                                                                              |                            | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions)            |
|            |                                                                              |                            | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II for noncash contributions)            |

Employer identification number

56-1678118

## Part II

[illegible]

Name of organization

THE MARC & MATTYE SILVERMAN FAMILY  
FOUNDATION

Employer identification number

56-1678118

**Part III**

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 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.<br>from<br>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 |
|                           |                                         |                 |                                          |
|                           |                                         |                 |                                          |
|                           |                                         |                 |                                          |
|                           | (e) Transfer of gift                    |                 |                                          |
|                           | Transferee's name, address, and ZIP + 4 |                 | Relationship of transferor to transferee |
|                           |                                         |                 |                                          |
|                           |                                         |                 |                                          |
|                           |                                         |                 |                                          |
|                           | (e) Transfer of gift                    |                 |                                          |
|                           | Transferee's name, address, and ZIP + 4 |                 | Relationship of transferor to transferee |
|                           |                                         |                 |                                          |
|                           |                                         |                 |                                          |
|                           |                                         |                 |                                          |
|                           | (e) Transfer of gift                    |                 |                                          |
|                           | Transferee's name, address, and ZIP + 4 |                 | Relationship of transferor to transferee |
|                           |                                         |                 |                                          |
|                           |                                         |                 |                                          |
|                           |                                         |                 |                                          |
|                           | (e) Transfer of gift                    |                 |                                          |
|                           | Transferee's name, address, and ZIP + 4 |                 | Relationship of transferor to transferee |
|                           |                                         |                 |                                          |
|                           |                                         |                 |                                          |
|                           |                                         |                 |                                          |

## FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

| SOURCE                                   | (A)<br>REVENUE<br>PER BOOKS | (B)<br>NET INVESTMENT<br>INCOME | (C)<br>ADJUSTED<br>NET INCOME |
|------------------------------------------|-----------------------------|---------------------------------|-------------------------------|
| INTEREST INCOME - ENTERPRISE<br>PRODUCTS | 18.                         | 18.                             |                               |
| INTEREST INCOME - NCBT                   | 5.                          | 5.                              |                               |
| INTEREST INCOME - WELLS FARGO<br>- 4691  | 17,284.                     | 17,284.                         |                               |
| INTEREST INCOME - WELLS FARGO<br>- 6233  | 26.                         | 26.                             |                               |
| INTEREST INCOME - WELLS FARGO<br>- 9886  | 0.                          | 0.                              |                               |
| TOTAL TO PART I, LINE 3                  | 17,333.                     | 17,333.                         |                               |

## FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

| SOURCE                                                | GROSS<br>AMOUNT | CAPITAL<br>GAINS<br>DIVIDENDS | (A)<br>REVENUE<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME |
|-------------------------------------------------------|-----------------|-------------------------------|-----------------------------|-----------------------------------|-------------------------------|
| DIVIDENDS ON<br>CORPORATE STOCKS -<br>WACHOVIA - 6233 | 111,048.        | 78,517.                       | 32,531.                     | 32,531.                           |                               |
| DIVIDENDS ON<br>CORPORATE STOCKS -<br>WACHOVIA - 9886 | 1,386.          | 0.                            | 1,386.                      | 1,386.                            |                               |
| TO PART I, LINE 4                                     | 112,434.        | 78,517.                       | 33,917.                     | 33,917.                           |                               |

## FORM 990-PF OTHER INCOME STATEMENT 3

| DESCRIPTION                           | (A)<br>REVENUE<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME |
|---------------------------------------|-----------------------------|-----------------------------------|-------------------------------|
| 1231 GAIN FROM K-1                    | 238.                        | 238.                              |                               |
| ORDINARY INCOME FROM K-1              | 10,175.                     | 10,175.                           |                               |
| ORDINARY INCOME FROM K-1              | 28.                         | 28.                               |                               |
| TOTAL TO FORM 990-PF, PART I, LINE 11 | 10,441.                     | 10,441.                           |                               |

