Department of the Treasury

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.

2017

	calendar year 2017 or tax year beginning		, 2017, and en	ding	, 20
Nam	ne of foundation			A Employer Ide	entification number
MA	RSHALL FAMILY FOUNDATION, INC.			47-5625	906
Nun	ther and street (or P.O box number if mail is not delivered	to street address)	Room/su	te B Telephone n	umber (see instructions)
	01 SPRUCE HILL ROAD			(502)	649-1363
City	or town, state or province, country, and ZIP or foreign pos	stal code		C If exemption a pending, check	oplication is
PR	OSPECT, KY 40059				
G C	heck all that apply Initial return	Initial return of	of a former public cha	arity D 1. Foreign orga	anizations, check here
	Final return	Amended ret	เนาก	2. Foreign org	anizations meeting the
	Address change	Name change	9		eck here and attach
H C	heck type of organization X Section 501	(c)(3) exempt private f	oundation		
	Section 4947(a)(1) nonexempt charitable trust	Other taxable pri	ivate foundation	1 '	dation status was terminated 507(b)(1)(A), check here
I Fa		ounting method X Ca			on is in a 60-month termination
		ther (specify)		1	507(b)(1)(B), check here
	1	column (d) must be on ca	sh basis \		
_	t Analysis of Revenue and Expenses (The		un babia j	T	(d) Disbursements
, a.	total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
		6,931.		 	(00000000000000000000000000000000000000
1	Charle If the foundation is not required to	0,551.			
2	attach Sch B	285.	285	 	ATCH 1
3	• • • • • • • • • • • • • • • • • • • •	210,380.	210,380	 	ATCH 1
4		210,300.	210,360.	·	AICH Z
5	a Gross rents				
- 1	b Net rental income or (loss)	7 267			
	a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all 71, 319. assets on line 6a	-7,267.		<u> </u>	
8 7			0		
~ 8	• • •			<u> </u>	
وا	Income modifications	<u> </u>		· · · · · · · · · · · · · · · · · · ·	
10					
ļ	b Less Cost of goods sold				
- 1	c Gross profit or (loss) (attach schedule)				
11					
12		210,329.	210,665		
13		75,000.	37,500		37,500
9 14			<u>·</u>	 	-
				··	
and Administrative Expens	Pension plans, employee benefits	 	 	 	
当 16	a Legal fees (allarinschedule)				
e	b Accounting fees areas soneule ATCH 3			 	
\frac{1}{2}	c Other professional fees (attach schedule			 	
与 17	Takası(attach schedule) (see instructions) [4].	2,855.	2,241	-	
:월 18	Tares (attach schedule) (see instructions) [4].	2,055.	2,241	-	
E 19	Depreciation (attach schedule) and depetion.				
₽ 20	Occupancy Club No				-
2 21	Travel, conferences, and meetings			<u> </u>	
7 22	Printing and publications	C 050	3,025		3,02
Operating 24	Other expenses (attach schedule) ATCH .5.	6,050.	3,025	•	3,02
24	Total operating and administrative expenses.	00.005	40 500		40.50
De	Add lines 13 through 23	83,905.	42,766	·	40,525
		531,865.	10-2-2		531,865
26		615,770.	42,766	•	0. 572,390
27	Subtract line 26 from line 12:				
}	a $$ Excess of revenue over expenses and disbursements $$. $$.	-405,441.			
	b Net investment income (if negative, enter -0-)		167,899	•	
	a. Adjusted not income (if accessus onto: 0.)				
	c Adjusted net income (if negative, enter -0-)	<u> </u>	<u> </u>		Form 990-PF (2017

