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SCANATE SEP 0 6 2017

Form 990-PF

Department of the Treasury Internal Revenue Service

EXTENDED TO NOVEMBER 15, 2017 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.

For calenda	ar year 2016 or tax year beginning		, and ending				
Name of fo	oundation			A Employer identification	number		
THE I	MARTIN FAMILY FOUNDATI	ON		38-3340278			
	street (or P O box number if mail is not delivered to street		Room/suite	B Telephone number			
115	DEPOT_ST			(734)994-5	050		
City or tow	vn, state or province, country, and ZIP or foreign	postal code		C If exemption application is p	ending, check here		
ANN A	ARBOR, MI 48104		·				
G Check al	ll that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizations	s, check here		
	Final return	Amended return		2 Foreign organizations me	eting the 85% test.		
Address change Name change 2. Foreign organizations meeting the 85% check here and attach computation							
		exempt private foundation		E If private foundation sta			
	ion 4947(a)(1) nonexempt charitable trust	Other taxable private founda		under section 507(b)(1)			
	· / —	ting method: X Cash	Accrual	F If the foundation is in a			
(trom Pa. ►\$	rt II, col. (c), line 16)	Other (specify)	1200	under section 507(b)(1)	(B), check here		
	Analysis of Revenue and Expenses	1		(a) Adjusted net	(d) Disbursements		
[Analysis of Revenue and Expenses (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	for charitable purposes (cash basis only)		
	Contributions, gifts, grants, etc., received	500,000.		N/A			
2 0	check if the foundation is not required to attach Sch. B						
3 In	nterest on savings and temporary each investments	975.	975.		STATEMENT 1		
4 D	Dividends and interest from securities	118,446.	118,446.		STATEMENT 2		
5a G	Gross rents						
b N	let rental income or (loss)						
6a N	let gain or (loss) from sale of assets not on line 10	-70,339.					
b as	cross sales price for all 826,495.	· · · · · · · · · · · · · · · · · · ·		RECEI	VED		
2	Capital gain net income (from Part IV, line 2)		0.	6	<u> </u>		
0 10	let short-term capital gain			응 SEP 0 5	2017		
l G	ncome modifications iross sales less returns		·				
1 -	nd allowances ess Cost of goods sold	 		OGDEN	UT		
	Gross profit or (loss)	 					
	Other Income	-36,562.	0.		STATEMENT 3		
	otal. Add lines 1 through 11	512,520.	119,421.				
	compensation of officers, directors, trustees, etc	0.	0.		0.		
14 0	ther employee salaries and wages						
15 P	ension plans, employee benefits						
တ္တို 16a Le	egal fees						
A d	ccounting fees STMT 4	12,982.	0.		12,982.		
E CO	ther professional fees	<u> </u>					
9 17 In	nterest COMO E	1 206	1 200				
⊫i	axes STMT 5	1,386.	1,386.	 	0.		
19 D	epreciation and depletion			 			
20 O	ccupancy ravel, conferences, and meetings		<u> </u>	 	 		
D 22 D	raver, conferences, and meetings rinting and publications		<u> </u>	 -			
	ther expenses STMT 6	31,733.	23,746.		7,987.		
	otal operating and administrative	0=/_,000			1		
e) e)	xpenses. Add lines 13 through 23	46,101.	25,132.		20,969.		
Ö 25 C	ontributions, gifts, grants paid	321,330.			321,330.		
ı	otal expenses and disbursements		1				
ľ	dd lines 24 and 25	367,431.	25,132.		342,299.		
27 St	ubtract line 26 from line 12:						
a Ex	xcess of revenue over expenses and disbursements	145,089.					
l l	et investment income (if negative, enter -0-)		94,289.				
L C Ac	djusted net income (if negative, enter -0-)	<u></u>	L.,	N/A			

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions.

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	1	5,749,369.
2	Enter amount from Part I, line 27a	2	145,089.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	5,894,458.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	5,894,458.
_			5 000 DE 10010

Form **990-PF** (2016)

241,376.

342,299.

See the Part VI instructions.

7 Add lines 5 and 6

8 Enter qualifying distributions from Part XII, line 4

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.

7

	990-PF (2016) THE MARTIN FAMILY FOUNDATION	<u>38</u> -	<u>-3340</u>	<u>278</u>		Page 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	<u>4948 -</u>	- see ir	struc	tion	s)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	i				
	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 X and enter 1%	1			9	43.
	of Part I, line 27b					
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	}	}			
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
	Add lines 1 and 2	3			9	43.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	1			0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			9	43.
	Credits/Payments:	—	1			
	2016 estimated tax payments and 2015 overpayment credited to 2016 6a 3,754]	1			
	Exempt foreign organizations - tax withheld at source	Ť				
	Tax paid with application for extension of time to file (Form 8868) 6c	_	1			
	Backup withholding erroneously withheld 6d	_				
	Total credits and payments. Add lines 6a through 6d	7	 		3,7	54.
	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached	8	+		, ,	5 = •
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	► 8	 			
	·		+		2,8	11
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be: Credited to 2017 estimated tax 2,811. Refunded	► 10 ► 11			2,0	0.
	Enter the amount of line 10 to be: Credited to 2017 estimated tax 2,811. Refunded † VII-A Statements Regarding Activities	<u> </u>				<u> </u>
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervi		 _		Yes	No
	puring the tax year, did the foundation attempt to influence any national, state, or local legislation of did it participate of intervi any political campaign?	116 111		1		X
	· ·	02/3		1a		X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definit	-		_1b		^
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publ	shed or	•			
	distributed by the foundation in connection with the activities.			-		x
	Did the foundation file Form 1120-POL for this year?			1c		
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	· · · · · · · · · · · · · · · · · · ·	<u>•</u>				
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ▶ \$ 0 .					1,
	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities			[]		
	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a	X	<u> </u>
	If "Yes," has it filed a tax return on Form 990-T for this year?			4b	X	<u> </u>
5 \	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
1	If "Yes," attach the statement required by General Instruction T					
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
•	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the si 	ate law				
	remain in the governing instrument?			6	X	
7 I	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	ΧV		7	<u> </u>	L
8a i	Enter the states to which the foundation reports or with which it is registered (see instructions)	<u> </u>				
_	MI					
b I	f the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
C	of each state as required by General Instruction G? If "No," attach explanation			8b	X	
	s the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for c	alendar				
	vear 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		X
	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses			10		X
				000	DE	(0010)

Form 990-PF (2016) THE MARTIN FAMILY FOUNDAY			<u> 38-33402'</u>	78	Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be R	equired _{(continu}	ued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e)) ?	Ye	es X No	ſ	1 1
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	ectly,	Ţ	į.	((
any voter registration drive?		Ye	s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	s X No	ì	1 1
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		į	- (((
4945(d)(4)(A)? (see instructions)	Ye	s X No			
• • • • • • • • • • • • • • • • • • • •	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for				
the prevention of cruelty to children or animals?	, , , , , , , , , , , , , , , , , , , ,		s X No	- [1 1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described i			ŀ	
section 53.4945 or in a current notice regarding disaster assistance (see instru	•		N/A	5b	T
Organizations relying on a current notice regarding disaster assistance check h	•				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ned		- 1	
expenditure responsibility for the grant?		I/A 🗀 Ye	s No	1	1
		./	,3 110	l	li
If "Yes," attach the statement required by Regulations section 53 4945 6a Did the foundation, during the year, receive any funds, directly or indirectly, to			J	1	
a personal benefit contract?	pay premiums on		es X No	}	1 1
• • • • • • • • • • • • • • • • • • • •	aroonal banafit contract?	TE		6b	$+$ \overline{x}
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		 '		+~-
If "Yes" to 6b, file Form 8870.	halle to a constant	[] , ,	. 🔝	}	1 1
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y6	es X No	, 	
Part VIII Information About Officers, Directors, Truste		anna Himble	N/A	7b	Ь—
Part VIII Information About Officers, Directors, Truste Paid Employees, and Contractors	es, Foundation Mar	nagers, nignly			
List all officers, directors, trustees, foundation managers and their of the second seco					
List dil officers, directors, a discess, roundation managers and their t	(b) Title, and average	(c) Compensation	(d) Contributions to	(a) F	ynense
(a) Name and address	hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deterred	accou	xpense nt, other
· 	to position	`enter -0-)	compensation	allov	vances
	PRESIDENT				
115 DEPOT STREET	1 00				•
ANN ARBOR, MI 48104	1.00	0.	0.		0.
WILLIAM C. MARTIN	V.P./SEC./TRE	ASURER	i		
115 DEPOT STREET	1 00				•
ANN ARBOR, MI 48104	1.00	0.	0.		0.
	DIRECTOR				
115 DEPOT STREET			_		_
ANN ARBOR, MI 48104	1.00	0.	0.		<u> 0 </u>
]			
- 	ļ	İ			
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	- (. N		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) E	xpense nt, other vances
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) compensation	and deterred compensation	allov	vances
NONE					
			_		
		<u></u>			
	1				
			1		
	1				
	T	†—————			
	1				
Fotal number of other employees paid over \$50,000	<u> </u>				0
יסיפו ויסיווספי טי טעופי פיוואוטאפפט אמות תאפו שטטייחת			Form	990-D	F (2016)
			rorm -	ンシレード	(2010)

Form 990-PF (2016) THE MARTIN FAMILY FOUNDATION	38-33	40278 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation No. Paid Employees, and Contractors (continued)	lanagers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONI	Ē."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		1
		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		<u>▶</u> 0
		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical info number of organizations and other beneficiaries served, conferences convened, research papers produced, et	rmation such as the	Expenses
1 N/A		
·		
2		
3		
4		
		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 a	and 2	Amount
1 N/A		787704111
2		
All other program-related investments. See instructions.		
3		
		
		
Total. Add lines 1 through 3		0.
		Form 990-PF (2016)

FOI	m 990-PF (2016) THE MARTIN FAMILY FOUNDATION	36-	33402/6 Page 8
F	Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign for	undations, s	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	•	1a	5,778,704. 602,192.
b	Average of monthly cash balances	1b	602,192.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	6,380,896.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	6,380,896.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	95,713.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	_5 _	6,285,183.
6	Minimum investment return. Enter 5% of line 5	6	314,259.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations	and certain	
	foreign organizations check here 🕨 🔛 and do not complete this part.)		
1	Mınımum investment return from Part X, line 6	1	314,259.
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	_2c	943.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	313,316.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	313,316.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	313,316.
P	art XII Qualifying Distributions (see instructions)		
=			
-	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	1	342,299.
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26 Program-related investments - total from Part IX-B	1a 1b	<u> </u>
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:		
	Suitability test (prior IRS approval required)	20	
		3a 3b	
4	Cash distribution test (attach the required schedule)	3D 4	342,299.
5	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	
J	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	943.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	341,356.
U	Aujusteu quamynig uistributions. Gubti act inite o ii orij inite 4	0	

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

Form **990-PF** (2016)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)					
	(a)	(b)	(c)	(d)	
1 Distributable amount for 2016 from Part XI,	Corpus	Years prior to 2015	2015	2016	
line 7		i		313,316.	
2 Undistributed income, if any, as of the end of 2016				323/3201	
a Enter amount for 2015 only			210,421.		
b Total for prior years:					
	į	0.			
3 Excess distributions carryover, if any, to 2016:					
a From 2011					
b From 2012					
c From 2013					
d From 2014					
e From 2015					
f Total of lines 3a through e	0.				
4 Qualifying distributions for 2016 from					
Part XII, line 4: ►\$ 342,299.			210 421		
a Applied to 2015, but not more than line 2a			210,421.		
b Applied to undistributed income of prior		0.			
years (Election required - see instructions)		U.	 		
c Treated as distributions out of corpus	0.				
(Election required - see instructions) d Applied to 2016 distributable amount		··-		131,878.	
e Remaining amount distributed out of corpus	0.			131,070.	
5 Excess distributions carryover applied to 2016	0.			0.	
(if an amount appears in column (d), the same amount must be shown in column (a))					
6 Enter the net total of each column as indicated below:					
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.				
b 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		ļ			
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 2015. Subtract line					
4a from line 2a. Taxable amount - see instr.			0.		
f Undistributed income for 2016. Subtract					
lines 4d and 5 from line 1. This amount must				101 420	
be distributed in 2017				181,438.	
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 2011					
not applied on line 5 or line 7	0.				
9 Excess distributions carryover to 2017	- -				
Subtract lines 7 and 8 from line 6a	0.				
10 Analysis of line 9;			·		
a Excess from 2012					
b Excess from 2013		ļ			
c Excess from 2014		İ			
d Excess from 2015	i				
e Excess from 2016					

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orm **990-PF** (2016

	rin FAMILY		14		-3340278 Page 10
Part XIV Private Operating Fo			I-A, question 9)	N/A	
1 a If the foundation has received a ruling or					
foundation, and the ruling is effective for				7 4040(1)(2) 05 5	1040(-)(5)
b Check box to indicate whether the found		I Junuation described	Prior 3 years	4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
income from Part I or the minimum	(a) 2010	(0) 2010	(0) 2011	(4) 2010	(0) 10411
investment return from Part X for					
each year listed b 85% of line 2a		 	 	- 	
		 	 	- 	·
 Qualifying distributions from Part XII, line 4 for each year listed 			Ì		
d Amounts included in line 2c not			 		
used directly for active conduct of					İ
exempt activities			}	}	
e Qualifying distributions made directly			 	 	
for active conduct of exempt activities.			ļ	,	
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the		 	 		
alternative test relied upon: a "Assets" alternative test - enter:					
(1) Value of all assets			İ		
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter		 	 	 	-
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:		<u> </u>		1	
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)			 	 	
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization		<u></u>	<u></u>	<u> </u>	
(4) Gross investment income					
Part XV Supplementary Infor at any time during the			f the foundation	had \$5,000 or	more in assets
1 Information Regarding Foundation	n Managers:			-	
a List any managers of the foundation who			ributions received by the	foundation before th	e close of any tax
year (but only if they have contributed m	ore than \$5,000). (See s	section 507(d)(2).)			
SEE STATEMENT 9					
b List any managers of the foundation who			(or an equally large porti	on of the ownership o	of a partnership or
other entity) of which the foundation has	a 10 % or greater intere	ði.			
NONE					
2 Information Regarding Contribution Check here ► X if the foundation of	nly makes contributions	to preselected charitable	organizations and does i		
the foundation makes gifts, grants, etc. (_			c, and o.
a The name, address, and telephone numb	er or e-mail address of i	the person to whom appli	cations should be addres	ssed:	
b The form in which applications should be	submitted and informa	tion and materials they s	nould include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	, such as by geographic	al areas, charitable fields,	kinds of institutions, or	other factors:	

Page 12

					_
Δ	Analysis	of Incon	ne-Pro	ducina	Activities

THE MARTIN FAMILY FOUNDATION

Enter gross amounts unless otherwise indicated.	Unrelated b	usiness income		y section 512, 513, or 514	(e)
gross arround arross other was maleated.	(a) Business	(b) Amount	(C) Exclu- sion	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a	_				
b	_				
c	_				
d	_				
e	_				
f	_				
g Fees and contracts from government agencies					
2 Membership dues and assessments	L				
3 Interest on savings and temporary cash investments			14	975.	
Dividends and interest from securities			14	118,446.	
5 Net rental income or (loss) from real estate:			+==	110,1101	
a Debt-financed property	 -		+ + -		
b Not debt-financed property			+-+-		
6 Net rental income or (loss) from personal			++-		
property					
7 Other investment income			<u> </u>		
8 Gain or (loss) from sales of assets other		·			
than inventory			18	-70,339.	
9 Net income or (loss) from special events			<u> </u>		
Gross profit or (loss) from sales of inventory					
1 Other revenue:		-			 _
a SEE STATEMENT 10		-36,562		}	
b					
c					
d					
e					
2 Subtotal. Add columns (b), (d), and (e)		-36,562		49,082.	C
3 Total. Add line 12, columns (b), (d), and (e)	<u> </u>			13	12,520
See worksheet in line 13 instructions to verify calculations.)				

 the foundation's exempt purposes (other than by providing funds for such purposes).

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Form 990	· -PF(2016) THE M	ARTIN FAMILY FO	UNDATION	38-3	340278 Pag	e 13
Part)	(VII Information Re	egarding Transfers To a		nd Relationships With Nonc		
	Exempt Organ				- Vaal	NI.
		rectly engage in any of the following	· · · · · ·	• •	Yes	NO
)(3) organizations) or in section 52		izations?		
		ation to a noncharitable exempt or	ganization of:		4.40	x
٠,	Cash				1a(1)	X
	Other assets er transactions:				1a(2)	<u>~</u>
	Sales of assets to a noncharita	ble evernt ergenization			15/1)	X
		ncharitable exempt organization			1b(1) 1b(2)	X
	Rental of facilities, equipment,	· -			1b(3)	X
	Reimbursement arrangements				1b(4)	X
	Loans or loan guarantees				1b(5)	$\frac{\pi}{X}$
٠.		embership or fundraising solicitation	nns		1b(6)	X
		alling lists, other assets, or paid em			1c	X
		= :	· ·	ways show the fair market value of the go		
			• •	e in any transaction or sharing arrangement		
		other assets, or services received.		,	,	
(a) Line no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description of transfers, transactions	and sharing arrangements	<u> </u>
		N/A				
			_ 			
	<u> </u>					
	<u> </u>					
						
	<u> </u>			<u> </u>		
	<u> </u>					
	<u> </u>					
		<u> </u>				
	 					
		L				
	· ·	tly affiliated with, or related to, one		zations described		
		r than section 501(c)(3)) or in sect	tion 527?		Yes X	No
<u>b</u> If "Y	es," complete the following sch		L (b) Time of annual set	I (a) Dansurtus of role		
	(a) Name of org	ganization	(b) Type of organization	(c) Description of rela	lionsnip	
	N/A		 			
			 			
			 	 		
	Under penalties of perjury, I declare t	that I have examined this return, including	accompanying schedules and st	Laternents, and to the best of my knowledge		
Sign			· · · ·	tion of which preparer has any knowledge	May the IRS discuss this return with the preparer	
Here	Same	Martin	1813811	PRESIDENT	shown below (see instr.) X Yes	
1	Signature of officer of trustee		Date	Title	Les Les	No
	Print/Type preparer's na				TIN	
	BRIAN D. M	A '	Melle	self- employed		
Paid	CPA	L'I	D. MILLER	}	P00091396	

Preparer Use Only

STE 300

Firm's name ► REHMANN ROBSON LLC

Firm's address ► 555 BRIARWOOD CIRCLE,
ANN ARBOR, MI 48108

Firm's EIN ► 38-3635706

(734) 761-2005

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.

OMB No 1545-0047

2016

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of the organization **Employer identification number** 38-3340278 THE MARTIN FAMILY FOUNDATION Organization type (check one): Filers of: Section: Form 990 or 990-FZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III 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 Don't 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 isn't covered by the General Rule and/or the Special Rules doesn't 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 doesn't 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.

Name of organization

Employer identification number

THE	MARTIN	FAMILY	FOUNDATION

38-3340278

Part I	Contributors (See instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	WILLIAM C. AND SALLY A. MARTIN 115 DEPOT STREET ANN ARBOR, MI 48104	\$500,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

THE MARTIN FAMILY FOUNDATION

38-3340278

Part II	Noncash Property (See instructions) Use duplicate copies of P	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	
(a)			
No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a)		(c)	
No. from Part I	(b) Description of noncash property given	FMV (or estimate) (See instructions)	(d) Date received
453 10-18-1		\$\$	l 990, 990-EZ, or 990-PF) (

Schedule B	(Form 990, 990-EZ, or 990-PF) (2016)		Pag
Name of orga			Employer identification number
THE MA	RTIN FAMILY FOUNDATION		38-3340278
Part III	Exclusively religious, charitable, etc., cont the year from any one contributor. Complete completing Part III, enter the total of exclusively religious. Use duplicate copies of Part III if additional	columns (a) through (e) and the following , charitable, etc., contributions of \$1,000 or less	ection 501(c)(7), (8), or (10) that total more than \$1,000 for
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
+		(e) Transfer of gift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
}	Transferee's name, address, at	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gift	
	Transferee's name, address, at	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part l	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
1			

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

THE MARTIN FAMILY FOUNDATION

3 Grants and Contributions Paid During the Yo				ļ
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
BAVIEW JUNIOR SAILORS		501(C)(3)	HUMANITARIAN	
100 CLAIREPOINT STREET)
DETROIT, MI 48215				5,00
BAY CLIFF HEALTH CAMP		501(C)(3)	HUMANITARIAN	
214 W. MICHIGAN ST. MARQUETTE, MI 49855				2,50
BIG BROTHERS BIG SISTERS		501(C)(3)	HUMANITARIAN	ļ
2890 CARPENTER RD, SUITE 600				
ANN ARBOR, MI 48108			 	7,00
BURNS PARK PTO PLAYGROUND 1414 WELLS ST		501(C)(3)	EDUCATIONAL	[
ANN ARBOR, MI 48104			İ	3,50
		1		
CAMPAIGN FOR THE ARK		501(C)(3)	MUSICAL	
316 S MAIN ST				
ANN ARBOR, MI 48105			 	5,00
CANCER SUPPORT COMMUNITY		501(C)(3)	HUMANITARIAN	
2010 HOGBACK RD., SUITE 3		501(6)(3)	HOTPAN I I I I I I I I I I I I I I I I I I I	ļ
ANN ARBOR, MI 48105	ļ	<u> </u>		2,50
CATHOLIC SOCIAL SERVICES OF WASHTENAW		501(C)(3)	HUMANITARIAN	
COUNTY				
4925 PACKARD RD. ANN ARBOR, MI 48108				6,00
CENTRAL SCHOOL- PTA		501(C)(3)	EDUCATIONAL	
1100 PALMER AVE				
ARCHMONT, NY 10538	 	 	 	1,00
CHADTOUGH FOUNDATION		501(C)(3)	HUMANITARIAN	
PO BOX 907				
SALINE, MI 48176		 		1,00
CHICAGO RUN 3611 N. KENDZIE AVE,	}	501(C)(3)	HUMANITARIAN	
CHICAGO, IL 60618		<u> </u>		1,00
Total from continuation sheets				300,33

THE MARTIN FAMILY FOUNDATION

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	A
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
CHILD CARE NETWORK		501(C)(3)	HUMANITARIAN	,
3941 RESEARCH PARK DR)		
ANN ARBOR, MI 48108				6,00
COMMUNITY ACTION NETWORK		501(C)(3)	HUMANITARIAN	1
809 TAYLOR				1 00
ANN ARBOR, MI 48105		 		1,00
COUNCIL OF MICHIGAN FOUNDATIONS		501(C)(3)	HUMANITARIAN	
ONE SOUTH HARBOR AVE., STE. 3				1 00
GRAND HAVEN, MI 49417		 		1,00
CRU MINISTRIES		501(C)(3)	HUMANITARIAN	
2735 FOSTER AVE				1 00
ANN ARBOR, MI 48108				1,00
ECOLOGY CENTER		501(C)(3)	HUMANITARIAN	
339 E. LIBERTY				
ANN ARBOR, MI 48104				1,00
GILBERT RESIDENCE		501(C)(3)	HUMANITARIAN	
203 s. HURON			Ì	
PSILANTI, MI 48197		 		100,00
GIRL SCOUTS HEART OF AMERICA		501(C)(3)	HUMANITARIAN	
144 JAMES L. PARKWAY PPSILANTI, MI 48197	i			1,00
SIRLS GROUP		501(C)(3)	HUMANITARIAN	
2531 JACKSON AVE. #188 NNN ARBOR, MI 48103			(5,00
SLAAD- FIGHT FOR OUR FUTURE		501(C)(3)	HUMANITARIAN	
455 WILSHIRE #1500				1 00
OS ANGELES, CA 90036		 		1,00
ABITAT FOR HUMANITY		501(C)(3)	HUMANITARIAN	
70 APRILL DR., SUITE A NNN ARBOR, MI 48103				1,50
Total from continuation sheets				1,30

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, Purpose of grant or show any relationship to Foundation Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient HUMANE SOCIETY OF HURON VALLEY 501(C)(3) HUMANITARIAN 3100 CHERRY HILL RD ANN ARBOR, MI 48105 1,000. JUVENILE DIABETES 501(C)(3) HUMANITARIAN 26 BROADWAY, 14TH FLOOR NEW YORK, NY 10004 1,000. KENYON COLLEGE 501(C)(3) EDUCATIONAL 209 CHASE AVE 2,500. GAMBIER, OH 43022 KEWEENAW COMMUNITY FOUNDATION 501(C)(3) HUMANITARIAN 236 QUINCY ST. HANCOCK, MI 49930 15,000. LEGACY LAND CONSERVANCY 501(C)(3) HUMANITARIAN 1100 N. MAIN ST., #203 ANN ARBOR, MI 48104 2,500. 501(C)(3) LESLIE SCIENCE & NATURE CENTER EDUCATIONAL 1831 TRAVER RD. ANN ARBOR, MI 48105 1,000. MENTOR 2 YOUTH 501(C)(3) HUMANITARIAN 317 ECORSE RD #2 1,000. YPSILANTI, MI 48198 MICHIGAN RADIO 501(C)(3) EDUCATIONAL 535 W WILLIAM SUITE 110 ANN ARBOR, MI 48103 1,000. 501(C)(3) MICHIGAN SHORES FOUNDATION HUMANITARIAN 911 MICHIGAN AVE WILMETTE, IL 60091 1,000. 501(C)(3) NATIONAL SAILING HALL OF FAME HUMANITARIAN 69 PRINCE GEORGE 1,000. ANNAPOLIS , MD 21401 Total from continuation sheets

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Ye	ar (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Continuution	, anounc
NEUTRAL ZONE	}	501(C)(3)	HUMANITARIAN	
310 E. WASHINGTON		ļ		
ANN ARBOR, MI 48104	<u> </u>	 		1,000.
NOBLE NETWORK OF CHARTER SCHOOLS		501(C)(3)	MUSICAL	
1 NORTH STATE ST FLOOR 7 LL				}
CHICAGO, IL 60602				1,500.
		ŧ		}
NORTH STAR REACH		501(C)(3)	EDUCATIONAL	
1050 HIGHLAND				1 000
ANN ARBOR, MI 48108	<u> </u>	 	 	1,000.
		<u> </u>		ľ
OUILMETTE FOUNDATION	Ì	501(C)(3)	HUMANITARIAN	
1200 WILMETTE AVE WILMETTE, IL 60091		+		1,000.
12 00051			 	
PACKAWAY HUNGER		E01/G)/3)	HUMANITARIAN	
5230 PARK EMERSON DRIVE		501(C)(3)	HUMANITAKIAN	
INDIANAPOLIS, IN 46203				2,500.
PLANNED PARENTHOOD		501(C)(3)	HUMANITARIAN	Į.
PO BOX 3673				
ANN ARBOR, MI 48106		<u> </u>	<u> </u>	1,000.
SALVATION ARMY - ANN ARBOR		501(C)(3)	HUMANITARIAN	
100 S. ARBANA DR				
ANN ARBOR, MI 48107				1,000.
SALVATION ARMY - HANCOCK		501(C)(3)	HUMANITARIAN	
408 RAVINE ST. HANCOCK, MI 49930		}		5,000.
indicock, MI 2000		 		3,000.
SHELTER ASSOCIATION OF WASHTENAW		501(C)(3)	HUMANITARIAN	
COUNTY				(
312 W HURON ST ANN ARBOR, MI 48103		1		7,500.
		 		1
THE PURPLE ROSE THEATRE COMPANY		501(C)(3)	HUMANITARIAN	
137 PARK ST.		P01(C)(3)	HOTTINITIANIAN]
CHELSEA, MI 48118		1		2,500.
Total from continuation sheets				

3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Contribution	7.1100111
UNIFIED HIV HEALTH AND BEYOND		501(C)(3)	HUMANITARIAN	
3011 W. GRAND BLVD.		į.		ļ
DÉTROIT, MI 48202	+			1,00
UNIVERSITY MUSICAL SOCIETY		501(C)(3)	MUSICAL	
881 N. UNIVERSITY AVE.		1	}	1
ANN ARBOR, MI 48109	+			5,00
UNIVERSITY OF MICHIGAN		501(C)(3)	EDUCATIONAL	
500 S. STATE STREET				
ANN ARBOR, MI 48109		 		27,00
VANDERBILT UNIVERSITY		501(C)(3)	EDUCATIONAL	
2301 VANDERBILT PLACE]		
NASHVILLE, TN 32240		 		1,00
WASHTENAW INTERMEDIATE SCHOOL		501(C)(3)	HUMANITARIAN	
1819 S. WANGER RD		1		
ANN ARBOR, MI 48106				6,00
VA GUMTIVA V. T. T. T. T. T. T. T. T. T. T. T. T. T.		E01(G)(2)		
WASHTENAW LITERACY 5577 WHITTAKER RD		501(C)(3)	EDUCATIONAL	ļ
YPSILANTI, MI 48197				1,03
VIV. V. D. D. D. D. D. D. D. D. D. D. D. D. D.		504 (7) (2)		
WILMETTE PUBLIC SCHOOLS DISTRICT 39 615 LOCUST RD		501(C)(3)	EDUCATIONAL	
WILMETTE, IL 60091	 	 		3,00
VITTENBERG UNIVERSITY		501(C)(3)	EDUCATIONAL	j
200 W WARD ST			Dog. I Town	
SPRINGFIELD, OH 45504	<u> </u>	<u> </u>		15,00
NOMEN'S CENTER OF SOUTHEASTERN		501(C)(3)	HUMANITARIAN	
MICHIGAN 510 S. MAPLE				
IN ARBOR, MI 48103				6,00
PSILANTI HIGH SCHOOL ATHLETICS		501(C)(3)	EDUCATIONAL	
1885 PACKARD PSILANTI, MI 48197				25,00
Total from continuation sheets				

	Part XV Supplementary Information				
YESILANTI MEALS ON WREELS 1110 W. CROSS ST. YESILANTI, NI 48197 6,300.	3 Grants and Contributions Paid During the Ye	ar (Continuation)			
YESILANTI MEALS ON WREELS 1110 W. CROSS ST. YESILANTI, NI 48197 6,300.		If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
1110 W. CROSS ST. YESTLANTI, MI 48197 6,300.	Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount
1110 W. CROSS ST. YESTLANTI, MI 48197 6,300.					
YESILANTI, MI 48197 6,300.	YPSILANTI MEALS ON WHEELS		501(C)(3)	HUMANITARIAN	
	1110 W. CROSS ST.				
Total from continuation sheets	YPSILANTI, MI 48197				6,300.
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December 01, 2016 To December 31, 2016

Account No 19-1077

Summary	Summary Of Investment Holdings					·	[]]
Shares or	Investment	Тах	Unit	Market	Estimated	Curr	Accrued
Par Value	Category	Cost	Value	Value	Ann Inc	Yield	Income
	Money Market Funds						
61,082 73	Northern Institutional US Government Select	61,082 73	1 00	61,082 73	146 60	0 24%	45 40
		61,082 73		61,082 73	146 60	0 24%	45 40
	Common Stock						
22,894	Activision Blizzard Inc	2,780 53	36 11	826,702 34	5,952 44	0 72%	00 0
150	Alphabet Inc CI C	107,029 50	771 82	115,773 00	00 0	%000	00 0
1,195	American Tower Corp	89,672 19	105 68	126,287 60	2,772 40	2 20%	693 10
1,195	Apple Inc	111,888 40	115 82	138,404 90	2,724 60	1 97%	00 0
1,530	AT&T Inc	47,918 38	42 53	65,070 90	2,998 80	4 61%	00 0
1,250	Baxter International Inc	48,417 22	44 34	55,425 00	00 099	1 17%	162 50
1,650	Comcast Corp CI A	49,403 04	69 05	113,932 50	1,815 00	1 59%	453 75
1,170	CVS Health Corp	110,194 50	78 91	92,324 70	2,340 00	2 53%	00 0
1,305	Danaher Corp	62,269 21	77 84	101,581 20	652 50	0 64%	163 13
1,665	DaVita Inc	85,627 33	64 20	106,893 00	00 0	%000	00 0
4,230	eBay Inc	97,954 08	29 69	125,588 70	00 0	%00 0	00 0
1,110	Express Scripts Holding Company	68'386 33	68 79	76,356 90	00 0	%00 0	00 0
652	Fortive Corp	20,257 12	53 63	34,966 76	182 56	0 52%	00 0
1,770	Intel Corp	49,475 07	36 27	64,197 90	1,840 80	2 87%	00 0
1,965	JPMorgan Chase & Co	112,176 35	86 29	169,559 85	3,772 80	2 23%	00 0
2,410	Marathon Petroleum Corp	50,259 97	50 35	121,343 50	3,470 40	2 86%	00 0
1,290	Merck & Co Inc New Com	49,446 16	58 87	75,942 30	2,425 20	3 19%	909

December 01, 2016 To December 31, 2016

Account Name The Martin Family Foundation

Account No 19-1077

Summary	Summary Of Investment Holdings						
Shares or	Shares or Investment	Тах	Unit	Market	Estimated	Curr	Accrued
Par Value	Category	Cost	Value	Value	Ann Inc	Yield	Income
2,510	Mondelez International Inc	89,476 48	44 33	111,268 30	1,907 60	171%	476 90
1,800	Nike Inc	110,240 50	50 83	91,494 00	1,296 00	1 42%	324 00
2,700	NiSource Inc Common	18,541 78	22 14	59,778 00	1,782 00	2 98%	00 0
870	Norfolk Southern Corp	86,673 52	108 07	94,020 90	2,053 20	2 18%	00 0
3,115	Paypal Hidgs Inc	101,505 08	39 47	122,949 05	00 0	%00 0	00 0
735	Pepsico Inc	48,374 96	104 63	76,903 05	2,212 35	2 88%	553 09
2,175	Pfizer Inc	55,820 38	32 48	70,644 00	2,784 00	3 94%	00 0
780	Procter & Gamble	39,345 65	84 08	65,582 40	2,088 84	3 19%	00 0
1,725	Red Hat Inc Com	125,244 00	02 69	120,232 50	00 0	%00 0	00 0
1,550	Salesforce Com Inc	89,026 58	68 46	106,113 00	00 0	%00 0	00 0
2,075	St Jude Medical Inc	99,831 12	80 19	166,394 25	2,573 00	1 55%	00 0
1,885	Starbucks Corp	110,854 80	55 52	104,655 20	1,885 00	1 80%	00 0
1,020	United Parcel Service Inc	74,980 40	114 64	116,932 80	3,182 40	2 72%	00 0
820	UnitedHealth Group Inc	88,238 97	160 04	131,232 80	2,050 00	1 56%	00 0
1,400	Visa Inc	55,929 99	78 02	109,228 00	924 00	0 85%	00 0
2,310	W P Carey Inc	74,973 18	59 09	136,497 90	9,147 60	%02 9	2,286 90
860	Wai Mart Stores Inc	52,102 02	69 12	59,443 20	1,720 00	2 89%	430 00
1,343	Waste Management Inc	00 0	70 91	95,232 13	2,202 52	2 31%	00 0
2,275	Wells Fargo & Co	110.270 38	55 11	125,375 25	3,458 00	2 76%	00 0
705	Zimmer Biomet Hidgs Inc	90,050 71	103 20	72,756 00	676 80	%860	169 20

December 01, 2016 To December 31, 2016

Account Name The Martin Family Foundation

Account No 19-1077

Summary	Summary Of Investment Holdings						
Shares or	Shares or Investment	Тах	Unit	Market	Estimated	Curr	Accrued
Par Value	Category	Cost	Value	Value	Ann Inc	Yıeld	Income
	Totals	2,685,236 54		4,447,083 78	73,540 81	1 65%	6,318 87
	Common Stock Foreign						
490	Diageo Pic	48,205 28	103 94	50,930 60	1,526 98	3 00%	00 0
1,345	Novartis AG	86,016 94	72 84	97,969 80	3,097 21	3 16%	00 0
029	Schlumberger Ltd	17,622 63	83 95	56,246 50	1,340 00	2 38%	335 00
185	Shire Pic	35,157 40	170 38	31,520 30	148 68	0 47%	00 0
	Totals Mutual Fund - Fixed Income	187,002 25		236,667 20	6,112.87	2 58%	335 00
19,277 3	DoubleLine Core Fixed Income Fund Cl I	212,103 93	10 79	208,002 07	6,274 87	3 02%	528 72
11,416 308	PIMCO Income - Inst'i	133,000 00	12 06	137,680 67	7,027 25	5 10%	633 60
27,777,778	T Rowe Price Institutional High Yield Fund	230,000 00	8 85	245,833 34	14,776 36	6 01%	1,246 81
15,540 847	Vanguard Interm-Term Investment - Grade Adm	156,048 92	9 64	149,813 77	4,099 16	2 74%	347 20
	Totals	731,152 85		741,329 85	32,177 64	4 34%	2,756 33
	Mutual Fund - Equity						
4,019 293	Glenmede Secured Options	50,000 00	12 10	48,633 45	00 0	%00 0	00 0
4,15283	Goldman Sachs US Eqty Dividend and Prem - I	90,000 00	12 09	50,207 71	967 61	1 93%	00 0
3,041 363	PrimeCap Odyssey Aggressive Growth Fd	100,000 00	33 47	101,794 42	00 0	%00 0	00 0
1,062 861	T Rowe Price Health Sciences Fund	70,000 00	29 08	62,793 83	00 0	%00 0	00 0
	Totals	270,000 00	į	263,429 41	967 61	0 37%	00 0
4.819 277	Mutual Fund - Global/Int'l Aberdeen Emerging Markets Fund - Inst'l	00 000 00	12 56	60,530 12	80 39	0 13%	00 0

Summary	Summary Of Investment Holdings						
Shares or	Shares or Investment	Tax	Unit	Market	Market Estimated Curr	Curr	Accrued
Par Value Category	Category	Cost	Value	Value	Ann Inc	Yield	Income
2,119 143	2,119 143 Dodge & Cox International Stock Fund	00 000'06	38 10	80,739 35	1,803 39	2 23%	1,152 81
9,220 452	9,220 452 Invesco European Small Co Fd - Y	110,000 00	13 41	123,646 26	00 0	%00 0	00 0
7,676 204	7,676 204 Matthews Asia Dividend Fund - Institutional	110,000 00	15 52	119,134 69	2,447 40	2 05%	00 0
1,761 95	Oppenheimer Intl Growth Fd - Instl	65,000 00	34 68	61,104 43	947 74 1 55%	1 55%	00 0
=	Totals	435,000 00		445,154 85	5,278 92	1 19%	1,152 81
	Total Investments	4,369,474 37		6,194,747 82	118,224 45 1 91%	1 91%	10,608 41
	Plus Accrued Income			10,608 41			
	Plus Net Cash			00 0			
	Total Market Value			6,205,356 23			

FORM 990-PF INTERES	ET ON SAVIN	IGS AND	rempor.	ARY C	ASH IN	VESTMENTS	STATEMENT 1
SOURCE			(A) EVENUE R BOOK		NET IN	(B) VESTMENT COME	(C) ADJUSTED NET INCOME
INTEREST INCOME			9	75.		975.	
TOTAL TO PART I, LIN	1E 3		9	75.		975.	
FORM 990-PF	DIVIDENDS	AND IN	rerest	FROM	SECUR	ITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPI' GAII DIVID		REV	A) ENUE BOOKS	(B) NET INVES MENT INCO	
BANK OF ANN ARBOR	134,531.	16	,085.	11	8,446.	118,44	6.
TO PART I, LINE 4	134,531.	16	,085.	11	8,446.	118,44	6.
FORM 990-PF DESCRIPTION		OTHE	RE	ME (A) VENUE BOOK		(B) ET INVEST- ENT INCOME	
MINOT HI INVESTORS I BUSINESS INCOME/(LOS RCA VG, LLC- UNRELAT	SS)			-30,		0	
INCOME / (LOSS) CASH IN LIEU				-5,	644. 47.	0 0	
TOTAL TO FORM 990-PE	, PART I,	LINE 11		-36,	562.	0	•
FORM 990-PF		ACCOU	NTING :	FEES			STATEMENT 4
		(A)	C NE	(B)	EST-	(C) ADJUSTED	(D) CHARITABLI
DESCRIPTION		PER BOOK		NT INC		NET INCOM	
DESCRIPTION ACCOUNTING FEES	_		KS ME				

FORM 990-PF	TAX	ES	STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FOREIGN TAX WITHHOLDINGS	1,386.	1,386.		0.	
TO FORM 990-PF, PG 1, LN 18	1,386.	1,386.		0.	
FORM 990-PF	OTHER E	XPENSES	STATEMENT 6		
	(5.)				
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
DESCRIPTION DUES AND FEES MANAGEMENT FEES MISCELLANEOUS	EXPENSES	NET INVEST- MENT INCOME 0. 23,746.	ADJUSTED	CHARITABLE	

FORM 990-PF COF	RPORATE STOCK		STATEMENT 7
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
CORPORATE STOCK	-	3,728,801.	5,067,801.
TOTAL TO FORM 990-PF, PART II, LINE	E 10B	3,728,801.	5,067,801.
FORM 990-PF OTHE	ER INVESTMENTS		STATEMENT 8
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
INVESTMENT IN CLAROS INVESTMENT IN MINOT HI INVESTORS	FMV FMV	525,000.	525,000.
LLC		532,560.	532,560.
INVESTMENT IN RCA VG LLC	FMV	-197,235.	
OTHER INVESTMENTS	FMV	603,153.	1,065,864.
TOTAL TO FORM 990-PF, PART II, LINE	E 13	1,463,478.	1,926,189.

FORM 990-PF PART XV - LINE 1A STATEMENT 9 LIST OF FOUNDATION MANAGERS

NAME OF MANAGER

SALLY A. MARTIN WILLIAM C. MARTIN

		HER REVENUE	STATEMENT 10		
DESCRIPTION	BUS CODE	UNRELATED BUSINESS INC	EXCL CODE	EXCLUDED AMOUNT	RELATED OR EXEMPT FUNC- TION INCOME
	900099			_	
UNRELATED BUSINESS INCOME/(LOSS)		-30,965.			
RCA VG, LLC- UNRELATED 9	900099	·			
BUSINESS INCOME / (LOSS) CASH IN LIEU	900099	-5,644. 47.	16		