## FORM 990-PF

## ACCOUNTING FEES

## STATEMENT 4

| DESCRIPTION                  | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |
|------------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| PROFESSIONAL FEES            | 6,550.                       | 0.                                |                               | 6,550.                        |
| TO FORM 990-PF, PG 1, LN 16B | 6,550.                       | 0.                                |                               | 6,550.                        |

## FORM 990-PF

## OTHER PROFESSIONAL FEES

## STATEMENT 5

| DESCRIPTION                          | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |
|--------------------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| INVESTMENT MANAGEMENT FEES<br>- 6233 | 6,245.                       | 6,245.                            |                               | 0.                            |
| INVESTMENT MANAGEMENT FEES<br>- 4691 | 2,748.                       | 2,748.                            |                               | 0.                            |
| INVESTMENT MANAGEMENT FEES<br>- 9886 | 602.                         | 602.                              |                               | 0.                            |
| TO FORM 990-PF, PG 1, LN 16C         | 9,595.                       | 9,595.                            |                               | 0.                            |

## FORM 990-PF

## TAXES

## STATEMENT 6

| DESCRIPTION                 | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |
|-----------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| EXCISE TAXES                | 8,774.                       | 0.                                |                               | 0.                            |
| TO FORM 990-PF, PG 1, LN 18 | 8,774.                       | 0.                                |                               | 0.                            |

## FORM 990-PF

## OTHER EXPENSES

## STATEMENT 7

| DESCRIPTION                 | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |
|-----------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| DINING                      | 388.                         | 0.                                |                               | 388.                          |
| MISCELLANEOUS               | 349.                         | 0.                                |                               | 349.                          |
| TO FORM 990-PF, PG 1, LN 23 | 737.                         | 0.                                |                               | 737.                          |

## FORM 990-PF

## U.S. AND STATE/CITY GOVERNMENT OBLIGATIONS

## STATEMENT 8

| DESCRIPTION                                                  | U.S.<br>GOV'T | OTHER<br>GOV'T | BOOK VALUE | FAIR MARKET<br>VALUE |
|--------------------------------------------------------------|---------------|----------------|------------|----------------------|
| FEDERAL HOME LN MTG CORP 2.375% DUE<br>1/13/22               | X             |                | 30,243.    | 31,431.              |
| FEDERAL HOME LN MTG CORP 3.75% DUE<br>3/27/19                | X             |                | 22,850.    | 21,638.              |
| FEDERAL HOME LN MTG CORP NOTES .75%<br>DUE 01/12/18          | X             |                | 24,940.    | 24,990.              |
| VIRGINIA ST PUB BLDG AUTH PUB FACS<br>REV 4.00% DUE 08/01/20 |               | X              | 22,136.    | 22,023.              |
| VIRGINIA BEACH VA PUBLIC<br>IMPROVEMENT BOND                 |               | X              | 24,899.    | 27,752.              |
| NORTH CAROLINA EASTN MUN PWR AGY<br>6.217% DUE 01/01/17      |               | X              | 11,099.    | 10,393.              |
| NEW YORK ST MTG AGY HMOWNR MTG REV<br>2.58% DUE 10/01/20     |               | X              | 24,648.    | 25,496.              |
| IRVING TX INDPT SCH DIST 3.00% DUE<br>02/15/21               |               | X              | 32,250.    | 32,240.              |
| TOTAL U.S. GOVERNMENT OBLIGATIONS                            |               |                | 78,033.    | 78,059.              |
| TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS             |               |                | 115,032.   | 117,904.             |
| TOTAL TO FORM 990-PF, PART II, LINE 10A                      |               |                | 193,065.   | 195,963.             |