D.	art II	Ralance Shoots	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	f year
<u></u>	at t 11	Datative Stieets	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
]	1 (Cash - non-interest-beari	ing			
			cash investments	371,935.	45,096.	45,096.
		Accounts receivable				
	1	Less allowance for doul	btful accounts ▶			
- {		Pledges receivable				
			btful accounts ▶	1		
-			officers, directors, trustees, and other			
			tach schedule) (see instructions)			
- 1			eceivable (attach schedule)			
- }			btful accounts ▶			
2			e			
ssets	-	-	eferred charges			
_		•	e government obligations (attach schedule)			
			stock (attach schedule) ATCH 6	7,620,656.	7,542,052.	9,558,419.
		•	bonds (attach schedule)	, , , , , , , , , , , , , , , , , , , ,		· · · · · · · · · · · · · · · · · · ·
Ì	11	Investments - land, building:	s, bonds (attach schedule),		· · · · · · · · · · · · · · · · · · ·	
		and equipment basis Less accumulated deprecia				
- [1	(attach schedule)				
			loans			
	14	Land, buildings, and	scri scriedbie)			· · · · · · · · · · · · · · · · · · ·
- {	1	equipment basis Less accumulated deprecia	ation _			
- 1	1	(attach schedule)			, , , , , , , , , , , , , , , , , , ,	
- 1		Other assets (describe				
-			completed by all filers - see the	7 002 501	7 507 140	9,603,515.
+			age 1, item I)	3,000.	7,587,148.	9,003,313.
- 1		• •	ccrued expenses		3,000.	
- 1		Grants payable	· · · · · · · · · · · · · · · · · · ·			
Ë.		Deferred revenue	• • • • • • • • • • • • • • • • • • • •			}
-=1			ors, trustees, and other disqualified persons			
喜			otes payable (attach schedule)			
-	22	Other liabilities (describe	•▶)			ļ
ł			47 (1 1 00)	2 000	2 000	
+			es 17 through 22)	3,000.	3,000.	
ß			w SFAS 117, check here			
alances	1	and complete lines 24	through 26, and lines 30 and 31.		1	
ä	24	Unrestricted				<u> </u>
찖	25	Temporarily restricted .				
Net Assets or Fund B	26					
5	i		ot follow SFAS 117, check here			
		and complete lines 27	through 31.			
S	27	Capital stock, trust princ	cipal, or current funds			
še	28	Paid-in or capital surptus, or	r land, bldg , and equipment fund			
Š	29	-	ulated income, endowment, or other funds 🔒 👢	7,989,591.	7,584,148.	
=	30	Total net assets or fund	d balances (see instructions)	7,989,591.	7,584,148.	
ž	31	Total liabilities and	net assets/fund balances (see			
_				7,992,591.	7,587,148.	
			nges in Net Assets or Fund Bala	·		
1			palances at beginning of year - Part		- 1	
			ed on prior year's return)			7,989,591.
			, line 27a			-405,441.
			ded in line 2 (itemize) ▶			
4	Add	lines 1, 2, and 3			4	7,584,150.
5		reases not included in		· ·	5	2
6	Tota	I net assets or fund b	palances at end of year (line 4 minus	s line 5) - Part II, column (b), line 30 6	7,584,148.
		-			-	50m 990-DF (2017)

Part IV Capital Gains and Losses for Tax on Investment Income

		•
	•	•
- он	•	•

	(a) List and des	scribe the kind(s) of property sold rick warehouse, or common stock	(for example,	real estate,	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a	SEE PART IV SCHE	DULE			- Danies		
b							
С							
d	<u> </u>		····				
<u>e</u>	<u> </u>					<u></u>	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) min	
<u> </u>					_		
þ							
<u>C</u>	:						
<u>d</u>	<u> </u>			·			
е							
,	Complete only for assets s	howing gain in column (h) and o	wned by the f	oundation on 12/31/69.		Gains (Col (h) ga	
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		(k) Excess of col (i) over col. (j), if any	col	(k), but not less t Losses (from co	
a	<u> </u>						
b						 ,	
C					 -		
d							
е	<u>' </u>						
3	If gain, also enter in P	or (net capital loss) ain or (loss) as defined in sec Part I, line 8, column (c) Se	If (loss), er ctions 1222(5 e instruction	ns If (loss), enter -0- in	} 2		-7,267. 0.
Do		Under Section 4940(e) for			t Income		
Was		leave this part blank the section 4942 tax on the c 't qualify under section 4940		• •	base perio	od?	Yes X No
1	Enter the appropriate ar	mount in each column for each	ch year, see	the instructions before ma	akıng any e	ntries	
Cal	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net v	(c) alue of nonchantable-use assets		(d) Distribution ra (col (b) divided by	
	2016	51,19	4.	8,202,559.			0.006241
	2015						
	2014						
	2013						
	2012		_				
2	Total of line 1, column (d)			. 2		0.006241
3		o for the 5-year base period -					
		foundation has been in existe		•			0.003121
4	Enter the net value of ne	oncharitable-use assets for 2	017 from Pa	rt X. line 5	. 4	8,	931,733.
5	Multiply line 4 by line 3.						
_					. 5		27,876.
6	Enter 1% of net investm						27,876. 1,679.
6 7			27b)		- 6		
	Add lines 5 and 6	nent income (1% of Part I, line	27b)		. 6	rt using a 1% t	1,679. 29,555. 572,390.

Form 990-PF (2017) MARSHALL FAMILY FOUNDATION, INC.

47-5625906	4	7	-5	62	5	9	0	6
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Page 4

Pai	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i	nstru	ctions	3)
1a	Exempt operating foundations described in section 4940(d)(2), check here			
	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		1,6	79.
	here X and enter 1% 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).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			
3	Add lines 1 and 2		1,6	79.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	_	1,6	79.
6	Credits/Payments.			
a	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 308.			
b	Exempt foreign organizations - tax withheld at source			
C	Tax pald with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld		_	
7	Total credits and payments. Add lines 6a through 6d			180
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			71
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		1,3	71.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2018 estimated tax ▶ Refunded ▶ 11			
	t VII-A Statements Regarding Activities		-	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No X
	participate or intervene in any political campaign?	1a		
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			Х
	Instructions for the definition	1b		
	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	45		Х
	Did the foundation file Form 1120-POL for this year?	1c		
u	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation \$\bigsim \bigsim \b			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
-	on foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		х
•	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			ļ
	By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	X	<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	Х	
8a				
	KY,			Į
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 ² If "No," attach explanation	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes,"			v
	complete Part XIV	9		<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		Х	
	names and addresses ATCH 8	10		
	Fo	m 99	U-PF	20171

Par	t 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	- 1		
	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	1	i	
	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?	13	Х	
	Website address ► N/A			
14	The books are in care of ▶ PHILLIP H. MARSALL, JR. Telephone no. ▶ 502-649-	1363	3	
	Located at ▶8401 SPRUCE HILL ROAD PROSPECT, KY ZIP+4 ▶ 40059			
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		1	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		Yes	
	over a bank, secunties, or other financial account in a foreign country?	16		<u>X</u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required		Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		165	NO
1a	During the year, did the foundation (either directly)			1
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disquarines person.			
	(a) I difficility goods, services, or facilities to (or accept them from) a disqualified person?			
				1
	(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)?			'
	the benefit or use of a disqualified person)?			1
	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.)			1
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	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2017?	1c		Х
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))			
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2017?			
	If "Yes," list the years ,,,,,,			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			ŀ
	(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)	2b	-	X
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		1	
			ľ	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		1	
_	at any time during the year?			
b	of "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or		1	
	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	3b		- - x
4~	foundation had excess business holdings in 2017)	4a	 	X
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	70	 	\vdash
L	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b	1	X
	Entered and the second second second and the second		O DE	