## FORM 990-PF

## CORPORATE STOCK

## STATEMENT 9

| DESCRIPTION                                          | BOOK VALUE | FAIR MARKET<br>VALUE |
|------------------------------------------------------|------------|----------------------|
| DEUTSCH BANK 7.60% CONTINGENT CAP III DUE<br>2/20/18 | 74,666.    | 74,910.              |
| BANK OF AMERICA 6.2% PFD NON CUM SER CC PERP MTY     | 74,850.    | 78,150.              |
| VANGUARD SPECIALIZED FUNDS DIVIDEND GROWTH           | 235,883.   | 254,673.             |
| IVA WORLDWIDE FUND CLASS I                           | 76,733.    | 83,299.              |
| BLACKROCK GLOBAL OPPORTUNITIES EQUITY TRUST          | 145,591.   | 121,176.             |
| HARRIS ASSOC INVT TR OAKMARK INTL FUND               | 201,531.   | 164,706.             |
| HARRIS ASSOC INVT TR OAKMARK INTL FUND               | 257,671.   | 266,466.             |
| TOTAL TO FORM 990-PF, PART II, LINE 10B              | 1,066,925. | 1,043,380.           |

## FORM 990-PF

## CORPORATE BONDS

## STATEMENT 10

| DESCRIPTION                                          | BOOK VALUE | FAIR MARKET VALUE |
|------------------------------------------------------|------------|-------------------|
| CATERPILLAR FIN ESRV CORP 5.450% DUE 4/15/18         | 23,096.    | 21,739.           |
| APPLE INC 3.45% DUE 05/06/24                         | 25,168.    | 26,731.           |
| AT&T INC 4.45% DUE 05/15/21                          | 21,519.    | 21,844.           |
| BERKSHIRE HATHAWAY 5.4% DUE 05/15/18                 | 29,607.    | 27,196.           |
| BURLINGTON NORTH SANTA SENIOR NOTES DUE 03/15/18     | 29,885.    | 27,033.           |
| COMCAST CORP 5.4% DUE 05/15/18                       | 24,178.    | 22,677.           |
| 3M CO SR UNSECURED 1.375% DUE 09/29/16               | 25,192.    | 25,084.           |
| VERIZON COMMUNICATIONS 4.5% DUE 09/15/20             | 21,730.    | 22,122.           |
| TARGET CORP 6.000% DUE 01/15/18                      | 23,130.    | 21,778.           |
| GENERAL ELEC CAP CORP MED 3.1% DUE 01/09/33          | 24,780.    | 26,587.           |
| MICROSOFT CORP SR UNSECURED                          | 20,360.    | 21,069.           |
| DUKE ENERGY CORP 3.95% DUE 10/15/33                  | 21,917.    | 21,249.           |
| AMERICAN EXPRESS CREDIT INTERNOTES 2.25% DUE 8/15/19 | 20,272.    | 20,195.           |
| TOTAL TO FORM 990-PF, PART II, LINE 10C              | 310,834.   | 305,304.          |

## FORM 990-PF

## OTHER INVESTMENTS

## STATEMENT 11

| DESCRIPTION                        | VALUATION METHOD | BOOK VALUE | FAIR MARKET VALUE |
|------------------------------------|------------------|------------|-------------------|
| PROLOGIS INC                       | COST             | 4,529.     | 4,860.            |
| DOW CHEMICAL COMPANY               | COST             | 4,919.     | 5,239.            |
| PROCTER & GAMBLE CO                | COST             | 6,801.     | 6,996.            |
| MERCK & CO INC NEW                 | COST             | 7,667.     | 7,778.            |
| METLIFE INC                        | COST             | 3,102.     | 2,988.            |
| MICROSOFT CORP                     | COST             | 6,483.     | 6,628.            |
| OCCIDENTAL PETE CORP               | COST             | 2,882.     | 2,942.            |
| AMERIPRISE FINANCIAL               | COST             | 4,591.     | 4,230.            |
| AMERICAN FINL GROUP INC            | COST             | 3,944.     | 3,941.            |
| PFIZER INCORPORATED                | COST             | 7,437.     | 6,906.            |
| PHILIP MORRIS INTERNATIONAL INC    | COST             | 5,407.     | 5,985.            |
| PNC FINANCIAL SERVICES GROUP       | COST             | 2,757.     | 2,537.            |
| ARTHUR J GALLAGHER & CO            | COST             | 2,624.     | 2,980.            |
| PRUDENTIAL FINANCIAL INC           | COST             | 4,545.     | 4,261.            |
| QUALCOMM INC                       | COST             | 3,317.     | 3,478.            |
| SOUTH ST CORP                      | COST             | 77,613.    | 80,288.           |
| FIDELITY NATIONAL INFORMATION SVCS | COST             | 3,256.     | 3,419.            |
| FIFTH THIRD BANCORP                | COST             | 2,968.     | 2,704.            |
| LOCKHEED MARTIN CORP               | COST             | 6,219.     | 6,424.            |
| FIRSTENERGY CORP                   | COST             | 2,951.     | 3,237.            |
| GENERAL ELECTRIC COMPANY           | COST             | 6,818.     | 7,280.            |
| GENERAL MOTORS CO                  | COST             | 3,533.     | 3,426.            |
| WAL-MART STORES INC                | COST             | 4,881.     | 5,342.            |
| HCP INC                            | COST             | 2,375.     | 2,118.            |
| HOME DEPOT INC                     | COST             | 6,688.     | 6,938.            |
| HP INC                             | COST             | 2,966.     | 3,560.            |
| INTEL CORP                         | COST             | 5,086.     | 5,014.            |
| INTERNATIONAL PAPER CO             | COST             | 4,003.     | 4,350.            |

STATEMENT(S) 10, 11

## THE MARC &amp; MATTYE SILVERMAN FAMILY FOUND

56-1678118

|                                        |      |          |          |
|----------------------------------------|------|----------|----------|
| INVESCO LTD                            | COST | 3,214.   | 3,169.   |
| AT&T INC                               | COST | 7,760.   | 8,657.   |
| JOHNSON & JOHNSON                      | COST | 7,088.   | 7,466.   |
| JP MORGAN CAHSE & CO                   | COST | 8,806.   | 8,291.   |
| KAR AUCTION SERVICES INC               | COST | 2,228.   | 2,403.   |
| BLACKROCK INC                          | COST | 4,200.   | 4,427.   |
| CALIFORNIA RES CORP                    | COST | 0.       | 4.       |
| CHEVRON CORPORATION                    | COST | 4,295.   | 4,579.   |
| CISCO SYSTEMS INC                      | COST | 4,793.   | 5,295.   |
| EXXON MOBIL CORP                       | COST | 5,090.   | 5,433.   |
| STEEL DYNAMICS INC                     | COST | 2,286.   | 2,904.   |
| AMERICAN ELECTRIC POWER                | COST | 3,377.   | 3,851.   |
| THOMSPN REUTERS CORP                   | COST | 3,327.   | 3,603.   |
| UNION PACIFIC CORP                     | COST | 2,087.   | 2,227.   |
| US BANCORP NEW                         | COST | 3,976.   | 3,856.   |
| ALTRIA GROUP INC                       | COST | 4,528.   | 4,825.   |
| VERIZON COMMUNICATIONS                 | COST | 4,547.   | 5,138.   |
| AFLAC INC                              | COST | 3,377.   | 3,599.   |
| ABVIE INC                              | COST | 4,130.   | 4,056.   |
| SCHLUMBERGER LTS                       | COST | 2,124.   | 2,286.   |
| ABBOT LABORATORIES                     | COST | 3,330.   | 3,221.   |
| MARATHON PETROLEUM CORP                | COST | 2,490.   | 2,528.   |
| KIMBERLY-CLARK CORP                    | COST | 5,190.   | 5,515.   |
| LIBERTY PROPERTY TRUST                 | COST | 2,570.   | 2,811.   |
| DU PONT E.I. DE NEMOURS AND COMPANY    | COST | 2,574.   | 2,723.   |
| CME GROUP INC                          | COST | 4,854.   | 5,187.   |
| EATON CORP PLC                         | COST | 3,723.   | 4,504.   |
| ELI LILLY & CO                         | COST | 2,622.   | 2,232.   |
| EMERSON ELECTRIC CO                    | COST | 1,792.   | 2,121.   |
| ENTERPRISE PRODUCTS PARTNERS           | COST | <7,090.> | 196,960. |
| MARSH AND MC LENNAN COMPANIES INC      | COST | 3,884.   | 4,377.   |
| WELLS FARGO COMPANY                    | COST | 7,839.   | 7,254.   |
| TOTAL TO FORM 990-PF, PART II, LINE 13 |      | 315,373. | 531,351. |