Pa	rt VII-B	Statements Regarding Activities	for Which Form	4720 May Be Req	uired (continued)			
5a	During the	e year, did the foundation pay or incur any ame	ount to.				Yes	No
	(1) Carry	on propaganda, or otherwise attempt to influi	ence legislation (section	1 4945(e))?	Yes X No	, [-	
	(2) Influe	nce the outcome of any specific public ele	ection (see section 4	955); or to carry or	 I,		1	
	directly or indirectly, any voter registration drive?					,	1	1
	(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes X No						ļ	1
		e a grant to an organization other than a						i
		n 4945(d)(4)(A)? See instructions				,	ĺ	1
	(5) Provid	e for any purpose other than religious, cl	nantable, scientific, l	terary, or educationa				
		ses, or for the prevention of cruelty to children		•		,	ŀ	ĺ
b		swer is "Yes" to 5a(1)-(5), did any of the				,		1
		s section 53 4945 or in a current notice regar					Ì	1
		ions relying on a current notice regarding disa						
С		swer is "Yes" to question 5a(4), does the						
_		maintained expenditure responsibility for the		•		,	Ì	
		ttach the statement required by Regulations s	=				ļ	
6a		oundation, during the year, receive any fur	• •	ectly to nay premium	ne		ļ	
•		onal benefit contract?				,	İ	
b	Did the fo	undation, during the year, pay premiums, dire	ectly or indirectly on a	nersonal benefit contra	103 110		İ	l x
-		6b, file Form 8870	only or mancony, on a	personal benefit contro		·	 	
7a		e during the tax year, was the foundation a p	arty to a prohibited tay	shelter transaction?	Yes X No	.	ļ	
b		id the foundation receive any proceeds or ha	•	•				
		Information About Officers, Directo						l
		and Contractors		_		, ,		
<u> </u>	List all of	ficers, directors, trustees, foundation r	nanagers and their (b) Title, and average	(c) Compensation	instructions. (d) Contributions to			
		(a) Name and address	hours per week devoted to position	(if not paid, enter -0-)	employee benefit plans and deferred compensation	(e) Expe	nse acco	
			devoted to position	enter -0-1	and deterred comparisation			-
ATC	Н 9		[75,000.	o.l			0.
			j [
				····		 		
			İ					
2	Compens	ation of five highest-paid employees	(other than thos	e included on line	1 - see instructi	ons) If	none.	enter
	"NONE."		(00000000000000000000000000000000000000			0	,	••
(a)	Name and a	ddress 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) Expe	nse acco illowance	
	NONE							
			1					
T - 4 - 1								
rota	number o	f other employees paid over \$50,000	<u> </u>			•		

Part IX-B	Summary of Program-Related Investments (see instructions)	
Describe the	two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE		
!		
All other prog	ram-related investments. See instructions	
NONE		
tal. Add lir	es 1 through 3	
		Form 990-PF (

OHILL	990-FF (2017)		raye v
Par	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign found	ations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	8,761,964.
b	Average of monthly cash balances	1b	305,785.
C	Fair market value of all other assets (see instructions),	1c	
d	Total (add lines 1a, b, and c)	1d	9,067,749.
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	
3	Subtract line 2 from line 1d	3	9,067,749.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	136,016.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	8,931,733.
6	Minimum investment return. Enter 5% of line 5	6	446,587.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations, check here ▶ and do not complete this part.)	ndations	
1		1	446,587.
	Minimum investment return from Part X, line 6		410,307.
Za	Tax of all octions in control of zor. Iron rate vi, allo o		
	Income tax for 2017 (This does not include the tax from Part VI.).	.	1,679.
	Add lines 2a and 2b	2c	444,908.
3	Distributable amount before adjustments Subtract line 2c from line 1	3 4	144,500.
4	Recoveries of amounts treated as qualifying distributions		444,908.
5	Add lines 3 and 4	6	444, 500.
6	Deduction from distributable amount (see instructions)	-	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,	_	444,908.
	line 1	7	444, 300.
Par	t XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	572,390.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	572,390.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b See instructions	5	1,679.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	570,711.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		whether the foundation
	qualifies for the section 4940(e) reduction of tax in those years.		

Form 990-PF (2017) Page 9 Undistributed Income (see instructions) Part XIII (a) (b) Years prior to 2016 2016 2017 Corpus 1 Distributable amount for 2017 from Part XI. 444,908. 2 Undistributed income, if any, as of the end of 2017 a Enter amount for 2016 only. . . 18,983. b Total for pnor years: 20 15 ,20 14 ,20 13 3 Excess distributions carryover, if any, to 2017: a From 2012 b From 2013 c From 2014 d From 2015 e From 2016 0. f Total of lines 3a through e 4 Qualifying distributions for 2017 from Part XII, 572,390. line 4 ► \$ 18,983. a Applied to 2016, but not more than line 2a . . . b Applied to undistributed income of prior years (Election required - see instructions)..... c Treated as distributions out of corpus (Election 444,908. d Applied to 2017 distributable amount..... 108,499. e Remaining amount distributed out of corpus. . . Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: 108,499. a Corpus Add lines 3f, 4c, and 4e. Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b. 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 d Subtract line 6c from line 6b Taxable e Undistributed income for 2016. Subtract line 4a from line 2a Taxable amount - see f Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must be 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) Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions) . . . 9 Excess distributions carryover to 2018. 108,499. Subtract lines 7 and 8 from line 6a

Form 990-PF (2017)

10 Analysis of line 9

a Excess from 2013 . . . b Excess from 2014 . . . c Excess from 2015 . . . d Excess from 2016 . . .

e Excess from 2017 . . .

108,499.

om	990-PF (2017)	MARSHALL	FAMILY FOUNDAT	ION, INC.		47-5625	906 Page 10
Pa	rt XIV Private Ope	erating Foundations	(see instructions a	nd Part VII-A, quest	ion 9)	ron	APPLICABLE
l a	If the foundation has	received a ruling or d	etermination letter tha	t it is a private oper	ating	· · · · · · · · · · · · · · · · · · ·	
	foundation, and the ruling	g is effective for 2017, e	nter the date of the ruling		▶[
b	Check box to indicate w	whether the foundation	is a private operating		n section [4942(j)(3) or	4942(J)(5)
2 a	Enter the lesser of the ad-	Tax year	· · · · · · · · · · · · · · · · · · ·	Prior 3 years			(e) Total
	justed net income from Part	(a) 2017	(b) 2016	(c) 2015	(d) 20	114	
	f or the minimum investment return from Part X for each year listed						
b	85% of line 2a				<u> </u>		
с	Qualifying distributions from Part			<u> </u>	}]	
	XII, line 4 for each year listed .						
d	Amounts included in line 2c not used directly for active conduct of exempt activities						
е	Qualifying distributions made						
	directly for active conduct of exempt activities, Subtract line 2d from line 2c					}	
3	Complete 3a, b, or c for the alternative test relied upon.			,			
8	"Assets" alternative test - enter			ŀ			
	(1) Value of all assets (2) Value of assets qualifying under section		, , , , , , , , , , , , , , , , , , , 				· · · · · · · · · · · · · · · · · · ·
b	4942(j)(3)(B)(i)						
	enter 2/3 of minimum invest-		/		1	ì	
	ment return shown in Part X,		/	i			
С	"Support" alternative test - enter						
•	(1) Total support other than gross investment income (interest, dividends, rents,						
	payments on securities loans (section 512(a)(5)), or royalties)		<i>Y</i>				
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942						
	(j(X3)(B)(ni) (3) Largest amount of support from an exempt						
	organization.			ļ	ļ		
	(4) Gross investment income.			ambrif Aba farmala	sties bed ¢	F 000 -1	- in anasta si
Ċ		ntary Information (uring the year - see		only if the founda	auon nau a	5,000 or moi	e III assets a
_	Information Regarding						·
a	List any managers of before the close of any	the foundation who I	nave contributed mo				the foundation
	NA			·			
þ	List any managers of ownership of a partner					an equally larg	e portion of the
	NA				<u> </u>	<u>. </u>	
2	Information Regarding	•		, •			
	Check here ▶ X if t unsolicited requests for complete items 2a, b,	or funds. If the found	ation makes gifts, gr				
а	The name, address, a	nd telephone number	or email address of t	he person to whom ap	plications sho	ould be addresse	ed.
b	The form in which app	lications should be su	bmitted and informat	on and materials they	should inclu	de	
	Any submission deadli	ines:				 	

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

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Form 990-PF (2017)				Page 11
Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid Du Recipient Name and address (home or business)	ring the Year or App	roved for F	uture Payment	
, 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	recipient	contribution	711100111
a Paid dunng the year				
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			L	531,865
Total	 	· · · · · ·	▶ 3a	331,003
b Approved for future payment				
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	1			
		1	1	
		1		
		1		
Total			▶ 3b	
IOLAI	<u> </u>	<u> </u>		Form 990-PF (201
×0				

PAGE 14

Part XVI-	A Analysis of Income-Prod	ucing Act	ivities				
Enter gross amounts unless otherwise indicated.			ated business income	Excluded by	y section 512, 513, or 514	(e)	
,	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)	
_		ļ		 		(See instructions.)	
				 			
			 	 			
							
				 			
f				1			
·	and contracts from government agencies						
_	ship dues and assessments						
	n savings and temporary cash investments			14	285.		
	s and interest from securities			14	210,380.		
	al income or (loss) from real estate:						
	financed property						
	ebt-financed property						
	income or (loss) from personal property						
	vestment income						
	oss) from sales of assets other than inventory			18	-7,267.		
· ·	me or (loss) from special events - · ·			<u> </u>			
10 Gross pro	ofit or (loss) from sales of inventory						
11 Other rev	/enue. a	ļ		<u> </u>			
ь		ļ 	ļ	<u> </u>			
c			<u> </u>	 			
d				 			
e		ļ	ļ <u> </u>	 	202 200		
	Add columns (b), (d), and (e)		L		203,398.	202 200	
13 Total. Ad	Id line 12, columns (b), (d), and (e)				¹³	203,398.	
	eet in line 13 instructions to verify calc		an ann all alamant of C	ware at Dive			
Part XVI-	B Relationship of Activitie Explain below how each activitie						
▼	accomplishment of the foundation	on's exemp	ot purposes (other than	by providing	g funds for such purpose	s). (See instructions)	
		··					
			 				
							
							
						 	
							
			 				
							
						 	
	· · · · · · · · · · · · · · · · · · ·						
							

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01111 330	-PF (20		MARSHALI								47-562			ge 13
Part X	VII	Information R Exempt Orga		ansfer	s to and	d Transac	tions a	ind Rela	tionship	s W	ith None	harit	able	;
1 Di	d the	organization direct	tly or indirectly	engage	in any of	f the follow	ing with	any other	organizat	ion d	escribed		Yes	No
		on 501(c) (other	than section	501(c)	(3) orga	nizations)	or in se	ection 52	7, relating	j to	political			
		ations?				_								
		rs from the reportir	_											X
												1a(1)		X
		er assets ansactions	• • • • • • • •									1a(2)		
(1)	Sale	s of assets to a no	oncharitable exe	empt org	anization.							1b(1)		X
		hases of assets from										1b(2)		X
		tal of facilities, equ										1b(3)		X
		nbursement arrang										1b(4)		X
		ns or loan guarante												X
		ormance of service												X
		of facilities, equipr											<u> </u>	Х
		nswer to any of th												
		the goods, other	•	_	•									
		any transaction o												
(a) Line i	10	(b) Amount involved	(c) Name of	noncharit	able exempt	organization		Description	of transfers, tra	ansact	ions, and sha	inng ama	angem	ents
		N/A	ļ				N/	A						
	_		ļ						****					
					_									
								.						
	_													
			<u> </u>						····					
de	scribe	oundation directly ed in section 501(c complete the follo) (other than se								ations	Y	es 🖸	X No
		(a) Name of organization			(b) Type	of organization	1	T	(c) De	scnpt	on of relation	ship	-	
			<u> </u>										-	
									*					
	•													
		· · · · · · · · · · · · · · · · · · ·												
		penalties of penjury, I declaration of								best o	of my knowled	ige and	belief,	it is tn
Sign	PH	HILLIP H. MAR	SHALL, JR.	I	5.19	1-18	PR	ESIDENT	/DIRECT	OR		es discu		
lere	'	ature of officer or toustee			Date		Title				See instruction		Yes	
	<u> </u>	Hrint/Type preparer's na	Two of	Dra	parer's signa	ture		Date		T		PTIN		
Paid		ELISSA J MORS			users signa Usecqima			l l	15/2018	- 1	eck if f-employed	P013	2952	70
	ļr	TITLION O MOKS		1	7			1 (2)	13/2010	150		EUL	,,,,,	, ,

502-589-6100

Firm's EIN 13-4008324

40202-4264 Phone no.

Use Only

Firm's name

▶ PRICEWATERHOUSECOOPERS LLP

Firm's address ▶ 500 WEST MAIN STREET, SUITE 1800 LOUISVILLE, KY

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. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

2017

Employer identification number Name of the organization MARSHALL FAMILY FOUNDATION, INC. 47-5625906 Organization type (check one). Filers of: Section: 501(c)(Form 990 or 990-EZ) (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 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).

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) (2017)

Name of organization MARSHALL FAMILY FOUNDATION, INC.

Employer identification number 47-5625906

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_	THE MARSHALL CHARITABLE FOUNDATION, INC. P O BOX 7066 LOUISVILLE, KY 40257	\$6,931.	Person Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		- \$ - \$	Person Payroll Noncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		- - \$	Person Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		- \$	Person Payroll Noncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		- \$ - \$	Person Payroll Noncash (Complete Part II for noncash contributions.)				

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization MARSHALL FAMILY FOUNDATION, INC.

Employer identification number 47-5625906

Part II Nonca	sh Property (see instructions). Use duplicate copies	of Part II if additional space is ne	eded.
(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) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		s	

Name of o	rganization MARSHALL FAMILY FOUNDATION,	INC.		Employer identification number					
Dog W.	Evolusiants solicious about the	ibidiana ta assasis-ti	ano docaribe	47-5625906					
Part III	(10) that total more than \$1,000 for the ye the following line entry. For organizations of contributions of \$1,000 or less for the year.	usively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc tributions of \$1,000 or less for the year. (Enter this information once. See instructions.) > \$ duplicate copies of Part III if additional space is needed.							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held					
		(e) Transfer of gift							
	Transferee's name, address, and ZIP +	Relationship	nship of transferor to transferee						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held					
	(e) Transfer of gift								
	Transferee's name, address, and ZIP +	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee							
(a) No. from Part i	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held					
	(e) Transfer of gift								
	Tour found to the same address and Tip.		Dalatianakia						
	Transferee's name, address, and ZIP +	- 4	Relationship of transferor to transferee						
									
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held					
			 -						
		· · · · · · · · · · · · · · · · · · ·							
	(e) Transfer of gift								
	Transferee's name, address, and ZIP +	+4	Relationship	o of transferor to transferee					
			 _						
				 					

MARSHALL FAMILY FOUNDATION, INC.

2017 FORM 990-PF

47-5625906

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

ATTACHMENT 8

NAME AND ADDRESS

THE MARSHALL CHARITABLE FOUNDATION, INC. P O BOX 7066 LOUISVILLE, KY 40257