## FORM 990-PF DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 12

| DESCRIPTION                        | COST OR<br>OTHER BASIS | ACCUMULATED<br>DEPRECIATION | BOOK VALUE |
|------------------------------------|------------------------|-----------------------------|------------|
| COMPUTER                           | 1,602.                 | 1,602.                      | 0.         |
| COMPUTER SCREEN                    | 249.                   | 249.                        | 0.         |
| TOTAL TO FM 990-PF, PART II, LN 14 | 1,851.                 | 1,851.                      | 0.         |

FORM 990-PF

PART VIII - LIST OF OFFICERS, DIRECTORS  
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 13

| NAME AND ADDRESS                                                   | TITLE AND<br>AVRG HRS/WK | COMPEN-<br>SATION | EMPLOYEE<br>BEN PLAN<br>CONTRIB | EXPENSE<br>ACCOUNT |
|--------------------------------------------------------------------|--------------------------|-------------------|---------------------------------|--------------------|
| MATTYE B. SILVERMAN<br>6707-C FAIRVIEW ROAD<br>CHARLOTTE, NC 28210 | PRESIDENT<br>15.00       | 0.                | 0.                              | 0.                 |
| SHARA K. SILVERMAN<br>6707-C FAIRVIEW ROAD<br>CHARLOTTE, NC 28210  | VICE PRESIDENT<br>1.00   | 0.                | 0.                              | 0.                 |
| LORIN L. STIEFEL<br>6707-C FAIRVIEW ROAD<br>CHARLOTTE, NC 28210    | SECRETARY<br>1.00        | 0.                | 0.                              | 0.                 |
| MARC H. SILVERMAN<br>6707-C FAIRVIEW ROAD<br>CHARLOTTE, NC 28210   | TREASURER<br>1.00        | 0.                | 0.                              | 0.                 |
| DEBRA L. FOSTER<br>6707-C FAIRVIEW ROAD<br>CHARLOTTE, NC 28210     | VICE PRESIDENT<br>1.00   | 0.                | 0.                              | 0.                 |
| TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII                       |                          | 0.                | 0.                              | 0.                 |

FORM 990-PF

PART XV - LINE 1A  
LIST OF FOUNDATION MANAGERS

STATEMENT 14

NAME OF MANAGER

MATTYE B. SILVERMAN  
MARC H. SILVERMAN

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION  
PART XV, LINES 2A THROUGH 2D

STATEMENT 15

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

MATTYE SILVERMAN  
6707-C FAIRVIEW ROAD  
CHARLOTTE, NC 28210

TELEPHONE NUMBER

704-362-0400

FORM AND CONTENT OF APPLICATIONS

THERE IS NO FORMAL APPLICATION PROCESS. WRITTEN REQUESTS ARE ACCEPTED.  
MOST DISCRETIONARY DONATIONS ARE GIVEN PRIMARILY IN MECKLENBURG COUNTY IN  
CHARLOTTE, NORTH CAROLINA WITH AN EMPHASIS ON JEWISH, MEDICAL AND COMMUNITY  
HUMAN SERVICE AND ARTISTIC NEEDS.

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

NONE

## FORM 990-PF PAGE 1

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\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone