Form 990

Department of the Treasury Internal Revenue Service **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Go to www.irs.gov/Form990 for instructions and the latest information.

Do not enter social security numbers on this form as it may be made public.

2018

OMB No. 1545-0047

Open to Public Inspection

A For the 2018 calendar year, or tax year beginning JUL 1, 2018 and ending JUN 30 B Check if applicable: C Name of organization D Employer identification number THE MARFAN FOUNDATION, INC. Name change Doing business as 52-1265361 Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ 22 MANHASSET AVENUE 516-883-8712 City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ 7,375,350. Amended return PORT WASHINGTON, NY 11050-2023 H(a) Is this a group return F Name and address of principal officer: MICHAEL L. WEAMER for subordinates? Yes X No SAME AS C ABOVE H(b) Are all subordinates included? Yes Tax-exempt status: X 501(c)(3) (insert no.) 4947(a)(1) or 527 If "No," attach a list. (see instructions) J Website: WWW.MARFAN.ORG H(c) Group exemption number K Form of organization: X Corporation Year of formation: 1981 M State of legal domicile; MD Association Part I Summary Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O Governance if the organization discontinued its operations or disposed of more than 25% of its net assets. Check this box Number of voting members of the governing body (Part VI, line 1a) 17 Number of independent voting members of the governing body (Part VI, line 1b) 17 4 Activities & Total number of individuals employed in calendar year 2018 (Part V, line 2a) 27 5 Total number of volunteers (estimate if necessary) 220 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. b Net unrelated business taxable income from Form 990-T, line 38 0. Prior Year Current Year Contributions and grants (Part VIII, line 1h) 4,417,608. 3,987,438. Revenue Program service revenue (Part VIII, line 2g) 199,810. 113,490. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 166,452. 173,180. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 4,353,700. 4,704,278. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 1,132,843. 1,155,687. Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 2,733,411. 2,909,753. 16a Professional fundraising fees (Part IX, column (A), line 11e) 4,000. 2,664. **b** Total fundraising expenses (Part iX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,504,334. 1,397,613. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 5,465,717. 5,374,588. 19 Revenue less expenses. Subtract line 18 from line 12 -1,020,888. -761,439 5% Beginning of Current Year **End of Year** 20 Total assets (Part X, line 16) 12,637,785. 12,076,553. 21 Total liabilities (Part X, line 26) 420,079. 484,444. Net assets or fund balances. Subtract line 21 from line 20. 12,217,706. ,592,109. Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanies and statements, and to the best of my knowledge and belief, it is true, correct, and complete Dichration of preparer (other than off a hard and Signature of officer Sign MICHAEL L. WEAMER. PRESIDENT AND CEO Here Type or print name and title Print/Type preparer's name Preparer's signature PTIN Paid ELLEN M. LABITA, CPA P00140777 Preparer Firm's name BAKER TILLY VIRCHOW KRAUSE Firm's EIN 39-0859910 Use Only Firm's address 125 BAYLIS ROAD SUITE 300 MELVILLE, NY 11747 Phone no. 631.752.7400 May the IRS discuss this return with the preparer shown above? (see instructions) X Yes No

Pa	art III Statement of Program Service Accomplishments
-	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	THE MARFAN FOUNDATION CREATES A BRIGHTER FUTURE FOR EVERYONE AFFECTED
	BY MARFAN SYNDROME AND OTHER RELATED CONDITIONS. THE FOUNDATION WORKS
	TIRELESSLY TO ADVANCE RESEARCH, SERVE AS A RESOURCE FOR FAMILIES AND
	HEALTHCARE PROVIDERS, AND RAISE PUBLIC AWARENESS.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported
4a	/ / / / / / / / / / / / / / / / / / /
	RESEARCH - THE MARFAN FOUNDATION TIRELESSLY ADVANCES THE RESEARCH FOR
	TREATMENTS THAT SAVE LIVES AND DRAMATICALLY ENHANCE QUALITY OF LIFE FOR
	PEOPLE LIVING WITH MARFAN SYNDROME, LOEYS DIETZ, VASCULAR
	EHLERS-DANLOS, AND OTHER RELATED CONDITIONS. THROUGH ITS RESEARCH GRANT
	PROGRAM, THE FOUNDATION HAS STRENGTHENED A GROWING COMMUNITY OF EXPERT
	RESEARCHERS COMMITTED TO VICTORY OVER MARFAN SYNDROME AND OTHER RELATED
	CONDITIONS. THE FOUNDATION URGES THE GOVERNMENT TO FUND THE RESEARCH
	THAT WILL IMPROVE AND SAVE LIVES AND FACILITATES THE SHARING OF
	KNOWLEDGE ABOUT THESE THROUGH CONFERENCES, SYMPOSIA, AND PARTNERSHIPS
	WITH GOVERNMENTAL AGENCIES AND OTHER HEALTH ORGANIZATIONS.
	1 222 222
4b	(Code:) (Expenses \$ 1,390,289 including grants of \$ 27,254 including grants of \$ 113,490 including grants of \$ 27,254 includi
	SUPPORT - THE MARFAN FOUNDATION PROVIDES A SUPPORTIVE COMMUNITY FOR
	EVERYONE AFFECTED BY MARFAN SYNDROME, LOEYS DIETZ, VASCULAR
	EHLERS-DANLOS AND OTHER RELATED CONDITIONS. INDIVIDUALS, FAMILY
	MEMBERS, MEDICAL PROFESSIONALS, AND OTHER HEALTHCARE PROVIDERS CAN
	ACCESS INFORMATION ABOUT MARFAN SYNDROME AND OTHER RELATED CONDITIONS
	ON ITS WEBSITE, OVER THE PHONE, OR VIA EMAIL. AND IT OFFERS SPECIAL
	RESOURCES FOR CHILDREN, TEENS, PARENTS, TEACHERS, NURSES, AND OTHER
	SPECIALIZED GROUPS. ITS ANNUAL CONFERENCE BRINGS TOGETHER THE ENTIRE COMMUNITY FOR INFORMATION AND RESOURCE SHARING WHILE REGIONAL
	SYMPOSIUMS GIVE AFFECTED PEOPLE EDUCATIONAL OPPORTUNITIES CLOSE TO
	HOME. IN ADDITION THE FOUNDATION'S GROWING CAMPING PROGRAM GIVES
	AFFECTED CHILDREN AN OPPORTUNITY TO HAVE A NORMAL SUMMER EXPERIENCE.
4c	(Code:) (Expenses \$ 736,736. including grants of \$ 3,191.) (Revenue \$
	EDUCATION - THE MARFAN FOUNDATION ALWAYS HAS THE LATEST AND MOST
	ACCURATE INFORMATION, AND IT EDUCATES EVERYONE FROM PATIENTS AND
	FAMILIES TO MEDICAL PROFESSIONALS AND THE GENERAL PUBLIC ABOUT MARFAN
	SYNDROME, LOEYS DIETZ, VASCULAR EHLERS-DANLOS, AND OTHER RELATED
	CONDITIONS. THE FOUNDATION PROVIDES EXPANSIVE INFORMATION FOR PATIENTS.
	FAMILY MEMBERS, AND HEALTHCARE PROVIDERS THROUGH ITS WEBSITE AND
	HELPLINE, ACCESSIBLE VIA PHONE AND EMAIL, AS WELL AS WEBINARS ON
	MEDICAL TOPICS AND QUALITY OF LIFE ISSUES. IN ADDITION, THE FOUNDATION
	CREATES PUBLIC AWARENESS CAMPAIGNS ABOUT AORTIC DISEASE AND THE RISK OF
	SUDDEN DEATH FOR PEOPLE WITH MARFAN SYNDROME AND OTHER RELATED
	CONDITIONS AND THE IMPORTANCE OF EARLY DIAGNOSIS.
ld.	Other program services (Describe in Schedule O.)
	includes and of second in Second St.
_	Total program service expenses 4, 297, 887.

		1	Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
^	If "Yes," complete Schedule A	1	X	-
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	-
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
4	public office? If "Yes," complete Schedule C, Part I	3	-	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	l .	77	
E	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	1		,,,
G	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	-	X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			١,,
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			37
0	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			37
0	Schedule D, Part III	8	-	X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			,,,
40	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
44	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	_
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
_	as applicable.			
а	Tes, complete Schedule D,		7.7	
l.	Part VI	11a	X	_
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	l l		37
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	-	X
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	l I		77
d	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	-	X
u	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	البيا	₩	
^	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	_
f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	_
'	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		₹	
102	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f	Х	_
120		40	v	
h	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	12a	Х	_
Ŋ	·	401		v
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b	-	X
14a		13		X
	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a	-	
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	446	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b	21	_
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	10	21	
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	- 1	Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10	\rightarrow	Λ
		47		Х
18	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17	-	47
		40	x	
19	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."	18	Δ	_
. •		40		У
20a	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19	-	X
h	If "Vee" to line OOs slightly appropriate attacks a constitution of the Constitution o	20a	\rightarrow	77
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20b	-	_
	domestic government on Part IX, column (A), line 17 // "Yes," complete Schedule I, Parts I and II	04	х	
	Assessment on that are column to a market in this controlled Schedule I, Paris 7 and if	21	Λ	_

Form 990 (2018) THE MARFAN FOUNDATION, INC.

[Part IV | Checklist of Required Schedules (continued)

100	COMMUNICI		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			140
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	-
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a	_	X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		_
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	-	_
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b	-	X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? // "Yes,"		11	
07	complete Schedule L, Part II	26	_	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	200		10
20	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			V
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	-	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	-	Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			v
29	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Х	X
30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Δ	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			x
31	contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations?	30		A
01	If "Yes," complete Schedule N, Part I			x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		^
UZ				х
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32	-	Λ
00		00		х
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	-	
		24		Х
35a	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34	_	X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35a		
~	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	330	_	
	· · · · · · · · · · · · · · · · · · ·	36		Х
37	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
	and that is treated as a partnership for foderal income tay purposed? If IIV = II = 1 + 0 + 1 + 0 = 0 + 1 + 0 = 0 + 1 + 0 = 0 + 1 + 0 = 0 + 1 + 0 = 0 + 1 + 0 = 0 + 1 + 0 = 0 + 1 + 0 = 0 + 1 + 0 = 0 + 1 + 0 = 0 + 1 + 0 = 0 + 0 = 0 = 0 = 0 = 0 = 0 = 0 = 0	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	31	_	- 11
	Note. All Form 990 filers are required to complete Schedula O	38	Х	
Par		- 50		
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		-	12.0
	Enter the number of Forms W-2G included in line 1a. Enter ·0· if not applicable	4		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1		
	(gambling) winnings to prize winners?	to		

1.0	Statements negariting other ins rulings and rax compliance (continued)		-	
_	Fig. 1. A second of the second		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	,		
	filed for the calendar year ending with or within the year covered by this return 2 2	+	1,,	
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
0-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	-	-	77
3a	5 - Marie Galling the year.	3a	-	X
b	" " " " " " " " " " " " " " " " " " "	3b	-	-
48	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			3,7
h	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
Ŋ	If "Yes," enter the name of the foreign country:			
5a	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	-		37
b	- party and any and any and any and any any and any any any	5a		X
С	The state of the s	5b	-	X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	5c		-
va				v
h	any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a		X
D	•			
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).	6b		
' a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	-	Х	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a	X	-
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7b	Λ	-
·		7.		х
Н		7c		Λ
	Did the organization receive any funds, directly or indirectly to now promisms on a necessal barreft and the control of	7.		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		21
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	711	100	11-3
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	0	100	1
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	35		0 3
а	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:	1		
а	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against		7	
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	W 1	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			_
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O	15 19		
b	Enter the amount of reserves the organization is required to maintain by the states in which the		_	
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	10		
	excess parachute payment(s) during the year?	15		X
	If "Yes," see instructions and file Form 4720, Schedule N.			
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
-10	If "Yes," complete Form 4720, Schedule O.			
		Form	990 (2018)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			-
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year1a17			
	If there are material differences in voting rights among members of the governing body, or if the governing			1
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent1b 17			1
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			1
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Х	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		-	-
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		1	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
_		16b		
	ion C. Disclosure		5 /10	
	List the states with which a copy of this Form 990 is required to be filed AL, AK, AR, CA, CT, FL, GA, IL, KS,			
	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s of the control of the contro	nly) a	vailabl	е
	for public inspection Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain in Schedule O)			
	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and fi	nancia	ıl	
	statements available to the public during the tax year.			
	State the name, address, and telephone number of the person who possesses the organization's books and records			
	JUDITH GIBALDI - 516-883-8712			
_	22 MANHASSET AVENUE, PORT WASHINGTON, NY 11050-2023			_

Part VII | Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustons, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, dectors, bustees (whether individuals or organizations), regardless of amount of compensation.
 Enter -0- in columns (D), (E), and (F) if no compensation was paid
 List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A) Name and Title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is bolh an officer and a director/trustee)				than dis both	an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) CORY EAVES	8.00									_
CHAIR	0.00	Х		Х	\vdash	-	-	0.	0 +	0.
(2) KAREN MURRAY	1.00	.,		37		١.				
IMMEDIATE PAST CHAIR	0.00	X	-	X			-	0.	0 .	0 .
(3) CARYN KAUFFMAN, CPA TREASURER	3.00	37		37				0	0	0
(4) BERT MEDINA	1.00	X	-	Х			-	0 +	0.	0 .
SECRETARY	0.00	х		х				0 +	0	0
(5) MAYA BROWN-ZIMMERMAN	1.00	Α		Λ	-			0 +	0 +	0 .
DIRECTOR		х		Ш				0 *	0 -	0 .
(6) ALAN BRAVERMAN MD	1.00	Λ						0 *	0 +	0 +
DIRECTOR	0.00	Х	Ш					0 -	0 .	0 .
(7) PATRICIA MCCABE ESTRADA	1.00	27						0.	0.	0.
DIRECTOR	0.00	х						0 -	0.	0 +
(8) MARYLYNN IRELAND, PHD	1.00	-							0.	0.
DIRECTOR	0.00	х						0 •	0.	0
(9) ALIX MCLEAN JENNINGS	1.00									
DIRECTOR	0.00	х				Ш		0 .	0.	0 .
(10) JEFFREY C. LESAGE	1.00									
DIRECTOR	0.00	х				П		0.	0.	0 .
(11) SINCLAIR LI	1.00									-
DIRECTOR	0.00	Х						0 .	0 .	0 .
(12) KATHLEEN MIMNAGH, MD	1.00									
DIRECTOR	0.00	X						0.	0 .	0 .
(13) BETH UTZ	1.00									
DIRECTOR	0.00	Х						0 🖟	0 .	0 *
(14) EMILY P. WHEELER	1.00						- 1			
DIRECTOR		X					_	0.	0 .	0 *
(15) GARY KAUFFMAN	1.00									
DIRECTOR		X					_	0.	0.	0 .
(16) JON TULLIS	1.00									
DIRECTOR		Х					_	0 .	0 .	0 .
(17) SCOTT AVITABILE	1.00									
DIRECTOR	0.00	X			2		_1	0 .	0 .	0 *

1

\$100,000 of compensation from the organization

THE MARFAN FOUNDATION, INC. Form 990 (2018) 52-1265361 Page 9 Part VIII Statement of Revenue Chack if Schedule O contains a response or note to any line in this Part VIII (D) Revenue excluded from tax under (B) (C) Related or Unrelated Total revenue exempt function business sections 512 - 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts. 1 a Federated campaigns **b** Membership dues 1 922 784. c Fundraising events 10 d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and 2 494 824 similar amounts not included above 39,214 g Noncash contributions included in lines 1a-1f; \$ 4,417,608, h Total. Add lines 1a-1f Business Code 2 a MARFAN CONFERENCE 101,790 541700 101,790. Program Service Revenue OTHER CONFERENCES 541700 11,700. 11,700. f All other program service revenue 113,490. q Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) 146,851. 146,851. 4 Income from investment of tax-exempt bond proceeds 5 Royalties (II) Real (iii) Personal 6 a Gross rents **b** Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (III) Other 2,257,070 assets other than inventory **b** Less: cost or other basis 2 230 741 and sales expenses 26,329 c Gain or (loss) 26,329. 26 329. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ ___ 1 922 784. of contributions reported on line 1c). See Part IV, line 18 440,331 b Less: direct expenses 440 331 c Net income or (loss) from fundraising events 0 . 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold Net income or (loss) from sales of inventory. Miscellaneous Revenue **Business Code** 11 a

4,704,278

113 490

173 180

d All other revenue e Total. Add lines 11a-11d

Total revenue. See instructions

Sec	tion 501(c)(3) and 501(c)(4) organizations must comp	lete all columns. All othe	r organizations must con	nplete column (A)	
	Check if Schedule O contains a respon-			.p. 220 Oordinin (7 y).	intuition and a first
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations			10 1 1 1 1 1 1	
	and domestic governments. See Part IV, line 21	954,725.	954,725.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	24,062.	24,062.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	176,900.	176,900.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	641,487.	516,541.	112,605.	12,341.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and		-		
	persons described in section 4958(c)(3)(B)	1 0 5 1 1 - 1	4 000 5 1 5	0.10	
7	Other salaries and wages	1,861,954.	1,289,246.	240,341.	332,367.
8	Pension plan accruals and contributions (include				
9	section 401(k) and 403(b) employer contributions)	239,178.	166,505.	38,156.	34,517.
10	Other employee benefits Payroll taxes	167,134.	118,373.	25,033.	23,728.
11	Fees for services (non-employees):	107,134.	110,575.	23,033.	23,720.
a	Management				
b	Legal			F - 2	
c	Accounting	30,450.		30,450.	
d		22,250.	22,250.	30,4301	
e	Professional fundraising services. See Part IV, line 17	2,664.	22,2301	810 10 10 10 10 10	2,664.
f	Investment management fees	8,663.	8,481.	91.	91.
g	Other. (If line 11g amount exceeds 10% of line 25,		-,		
·	column (A) amount, list line 11g expenses on Sch O.)	104,939.	101,575.	60.	3,304.
12	Advertising and promotion	139,084.	70,527.	205.	68,352.
13	Office expenses	226,353.	139,315.	19,768.	67,270.
14	Information technology	150,924.	135,170.	4,761.	10,993.
15	Royalties				
16	Occupancy .	56,627.	40,677.	7,975.	7,975.
17	Travel	225,053.	145,020.	6,148.	73,885.
18	Payments of travel or entertainment expenses	(*)			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	332,164.	328,886.		3,278.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	40,280.	24,168.	8,056.	8.056.
23	Insurance	5,030.	3,018.	1,006.	1,006.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount excess 10 of line 25, amount (A) amount, list line 24 expenses on Scientific 0.)				
а	MISCELLANEOUS	28,714.	17,520.	1,862.	9,332.
b	DUES AND SUBSCRIPTIONS	20,990.	10,352.	1,080.	9,558.
С	UNCOLLECTABLE EXPENSE	16,516.	15,000.		1,516.
d	FEES AND PERMITS	8,173.	8,173.		
е	All other expenses	-18,597.	-18,597.		
5	Total functional expenses. Add lines 1 through 24e	5,465,717.	4,297,887.	497,597.	670,233.
26	Joint costs. Complete this line only if the organization				-
	reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Pa	πX	Balance Sheet		***			
		Check if Schedule O contains a response or not	e to any	line in this Part X		grama	
		- National Control of the Control of			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			150.	1	
	2	Savings and temporary cash investments	777,604.	2	641,800		
	3	Pledges and grants receivable, net			3,373,109.	3	2,775,803
	4	Accounts receivable, net			23,165.	4	44,627
	5	Loans and other receivables from current and fo	rmer offic	cers, directors,			- 153-36
		trustees, key employees, and highest compensa					
		Part II of Schedule L	Line Company			5	
	6	Loans and other receivables from other disqualit					
		section 4958(f)(1)), persons described in section	4958(c)(3	B)(B), and contributing			
		employers and sponsoring organizations of sect	ion 501(c)(9) voluntary			
ß		employees' beneficiary organizations (see instr).	Complet	e Part II of Sch L		6	
Assets	7	Notes and loans receivable, net				7	
Ä	8	Inventories for sale or use		TO CONTROL OF THE PROPERTY OF THE PARTY OF T		8	
	9	D. '1			148,266.	9	167,559
	10a	Land, buildings, and equipment: cost or other			X H X-LINE		
п		basis. Complete Part VI of Schedule D	10a	1,500,399.			
	b	Less: accumulated depreciation	10b	798,688.	730,146.	10c	701,711
П	11	Investments - publicly traded securities			6,438,849.	11	6,552,335
П	12	Investments - other securities. See Part IV, line 1	1		80,600.	12	104,997
-1	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	1,065,896.	15	1,087,721		
-4	16	Total assets. Add lines 1 through 15 (must equa	12,637,785.	16	12,076,553		
П	17	Accounts payable and accrued expenses	237,353.	17	252,171		
	18	Grants payable				18	
	19	Deferred revenue			102,126.	19	108,030
- 1	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete F				21	
ß	22	Loans and other payables to current and former					
H		key employees, highest compensated employees	s, and dis	equalified persons.			
Liabilities						22	
1	23	Secured mortgages and notes payable to unrelative				23	
-	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pay					
- 1		parties, and other liabilities not included on lines	17-24). C	Complete Part X of	00 600		104 042
1	ne	Schedule D			80,600.	25	124,243
+	26	Total liabilities. Add lines 17 through 25	-	FVI .	420,079.	26	484,444
-1		Organizations that follow SFAS 117 (ASC 958)		nere 🕨 💢 and			
	27	complete lines 27 through 29, and lines 33 and		-	4,162,024.		4,337,492
		Unrestricted net assets			8,055,682.	27	
		Temporarily restricted net assets	0,033,002.	28	7,254,617		
		Permanently restricted net assets Organizations that do not follow SFAS 117 (AS				29	
		and complete lines 30 through 34.	check nere				
				-		20	
1	31	Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equ	ilomost f	und		30	
		Retained earnings, endowment, accumulated inc		Alany francis		31	
				other funds	12,217,706.	32	11,592,109.
Net Assets or	33						

Form	1990 (2018) THE MARFAN FOUNDATION, INC.	52-	1265361 Page 12
Pa	Reconciliation of Net Assets		200
	Check if Schedule O contains a response or note to any line in this Part XI		[X]
1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,704,278.
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,465,717.
3	Revenue less expenses. Subtract line 2 from line 1	3	-761,439.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	12,217,706.
5	Net unrealized gains (losses) on investments	5	114,017.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	21,825.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (3))	10	11,592,109.
Pa	Financial Statements and Reporting Check if Schedule O contains a response or note to any time in this Part XII		

10	column (B)	1,59	2,1	09.
Pa	rt XIII Financial Statements and Reporting			2
	Check if Schedule O contains a response or note to any line in this Part XII		unir.	
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other	1.5	22.	8.0
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a			
	separate basis, consolidated basis, or both:	100		1100
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis,			
	consolidated basis, or both:			12 1
	X Separate basis Consolidated basis Both consolidated and separate basis			J
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			
	review, or compilation of its financial statements and selection of an independent accountant?	2c	Х	-
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			,,,
	Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
_	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	000	
		Form	990	(2018)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gow/Form990 for instructions and the latest information.

2018
Open to Public Inspection

Name of the organization Employer identification number THE MARFAN FOUNDATION, INC. 52-1265361 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv), (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in 7 X section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s) OUT TO BE WHILE PRODUCED BY (i) Name of supported (iii) Type of organization (v) Amount of monetary (vi) Amount of other organization (described on lines 1-10 support (see instructions) Yes support (see instructions) No above (see instructions))

Schedule A (Form 990 or 990-EZ) 2018 THE MARFAN FOUNDATION, INC. 52-1265 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

15 Public support percentage from 2017 Schedule A, Part II, line 14 16a 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Image: Part II, line 14 is 33 1/3% or more, check this box and stop here. The organization part II is 33 1/3% or more, check this box and stop here. The organization part II is 33 1/3% or more, check this box and stop here. The organization part II is 33 1/3% or more, check this box and stop here. The organization part II is 33 1/3% or more, check this box and stop here. The organization part II is 33 1/3% or more, check this box and stop here. The organization part II is 33 1/3% or more, check this box and stop here. The organization part II is 33 1/3% or more, check this box and stop here. The organization part II is 33 1/3% or more, check this box and stop here. The organization part II is 33 1/3% or more, check this box and stop here. The organization part II is 33 1/3% or more, check this box and stop here. The organization part II is 33 1/3% or more, check this box and stop here. The organization part II is 33 1/3% or more, check this box and stop here. The organization part II is 33 1/3% or more, check this box and stop here. The organization part II is 33 1/3% or more, check this box and stop here. The organization part II is 33 1/3% or	Sec	ction A. Public Support						
I Giffs, grants, contributions, and membership fees receives. (Do not include any 'unusual grants.') 2 Tax revenues levies for the organization's benefit and other paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge growth or the portion of total contributions by each person (other than a governmental unit or publicly supported organization) included so line 11 that exceede 2% of the amount shown on line 11, column (f) 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceede 2% of the amount shown on line 11, column (f) 6 Public support, steeler less than the second and the se	Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
membership fees received. (Do not include any "unusual grants.") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (i) 5786763. 8 Public support. **Best level the service of the amount shown on line 11, column for minimal sources or secretary of the services of the servic								
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a gevernmental unit to the organization without charge 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 5 Public support. **Leftered that \$\frac{1}{2}\$\$ was \$\frac{1}{2}\$\$ was \$\frac{1}{2}\$\$ of \$\frac{1}{2		-						
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18 Private foundation. If the organization did not check a box on line 13, 15s, 16b, 17s, or 17b, check this box and see instructions		_						•

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to

Section A. Public Support	low, please com	piete Part II.]		V.		
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and	-0.0		10,2310	(d) LOT	(6) 2010	miotai
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus- iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (fast act line 7c tons see 6.)						
Section B, Total Support					_	
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						22 - 41
13 Total support. (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the	he organization's	s first, second, third	I, fourth, or fifth ta	x year as a section	n 501(c)(3) organiza	tion,
check this box and stop here						>
Section C. Computation of Public	- the self-relation to the sel	The second secon	Contractions in voters	2011/2/2014/10/2014		111111111111111111111111111111111111111
15 Public support percentage for 2018 (line	э 8, column (f), d	ivided by line 13, c	olumn (f))		15	%
16 Public support percentage from 2017 Section D. Computation of Investigation					16	96
17 Investment income percentage for 201			ne 13. column (fl)		17	%
18 Investment income percentage from 20					18	96
19a 33 1/3% support tests - 2018. If the o			n line 14, and line			
more than 33 1/3%, check this box and						19 1101
b 33 1/3% support tests - 2017. If the or	rganization did n	ot check a box on	line 14 or line 19a,	and line 16 is mo	ore than 33 1/3%, ar	nd
line 18 is not more than 33 1/3%, check Private foundation. If the organization					and the state of t	

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes." and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes." provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes." provide detail in Part VI.
- Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes." answer 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to

	Yes	No
1		1 - 2
2		
3a		
3b		
3c		
4a		
4b		
	8	
4c		
	7-1	
5a		
5b		\$ 7
5c		
H		15
6		
7		
7		8 8
8		
0=		
9a		
9b		FT 95
9c		
10a		
-	-	-

of its supported organizations? If "Yes," describe in Part VI the role played by the prognization in this regard

			_	
	dule A (Form 990 or 990 EZ) 2018 THE MARFAN FOUNDATION,			2-1265361 Page 6
1	Type III Non-Functionally Integrated 509(a)(3) Supportin Check here if the organization satisfied the Integral Part Test as a qualifying other Type III non-functionally integrated supporting organizations must be	ng trust on N	lov. 20, 1970 (explain in F	Part VI.) See instructions. A
Sect	tion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year)			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
0	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1d)	1d		
е	Discount claimed for blockage or other	- 10		CONTRACTOR OF STREET
	factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of phor-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2	THE RESERVE	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		

emergency temporary reduction (see instructions)

6

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions)

5

Schedule A (Form 990 or 990-EZ) 2018

Income tax imposed in prior year

Distributable Amount. Subtract line 5 from line 4, unless subject to

Pai	TV Type III Non-Functionally Integrated 509	(a)(3) Supporting Organ	nizations (continued)	
Sect	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which th	ne organization is responsive		
	provide details in Part VI). See instructions.			
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required explain in Part VII. See instructions.			
3	Excess distributions carryover, if any, to 2018			
а	From 2013			
	From 2014			
	From 2015			
	From 2016			
	From 2017			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
_	Applied to 2018 distributable amount	ALONG THE DOCUMENT		
	Carryover from 2013 not applied (see instructions)			
1	Remainder. Subtract lines 3g. 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D,			17/11 7/11 11 11 11
	line 7			
a	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
	Remainder Subtract lines 4a and 4b from 4.		0.15	
5	Remaining underdistributions for years prior to 2018, if			
•	any Subtract lines 3g and 4a from line 2. For result greater	800		
	than zero, explain in Part VI. See instructions	83 8 8 W		V Se before
6	Remaining underdistributions for 2018. Subtract lines 3h			
Ü	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.	200		
7				91137. 7 3 3
7	Excess distributions carryover to 2019. Add lines 3j and 4c.			
0	Breakdown of line 7			
8	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
e	Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

Schedule A	(Form 990 or 990-EZ) 2018 THE	MARFAN	FOUNDATION,	INC.	52-1265361	Page 8
Part VI	Supplemental Information Part IV, Section A, lines 1, 2, 3b, 3	Provide the	explanations required b 6, 9a, 9b, 9c, 11a, 11b, a	y Part II, line 10; Part II, line 17a or and 11c; Part IV, Section B, lines 1	17b; Part III, line 12; and 2; Part IV, Section	С,
	line 1; Part IV, Section D, lines 2 ar Section D, lines 5, 6, and 8; and Pa (See instructions.)	id 3; Part IV, s art V, Section	Section E, lines 1c, 2a, 2 E, lines 2, 5, and 6. Also	b, 3a, and 3b; Part V, line 1; Part V complete this part for any addition	/, Section B, line 1e; Pa nal information.	rt V,

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

2018

Name of the organization

Employer identification number

THE MARFAN FOUNDATION, INC. 52-1265361 Organization type (check one): Filers of: Section: Form 990 or 990-EZ X 501(c)(3) (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 X 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 (entering "N/A" in column (b) instead of the contributor name and address). II, and III. For an organization described in section 501(c)(7), (8), or (10) filling 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

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

SCHEDULE C (Form 990 or 990-EZ)

(Form 990 or 990-E2

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

2018
Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

 Section 501(c)(4), (5), or (6) organ 	nizations: Complete Part III.			
Name of organization			Empl	oyer identification number
THE M	ARFAN FOUNDATION,	INC.		52-1265361
Part I-A Complete if the	organization is exempt und	er section 501(c)	or is a section 527 org	ganization.
	anization's direct and indirect politic nditures npaign activities			
Part I-B Complete if the	organization is exempt und	er section 501(c)	(3).	
1 Enter the amount of any excise	tax incurred by the organization und	er section 4955		
	tax incurred by organization manage			
-	ction 4955 tax, did it file Form 4720			present process
				Yes No
ь II Yes " describe in Part IV	organization is exempt und	er section 501/c	except section 501/c	1/31
The state of the s	The state of the s			
	nded by the filing organization for sec ganization's funds contributed to otl			
_	gariization s idiids contributed to ou			
3 Total exempt function expendit	ures. Add lines 1 and 2. Enter here a	nd on Form 1120-POI		
	orm 1120-POL for this year?			Yes No
5 Enter the names, addresses and	d employer identification number (Ell	N) of all section 527 p	olitical organizations to which	the filing organization
	nization listed, enter the amount paid			
	e promptly and directly delivered to a			e segregated fund or a
). If additional space is needed, prov			
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter 0	(e) Amount of political contributions received and promptly and directly
			Turius. Il fiorie, efficer -o-	delivered to a separate political organization.
				If none, enter -0
		-	_	

	Lobbying Expenditures During 4-Year Averaging Period							
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total			
2a Lobbying nontaxable amount	382,215.	373,283.	418,729.	423,286.	1,597,513.			
b Lobbying ceiling amount (150% of line 2a, columnie)					2,396,270.			
c Total lobbying expenditures	21,710.	21,797.	22,198.	22,250.	87,955.			
d Grassroots nontaxable amount	95,554.	93,321.	104,682.	105,822.	399,379.			
e Grassroots ceiling amount (150% of line 2d, column (e))					599,069.			
f Grassroots lobbying expenditures	21,279.	21,562.	22,146.	22,138.	87 125.			

Schedule C (Form 990 or 990-EZ) 2018

Schedule C (Form 990 or 990-EZ) 2018 THE MARFAN FOUNDATION, INC. 52-1265361 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description		1)	(b)	
the lobbying activity.	Yes	No	Amo	unt
During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers?		F		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?	-			
e Publications, or published or broadcast statements?	-			
f Grants to other organizations for lobbying purposes?	_	-		
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?				
j Total. Add lines 1c through 1i				
 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filling organization incurred a section 4912 tax, did it file Form 4720 for this year?				
art III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	1 501(c)(), or sec	tion	
30 1(0)(0).		2 3	Yes	No
Were substantially all (90% or more) dues received nondeductible by members?		1		
1111100 11001 001100				
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section	1 501(c)(5	2 3 5), or sec		3 is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization acree to carry over lobbying and political campaign activity expenditures from the	1 501(c)(t No," OR	2 3 5), or sec (b) Part I		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members	1 501(c)(t No," OR	2 3 5), or sec (b) Part I		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization as ee to carry over lobbying and political campaign activity expenditures from the section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year	n 501(c)(t No," OR	2 3 5), or sec (b) Part I		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization as ee to any over lobbying and political campaign activity expenditures from the section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year b Carryover from last year	n 501(c)(t	2 3 5), or sec (b) Part I		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization are to any over lobbying and political campaign activity expenditures from the strill. Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total	n 501(c)(t	2 3 5), or sec (b) Part I		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization as ee to carry over lobbying and political campaign activity expenditures from the strill. B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	n 501(c)(t	2 3 5), or sec (b) Part I		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization as ee to carry over lobbying and political campaign activity expenditures from the strill. B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds	a 501(c)(t) No," OR	2 3 5), or sec (b) Part I		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization as ea to carry over lobbying and political campaign activity expenditures from the source of the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedoes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures of nondeduct	a 501(c)(t) No," OR	2 3 5), or sec (b) Part I		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization as ee to carry over lobbying and political campaign activity expenditures from the string of the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pole expenditure next year?	a 501(c)(t) No," OR	2 3 5), or sec (b) Part I		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization are to any overlobbying and political campaign activity expenditures from the string of the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed ones the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pole expenditure next year? Taxable amount of lobbing and political expenditures (and instructions)	a 501(c)(t) No," OR	2 3 5), or sec (b) Part I		3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization are to carry over lobbying and political campaign activity expenditures from the source of the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politice expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions)	n 501(c)(t No," OR al	2 3 5), or sec (b) Part I 2a 2b 2c 3	II-A, line	3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization accee to carry over lobbying and political campaign activity expenditures from the still B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedable the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polynomiative next year? Taxable amount of lobbing and political approximations vide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	n 501(c)(t No," OR al	2 3 5), or sec (b) Part I 2a 2b 2c 3	II-A, line	3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization are to carry over lobbying and political campaign activity expenditures from the source of the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politice expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions)	n 501(c)(t No," OR al	2 3 5), or sec (b) Part I 2a 2b 2c 3	II-A, line	3, is
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization accee to carry over lobbying and political campaign activity expenditures from the still B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedable the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polynomiative next year? Taxable amount of lobbing and political approximations vide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	n 501(c)(t No," OR al	2 3 5), or sec (b) Part I 2a 2b 2c 3	II-A, line	3, is
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SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Go to www.irs.gow/Form990 for instructions and the latest information.

OMB No. 1545-0047 Inspection

Name of the organization

THE MARFAN FOUNDATION, INC.

Employer identification number 52-1265361

Pa	rt I Organizations Maintaining Donor Advised F	unds or Other Similar Funds	or Acc	ounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line 6			
		(a) Donor advised funds	(b)	Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in writing	ing that the assets held in donor advis	sed funds	
	are the organization's property, subject to the organization's exc	lusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor advis	sors in writing that grant funds can be	used only	,
	for charitable purposes and not for the benefit of the donor or do	onor advisor, or for any other purpose	conferring	
	impermissible private benefit?			Yes No
Pa	t II Conservation Easements. Complete if the organ	ization answered "Yes" on Form 990.	Part IV, lin	e 7
1	Purpose(s) of conservation easements held by the organization (check all that apply).		
	Preservation of land for public use (e.g., recreation or educ	cation) Preservation of a his	torically in	nportant land area
	Protection of natural habitat	Preservation of a cer	tified histo	oric structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified	conservation contribution in the form	of a const	ervation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easements			2b
С	Number of conservation easements on a certified historic structu	ure included in (a)		2c
d	Number of conservation easements included in (c) acquired after	r 7/25/06, and not on a historic struct	ure	
	listed in the National Register			2d
3	Number of conservation easements modified, transferred, release	ed, extinguished, or terminated by the	organizat	tion during the tax
	year			
4	Number of states where property subject to conservation easem	ent is located 🕨		
5	Does the organization have a written policy regarding the periodi	ic monitoring, inspection, handling of		
	violations, and enforcement of the conservation easements it hold			
6	Staff and volunteer hours devoted to monitoring, inspecting, han	ndling of violations, and enforcing con	servation e	easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling	of violations, and enforcing conserva	tion easer	nents during the year
	▶ \$			
8	Does each conservation easement reported on line 2(d) above sa			
	and section 170(h)(4)(B)(ii)?		000 - 100 A	Yes No
9	In Part XIII, describe how the organization reports conservation e	easements in its revenue and expense	statemen	t, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	's financial statements that describes	the organi	zation's accounting for
-	conservation easements.		0'	11 6
Pai	t III Organizations Maintaining Collections of Ar		ner Sim	iliar Assets.
	Complete if the organization answered "Yes" on Form 990			
1a	If the organization elected, as permitted under SFAS 116 (ASC 9			
	historical treasures, or other similar assets held for public exhibit	· ·	nce of pub	olic service, provide, in Part XIII,
	the text of the footnote to its financial statements that describes			
b	If the organization elected, as permitted under SFAS 116 (ASC 9			
	treasures, or other similar assets held for public exhibition, education	ation, or research in furtherance of pu	blic service	e, provide the following amounts
	relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1	Allen and the second second	-30000	\$
	(ii) Assets included in Form 990, Part X	mente seminare de entre marinarion		> \$
2	If the organization received or held works of art, historical treasur	res, or other similar assets for financia	l gain, pro	vide
	the following amounts required to be reported under SFAS 116 ($\!$			
а	Revenue included on Form 990, Part VIII, line 1			> \$
6	Assats included in Form 990, Part V		1	•

Sche	dule D (Form 990) 2018 THE MAR	FAN FOUNDAT	ION, INC.		5	2-12	65361	Раце 2
Par	TIII Organizations Maintaining C	ollections of Art	, Historical Tre	asures, or Oth	er Similar .	Assets	foonting	redl
3	Using the organization's acquisition, accession	on, and other records	, check any of the f	ollowing that are a	significant use	e of its c	ollection it	ems
	(check all that apply):							
а	Public exhibition	d	Loan or exc	hange programs				
b	Scholarly research	е	Other					
С	Preservation for future generations							
4	Provide a description of the organization's co	ollections and explain	how they further th	e organization's ex	empt purpose	in Part	XIII.	
5	During the year, did the organization solicit o				ar assets		2)	Q
property	to be sold to raise funds rather than to be ma						Yes	No
Par	Escrow and Custodial Arrang		te if the organizatio	n answered "Yes" o	n Form 990,	Part IV, I	ine 9, or	
	reported an amount on Form 990, Par						_	_
1a	Is the organization an agent, trustee, custodi						٦.,	
	on Form 990, Part X?				3-11-11-11-11-11-11	7690	」Yes	No
b	If "Yes," explain the arrangement in Part XIII	and complete the follo	owing table:				2000000	
							Amount	
С	Beginning balance				1c			
d	Additions during the year							
е	Distributions during the year							
f	Ending balance						1	
2a	Did the organization include an amount on Fo					P10111	Yes	No No
_	If "Yes," explain the arrangement in Part XIII.					LILL COLL	articles -	
Pai	t V Endowment Funds. Complete	The state of the s					VOVE 10	25,900
	59	(a) Current year	(b) Prior year	(c) Two years back			-	years back
1a	Beginning of year balance	1,720,276	2,165,752.	2,006,110	1,91	5,019.	1,3	909 351.
b	Contributions				-			F 010
С	Net investment earnings, gains, and losses	21,936	54,524.	159,737	9	1,241.		5 818.
d	Grants or scholarships				-			-
е	Other expenditures for facilities							
	and programs	331,000	500,000.					
f	Administrative expenses			95	-	150		150.
g	End of year balance	1,411,212	1,720,276.	2,165,752	. 2,00	6,110.	1 9	915 019.
2	Provide the estimated percentage of the curr		(line 1g, column (a)) held as:				
а	Board designated or quasi-endowment	100.00	%					
b	Permanent endowment .00	%						
С	Temporarily restricted endowment	.00 %						
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%						
3a	Are there endowment funds not in the posse	ssion of the organizat	ion that are held ar	d administered for	the organizati	ion	-	
	by:) Y	Yes No
	(i) unrelated organizations						3a(i)	X
	(ii) related organizations						3a(ii)	X
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as require	d on Schedule R?				3b	
4	Describe in Part XIII the intended uses of the	organization's endov	vment funds,					
Par	t VI Land, Buildings, and Equipm	ent.						
	Complete if the organization answered	d "Yes" on Form 990.	Part IV, line 11a. S	ee Form 990, Part	line 10			
	Description of property	(a) Cost or ot			Accumulated		(d) Book	value
_		basis (investm			lepreciation	_		
1a	Land			7,927.				,927.
b	Buildings		91	7,564.	352,31	1.	565	,253.
С	Leasehold improvements							
	Equipment		47	4,908.	446,37	7.	28	,531.
	Other							-
Total	, Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part X	column /Bl. line 1	Oc.J	Name of the	>	701	,711.

701,711. Schedule D (Form 990) 2018

I the second of			
Complete if the organization answered "Yes" or			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation	: Cost or end of your market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A) (B)			
(C)			
(D)			
(E)			
(F)			
(G)			
04)			
Total, (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related. Complete if the organization answered "Yes" or	Form 990 Part IV In	11c See Com 800 Dart V II	no 12
(a) Description of investment	(b) Book value	(c) Method of valuation	Cost or end-of-year market value
(1)	.,	, ,	
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) Total, (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		em Rue, ii	
Total, (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" on (a) De	escription	- 19 ASA - 1994	(b) Book value
Part IX Other Assets. Complete if the organization answered "Yes" on (a) De (1) BENEFICIAL INTEREST IN CHAF	escription	- 19 ASA - 1994	(b) Book value
Part IX Other Assets. Complete if the organization answered "Yes" on (a) De (1) BENEFICIAL INTEREST IN CHAR-	escription	- 19 ASA - 1994	(b) Book value
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" on (a) December 11 DENEFICIAL INTEREST IN CHARMS (2)	escription	- 19 ASA - 1994	(b) Book value
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" on (a) De (1) BENEFICIAL INTEREST IN CHAR- (2) (3) (4)	escription	- 19 ASA - 1994	(b) Book value
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" on (a) De (1) BENEFICIAL INTEREST IN CHARGE (2) (3) (4) (5)	escription	- 19 ASA - 1994	(b) Book value
Total, (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" on (a) De (1) BENEFICIAL INTEREST IN CHARGE) (2) (3) (4) (5) (6)	escription	- 19 ASA - 1994	(b) Book value
Total, (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" on (a) De (1) BENEFICIAL INTEREST IN CHARGE) (3) (4) (5) (6) (7)	escription	- 19 ASA - 1994	(b) Book value
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" on (a) De (1) BENEFICIAL INTEREST IN CHAR (2) (3) (4) (5) (6) (7) (8)	escription	- 19 ASA - 1994	(b) Book value
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" on (a) De (1) BENEFICIAL INTEREST IN CHARGE) (3) (4) (5) (6) (7) (8) (9) Other Liabilities.	escription RITABLE REMA	INDER TRUST	(b) Book value 1,087,721
Total, (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" on (a) De (1) BENEFICIAL INTEREST IN CHARGE) (3) (4) (5) (6) (7) (8) (9) Total, (Column (b) must equal Form 990, Part X, col. (B) line 1/2 Part X Other Liabilities. Complete if the organization answered "Yes" on	escription RITABLE REMA	INDER TRUST 11e or 11f. See Form 980 Pa	(b) Book value 1,087,721
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" on (a) Dec. (1) BENEFICIAL INTEREST IN CHARGE) (3) (4) (5) (6) (7) (8) (9) Otal. (Column tol must equal Form 990, Part X, col. (B) line 16 (Part X) Other Liabilities.	escription RITABLE REMA	INDER TRUST	(b) Book value 1,087,721
Total, (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" on (a) De (1) BENEFICIAL INTEREST IN CHARGE) (3) (4) (5) (6) (7) (8) (9) Total, (Column 6) must equal Form 990, Part X, col. (B) line 12. Part X Other Liabilities. Complete if the organization answered "Yes" on (a) Description of liability (1) Federal income taxes	escription RITABLE REMA	INDER TRUST 11e or 11f. See Form 990 Pa (b) Book value	(b) Book value 1,087,721
Total, (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" on (a) December 11 BENEFICIAL INTEREST IN CHARTES. (2) (3) (4) (5) (6) (7) (8) (9) Total, (Column (b) must equal Form 990, Part X, col. (B) line 1/Part X Other Liabilities. Complete if the organization answered "Yes" on (a) Description of liability (1) Federal income taxes (2) OTHER PAYABLES	escription RITABLE REMA	INDER TRUST 11e or 11f. See Form 980 Pa (b) Book value 104,997.	(b) Book value 1,087,721
Total. (Co. (b) must equal form 990, Part X, cot. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" on (a) De (1) BENEFICIAL INTEREST IN CHARGE) (3) (4) (5) (6) (7) (8) (9) (9) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	escription RITABLE REMA	INDER TRUST 11e or 11f. See Form 990 Pa (b) Book value	(b) Book value 1,087,721
Col. (b) must equal form 990, Part X, cot. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" on (a) Dec. (1) BENEFICIAL INTEREST IN CHARGE. (2) (3) (4) (4) (5) (6) (7) (8) (9) Otal. (Column (b) must equal form 990, Part X, cot. (B) line 19 Part X Other Liabilities. Complete if the organization answered "Yes" on (a) Description of liability (1) Federal income taxes (2) OTHER PAYABLES (3) LINE OF CREDIT (4)	escription RITABLE REMA	INDER TRUST 11e or 11f. See Form 980 Pa (b) Book value 104,997.	(b) Book value 1,087,721
Col. (b) must equal form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" on (a) Dec. (1) BENEFICIAL INTEREST IN CHARGE. (2) (3) (4) (5) (6) (7) (8) (9) Otal. (Column formust equal form 990, Part X, col. (B) line 1/Part X Other Liabilities. Complete if the organization answered "Yes" on (a) Description of liability (1) Federal income taxes (2) OTHER PAYABLES (3) LINE OF CREDIT (4) (6)	escription RITABLE REMA	INDER TRUST 11e or 11f. See Form 980 Pa (b) Book value 104,997.	(b) Book value 1,087,721
Col. (b) must equal form 990, Part X, cot. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" on (a) Dec. (1) BENEFICIAL INTEREST IN CHARGE. (2) (3) (4) (4) (5) (6) (7) (8) (9) Otal. (Column (b) must equal form 990, Part X, cot. (B) line 19 Part X Other Liabilities. Complete if the organization answered "Yes" on (a) Description of liability (1) Federal income taxes (2) OTHER PAYABLES (3) LINE OF CREDIT (4)	escription RITABLE REMA	INDER TRUST 11e or 11f. See Form 980 Pa (b) Book value 104,997.	(b) Book value 1,087,721
Other Assets. Complete if the organization answered "Yes" on (a) De (1) BENEFICIAL INTEREST IN CHARGE) (3) (4) (5) (6) (7) (8) (9) (9) (9) (1) Part X Other Liabilities. Complete if the organization answered "Yes" on (a) Description of liability (1) Federal income taxes (2) OTHER PAYABLES (3) LINE OF CREDIT (4) (6) (6) (7) (6) (6) (7) (7) (8) (9) (9) (9) (9) (9) (9) (9) (9) (9) (9	escription RITABLE REMA	INDER TRUST 11e or 11f. See Form 980 Pa (b) Book value 104,997.	(b) Book value 1,087,721
Total. (Col. (b) must equal form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" on (a) De (1) BENEFICIAL INTEREST IN CHARGE) (3) (4) (5) (6) (7) (8) (9) (9) (9) (9) (9) (9) (9) (9) (9) (9	escription RITABLE REMA	INDER TRUST 11e or 11f. See Form 980 Pa (b) Book value 104,997.	(b) Book value 1,087,721
Total. (Co. (b) must equal form 990, Part X, cot. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" on (a) De (1) BENEFICIAL INTEREST IN CHARGE) (3) (4) (5) (6) (7) (8) (9) (9) (9) (9) (9) (9) (9) (9) (9) (9	escription RITABLE REMA 5.) Form 990, Part IV, line	INDER TRUST 11e or 11f. See Form 980 Pa (b) Book value 104,997.	(b) Book value 1,087,721

446,294.

8,663.

	lotal expenses and losses per audited financial statements	BHOOM CONT.	-	5,707,5001
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	0,452.		
	Prior year adjustments 2b			
С	Other losses 2c		15	
	Other (Describe in Part XIII.)		10.1	
е	Add lines 2a through 2d		2e	310,452.
3	Subtract line 2e from line 1	1000-1101	3	5,457,054.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	8,663.	-	
b	Other (Describe in Part XIII.)	***************************************		
С	Add lines 4a and 4b		4c	8,663.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	5,465,717.

Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V. LINE 4:

INTENDED USES OF THE ORGANIZATION'S ENDOWMENT FUNDS:

RESERVE FUND - TO PROVIDE AN EMERGENCY FUND IN THE AMOUNT OF \$1.5MM FOR PROGRAM AND OPERATIONS IN ORDER TO SAFEGUARD ORGANIZATION IN THE EVENT OF FINANCIAL DISTRESS RESULTING FROM EVENTS OUTSIDE THE TYPICAL LIFE CYCLE.

PART X, LINE 2:

MANAGEMENT HAS EVALUATED THE FOUNDATION'S TAX POSITIONS AND CONCLUDED THAT THE FOUNDATION HAS NOT TAKEN ANY UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF FINANCIAL ACCOUNTING STANDARDS BOARD ("FASB") ACCOUNTING STANDARDS

Part XIII Supplemental Information (continued)	52-1265361 Page 5
Part XIII Supplemental Information (continued)	
PART XI, LINE 2D - OTHER ADJUSTMENTS:	
CHANGE IN FMV OF CHARITABLE REMAINDER TRUST	21,825.

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

Go to www.rs.gow/Form990 for instructions and the latest information.

20 18 Open to Public Inspection

Name of the organization

Employer identification number

THE MARFAN FOUN	DATION, 3	INC.		52-12653	61
Part General Infor	mation on A	ctivities Out	side the United States. Comple	ete if the organization answered '	'Yes" on
Form 990, Part 1\	/, line 14b.				
1 For grantmakers. Does	the organization	maintain record	ds to substantiate the amount of its gra		
the grantees' eligibility for	or the grants or a	ssistance, and t	the selection criteria used to award the	grants or assistance?	Yes No
2 For grantmakers. Desc	ribe in Part V the	organization's	procedures for monitoring the use of its	s grants and other assistance out	side the
United States.					
	ne following Part	L line 3 table ca	an be duplicated if additional space is n	eeded	
(a) Region	(b) Number of	(a) Number of	(d) Activities conducted in the region	(e) If activity listed in (d)	(f) Total
(a) Hogisti	offices	employees, agents, and independent	(by type) (such as, fundraising, pro-	is a program service,	expenditures
	in the region	independent	gram services, investments, grants to	describe specific type	for and investments
		ontractors in the region	recipients located in the region)	of service(s) in the region	in the region
		art time rections			
EUROPE	0	0	GRANT TO RECIPIENT	RESEARCH	51 900.
2011012					1
NORTH AMERICA	0	0	GRANT TO RECIPIENT	RESEARCH	125 000.
					1
	1				
					+
					-
					1
					+
	I				
					101 111
3 a Subtotal	0	0			176,900
b Total from continuation					
sheets to Part I	0	0			0,
c Totals (add lines 3a					
and 3b)	0	0			176 900

THE MARFAN FOUNDATION, INC.

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. PartII

(a) Name of organization a	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of (book, FMV, appraisal, other)
		NORTH AMERICA	RESEARCH	50,000. CHECK	СНЕСК	0		VINCE
		NORTH AMERICA	RESEARCH	50,000.CHECK	СНЕСК	0		DXK
		EUROPE (INCLUDING ICELAND & BREENLAND)	RESEARCH	50,000 CHECK	снеск	å		ANE
		NORTH AMERICA	RESEARCH	25,000, CHECK	рнеск	.0		334
	-31							
	1							
sipient orgathe grantee	anizatior or cour	Enter total number of recipient organizations listed above that are recolby the IRS, or for which the grantee or counsel has provided a section	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	oreign country, r	ecognized as tax-exe	mpt		4
Enter total number of other omanizations or softlines	zations o	rentities						# C

Page 3

THE MARFAN FOUNDATION, INC. Schedule F (Form 990) 2018

Pert III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

					. 8	
(h) Method of valuation valuation indox, FMV,						Schedule F (Form 990) 2018
(g) Description of noncash assistance						Sched
(f) Amount of noncash assistance						
(e) Manner of cash disbursement						
(d) Amount of cash grant						
(c) Number of recipients						
(b) Region						
(a) Type of grant or assistance						

10	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2018

Schedule	F (Form 990) 2018	THE MARF	AN FOUN	DATION,	INC.			52-	1265361	Page 5
Part V	Supplemental									
	Provide the inform									
	investments vs. ex									
	(estimated numbe	er of recipients), as	applicable. A	ulso complete t	this part to p	rovide a	ny additiona	al information. See	instructions.	
	-00									
PART	I, LINE 2:									
THE G	RANT RECIPI	ENT MUST	SUBMIT	INTERM	EDIATE	AND	F.TNAT	PROGRESS	REPORTS	_
AND F	INANCIAL RE	EPORTS.								
-										_
-										
-										
-										
-										
-										
2										

SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No 1545-0047

Attach to Form 990 or Form 990-EZ. Department of the Treasury Internal Revenue Service

Go to www.rs.gow/Form990 for instructions and the latest information.

Open to Public Inspection

Name of the organization						Employer ide	ntification number
	FAN FOUNDATION, I					52-1265	
Fundraising Activities. required to complete this part	Complete if the organization answ.	wered "Y	es" or	n Form 990, Part IV, I	ine 1	7. Form 990-EZ	filers are not
 Indicate whether the organization raise a Mail solicitations Internet and email solicitations Phone solicitations In-person solicitations Did the organization have a written or key employees listed in Form 990, Pab If "Yes," list the 10 highest paid individent compensated at least \$5,000 by the organization have a written or key employees listed in Form 990, Pab If "Yes," list the 10 highest paid individent paid i	e Solici f Solici g Speci r oral agreement with any individuant VII) or entity in connection with iduals or entities (fundraisers) purs	tation of tation of al fundra al (includ profession	non-g gover ising ling of onal fi	overnment grants rnment grants events ficers, directors, trus undraising services?		Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have cu or con contribu	ustody trol of	(iv) Gross receipts from activity	to (c	Amount paid or retained by) fundraiser ed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
					_		
		+			_		
		+			_		
		-					
fotal			•				
3 List all states in which the organization or licensing.	is registered or licensed to solicit	contribu	ıtions	or has been notified	it is e	xempt from reg	gistration
					-		
					_		

		lle G (Form 990 or 990-EZ) 2018 THE MAE				1265361 Page 2
Pa	art	Fundraising Events. Complete if the of fundraising event contributions and ground fundraising event contributions.				
		or iditional string event contributions and gr	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			WWG GATA	ST. LOUIS	2.0	(add col. (a) through
			NYC GALA (event type)	GALA (event type)	(total number)	col. (c))
ne			(event type)	(cvent type)	(total hamber)	
Revenue	1	Gross receipts	1,030,884.	363,385.	968,846.	2,363,115.
	2	Less: Contributions	829,357.	272,967.	820,460.	1,922,784.
_	3	Gross income (line 1 minus line 2)	201,527.	90,418.	148,386.	440,331.
	4	Cash prizes				
	5	Noncash prizes				
90300	6	Rent/facility costs				
Direct Expenses	7	Food and beverages	140,408.	42,005.	46,532.	228,945.
Δ	8	Entertainment	54,206.	21,790.	64,283.	140,279.
	9	Other direct expenses	3,929.	26,623.	40,555.	71,107.
	10					440,331.
		Net income summary. Subtract line 10 from			<u>></u>	0.
Pa	irt I	Gaming. Complete if the organization	answered "Yes" on Form	990, Part IV, line 19, or r	eported more than	
ene		\$15,000 on Form 990-EZ, line 6a.	(a) Bingo	(b) Pull tabs/instant	(-) Ohb	(d) Total gaming (add
			(a) Dirigo	bingo/progressive bingo	(c) Other gaming	
eve			(a) Birigo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Revenue	1	Gross revenue	(a) Bingo	bingo/progressive bingo	(c) Other garning	
Reve	1		(a) Dirigo	bingo/progressive bingo	(c) Other gaming	
2003	1 2	Gross revenue Cash prizes	(a) Dingo	bingo/progressive bingo	(c) Other gaming	
2003	1	Cook prizes	(a) Dingo	bingo/progressive bingo	(c) Other gaming	
Expenses	2	Cash prizes Noncash prizes Bent/facility costs	(a) Dingo	bingo/progressive bingo	(c) Other gaming	
2003	3 4	Cash prizes Noncash prizes Rent/facility costs	(a) Dingo	bingo/progressive bingo	(c) Other gaming	
Expenses	2	Cash prizes Noncash prizes Bent/facility costs				
Expenses	3 4 5	Cash prizes Noncash prizes Rent/facility costs Other direct expenses	Yes_ %	Yes %	Yes%	
Expenses	3 4	Cash prizes Noncash prizes Rent/facility costs Other direct expenses				
Expenses	3 4 5	Cash prizes Noncash prizes Rent/facility costs Other direct expenses	Yes %	Yes %	Yes%	
Expenses	2 3 4 5	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor	Yes% No	Yes %	Yes%	
Direct Expenses	2 3 4 5 6 7 8	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through	Yes% No n 5 in column (d)	Yes %	Yes%	
© Direct Expenses	2 3 4 5 6 7 8 Ent	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7	Yes % No 1 5 in column (d) 2 from line 1 column (d) 3 ucts gaming activities:	Yes %	Yes%	
w C Direct Expenses	2 3 4 5 6 7 8 Entils t	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through	Yes % No 1 5 in column (d) 2 from line 1 column (d) 3 ucts gaming activities:	Yes %	Yes%	col. (a) through col. (c))
w C Direct Expenses	2 3 4 5 6 7 8 Entils t	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7 ter the state(s) in which the organization conducted the organization licensed to conduct gaming and	Yes % No 1 5 in column (d) 2 from line 1 column (d) 3 ucts gaming activities:	Yes %	Yes%	col. (a) through col. (c))
g a b	1 2 3 4 5 6 7 8 Ent st f	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7 ter the state(s) in which the organization conduct de organization licensed to conduct gaming and No," explain:	Yes% No n 5 in column (d) r from line 1 column (d) ucts gaming activities: ctivities in each of these s	Yes% No	Yes % No	col. (a) through col. (c)) Yes No
Direct Expenses	2 3 4 5 6 7 8 Ent Is t If "I	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7 ter the state(s) in which the organization conducted the organization licensed to conduct gaming and	Yes% No n 5 in column (d) r from line 1 column (d) ucts gaming activities: ctivities in each of these s	Yes% No	Yes% No	col. (a) through col. (c))
Direct Expenses	2 3 4 5 6 7 8 Ent Is t If "I	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7 ter the state(s) in which the organization conduct organization licensed to conduct gaming and No," explain:	Yes% No n 5 in column (d) r from line 1 column (d) ucts gaming activities: ctivities in each of these s	Yes% No	Yes % No	col. (a) through col. (c)) Yes No

Set	bedule G (Form 990 or 990-EZ) 2018 THE MARFAN FOUNDATION, INC. 52-	1265	361	Page 3
	Does the organization conduct gaming activities with nonmembers?		Yes	☐ No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?		Yes	□No
13				
á	a The organization's facility	13a		%
- 1	b An outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name Name		_	
	Address -			
15	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	☐ No
ŀ	of If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount			
	of gaming revenue retained by the third party > \$			
(c If "Yes," enter name and address of the third party:			
	Name Name			
	Address ►			
16	Gaming manager information:			
	Name •			
	Name >			
	Gaming manager compensation > \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?		Yes	No No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
Da	organization's own exempt activities during the tax year \$ Information, Provide the explanations required by Part Lline 2b, columns (iii) and (v); and and (v)			101
Fa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Pa 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	art III, Iin	es 9, 5	b, 10b,
	Tob, To, and Trb, as applicable. Also provide any additional information. See instructions.			
_				
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Schedule G	(Form 990 or 990-EZ) Supplemental Info	THE	MARFAN	FOUNDATION, I	NC.	52-1265361	Page 4
Part IV	Supplemental Info	rmation	(continued)				
Të							
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SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

▶ Go to www.rs.gov/Form890 for the latest information.

OMB No. 1545-0047	2018	Open to Public	Inspection

Name of the organization THE MAREAN FOUNDATION	I POINIDAT	TON TMC					Employer identification number
Part I General Information on Grants and Assistance	d Assistance						TOCCOST SC
1 Does the organization maintain records to substantiate the amount of th	substantiate the	amount of the grants	or assistance, the g	grantees' eligibility	or the grants or assis	e grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	uo
	ance?)		X Yes No
<u>i</u>	sedures for month	pring the use of grant	of grant funds in the United States	States,			
Grants and Other Assistance to Domestic Organizations and Domestic Governments. Corrections that received more than \$5,000. Part II can be duplicated if additional grants is needed.	Omestic Organiz	ations and Domestic	- 63	omplete if the orga id	nization answered "Y	Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
BAYLOR COLLEGE OF MEDICINE ONE BAYLOR PLAZA, BCM 206 HOUSTON, TX 77030	74-1613878	\$01(C)(3)	.609,65	á			RESEARCE
BOSTON UNIVERSITY ONE SILBER WAY BOSTON MA 02115	04-2103547	501(C)(3)	37,500.	o			RESEARCH
CLEVELAND CLINIC FOUNDATION 9500 EUCLID AVENUE CLEVELAND OH 44195	34-0714585	501(C)(3)	25,000.	0			RESEARCH
DUKB UNIVERSITY 324 BLACKWELL ST WASHIN BLDG NO 850 DURHAM NC 27708	56-0532129	\$01(C)(3)	37,500.	0			RESEARCH
EMORY UNIVERSITY 1599 CLIFTON ROAD, 3RD FLOOR SUITE ATLANTA GA 30322	58-0566256	501(C)(3)	25,000.	0			RESEARCH
JOHNS HOPKINS SCHOOL OF MEDICINE 1101 EAST 33RD STREET BALTIMORE, MD 21218	52-0595110 501(C)(3)	501(C)(3)	402,500.	0			PESEARCH
First total number of section 501(c)(3) and dovernment organizations listed in the line 1 table	d dovernment ord	anizations listed in the	a line 1 table				16

3 Enter total number of other organizations listed in the line 1 table
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2018)

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Continuation of Grants and Other Assistance to Governments and Organizations in the United States	ssistance to Gov	ernments and Organ	izations in the Uni		(Schedule I Form 890), Part II.	it II.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER AT HOUSTON - 7000 FANNIN ST, #1200 - HOUSTON TX 77030	74-1761309	501(C)(3)	. 25,000.	ď			RESEARCH
MAYO CLINIC ROCHESTER 200 FIRST STREET SW ROCHESTER MN 55902	41-6011702	501(C)(3)	29,100.	0			PESEARCH
WOMEN & INFANTS HOSPITAL OF RHODE ISAND - 101 DUDLEY STREET - PROVIDENCE, RI 02905	05-0258937 501(C)(3)	501(C)(3)	25,000.	0			RESEARCH
THE ARNOLD P. GOLD FOUNDATION 1325 SIXTH AVE, 27TH FLOOR NEW YORK NY 10019	22-3052098	501(C)(3)	5,000.	0			KESKARCH
THE BOARD OF REGENTS OF THE UNIVERSITY OF WISCONSIN SYSTEM - 21 NORTH PART ST - ROOM 5352 - MADISON, WI 53715-1218	39-1805963	501(C)(3)	37,500.	.0			BDSWASSE
THE REGENTS OF THE UNIVERSITY OF CALIFORNIA - 3333 CALIFORNIA STREET, SUITE 315 - SAN FRANCISCO CA 94143	94-6036493	501(C)(3)	.000,05	*0			RESEARCH
WASHINGTON UNIVERSITY OF ST. LOUIS 700 ROSEDALE AVENUE ST. LOUIS MO 63112-1408	43-0636111	501(C)(3)	100,700.	0			AESBARCH
WEILL MEDICAL COLLEGE OF CORNELL UNIVERSITY - 575 LEXINGTON AVE - NEW YORK NY 10022	13-1623978 501(C)(3)	501(C)(3)	50,400	0			RE-BARCH
BOARD OF TRUSTEES OF THE LELAND STANDFORD JUNIOR UNIVERSITY - 3145 PORTER DRIVE - PALO ALTO CA 94304	94-1156365	170(C)(1)	25,000	o			P. P. E. B. R. C. H.

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Page 1

	d States (Schedule I Form 990), Part II.)
del Form 890) THE MARFAN FOUNDATION, INC.	Continuation of Grants and Other Assistance to Governments and Organizations in the United State
Scheo	Part

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN SOCIETY OF MATRIX BIOLOGY 9650 ROCKVILLE PIKE BETHESDA, MD 20814	94-2055099	501(C)(3)	.000,5	0			RESEARCH
STANFORD UNIVERSITY MEDICAL CENTER 300 PASTEUR DRIVE STANFORD CA 94305	94-6174066 501(C)(3)	501(C)(3)	7,200.	*0			PESARCH
	0						
							Schedule I (Form 990)

Page 2

52-1265361

Form 990; (2018) THE MARPAN POUNDATION, INC.

Grants and Other Assistance to Domestic Individuals. Complete if the organization enswered "Yes" on Form 990; Part IV, line 22.

Part III can be duplicated if additional space is needed. Schedule (Form 990) (2018)
Part III Grants and Other

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of recusion (book, FMV, apprilest, other)	(f) Description of noncash assistance
CONFERENCE AWARD - HOTEL	53	24,062.	0		
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column fby, and any other additional information.	tuired in Part I, line	2: Part III, column	ib), and any other ad	ditional information.	
PART I, LINE 2					
PROCEDURES FOR MONITORING THE USE C	OF GRANT FUNDS:	FUNDS: THE	GRANT REC	GRANT RECIPIENTS MUST	
SUBMIT INTERMEDIATE AND FINAL PROGRESS	RESS REPORTS	AND	FINANCIAL REPORTS.	PORTS.	

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information. OMB No 1545-0047

Open to Public Inspection

Name of the organization

Part I | Questions Regarding Compensation

Department of the Treasury

Internal Revenue Service

THE MARFAN FOUNDATION, INC.

Employer identification number 52-1265361

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		9	
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
			- 4	
b	, , , , , , , , , , , , , , , , , , , ,			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which if any of the following the filing exemination used to establish the companyation of the exeminations			
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's		1	
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to		- 23	
	establish compensation of the CEO/Executive Director, but explain in Part III. X Compensation committee X Written employment contract			
		-		
	Independent compensation consultant X Compensation survey or study X Form 990 of other organizations X Approval by the board or compensation committee	1/ -		
	X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing		128	
	organization or a related organization:			
а	Receive a severance payment or change of control payment?	4a		Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
_	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.	10		
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:	-	-	37
a	The organization?	5a	-	X
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.		9.11	
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			X
a	The organization?	6a	-	X
b	Any related organization?	6b		^
-	Tes on the da of ob, describe in that in.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	_		v
	not described on lines 5 and 6? If "Yes," describe in Part III	7	-	X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the		-	X
	initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		Λ
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			-

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2018

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

5. 12,873. 408,963. or rep 6. 12,873. 224,849. or 0 0. 0. 0. 0. 0. 0 1. 326. 172,603. or 0 0. 0. 0. 0. 0. 0. 0 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0			(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(i) 374,475. 0.* 0.* 21,615. 12,873. 408,963. (ii) 195,840. 0.* 0.* 0.* 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(C)-(i)(B)	In column (B) reported as deferred on prior Form 990
(ii) 195,840; 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0,	MICHAEL L.	E	374,475	0	0	21,	- 1	408,963	0
10 195,840.	PRESIDENT/CEO	(III)	0	0	0		0	0	0
(ii) 223,676; 0.		(1)	195,840	0	0	16,	12,873.	224,	0
(n) 223,676. 0. 0. 7,362. 12,917. 243,955. (m) 167,16. 0. 0. 0. 0. 0. 0. (m) 167,16. 0. 0. 5,161. 326. 172,603. 0. (m) 0. 0. 0. 0. 0. 0. 0. (m) 0. 0. 0. 0. 0. 0. 0. 0. (m) 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. (m) 0. <th< td=""><td>CFO/COO</td><td>(II)</td><td></td><td></td><td>0</td><td></td><td>0</td><td></td><td>0</td></th<>	CFO/COO	(II)			0		0		0
(ii) 167,116. 0.	(3) HELAINE BARUCH	(223,		0	7	1	243,955	0
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PART I, LINE 3:
VE RELY ON THE WRITTEN COMPENSATION SURVEYS PUBLISHED BY PRM CONSULTING
BROUP WHICH PROVIDES A MANAGEMENT COMPENSATION REPORT FOR NOT-FOR-PROFIT
DRGANIZATIONS. WE REVIEW THIS REPORT ANNUALLY TO STAY INFORMED REGARDING
COMPENSATION TRENDS.
Schedule J (Form 990) 2018

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

► Go to www.rs.gow/Form990 for instructions and the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization

THE MARFAN FOUNDATION INC.

Employer identification number 52-1265361

Pa	rt I Types of Property				377 377 250400		
		(a) Check if applicable	(b) Number of contributions or contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determ noncash contribution	_	is
1	Art · Works of art						
2	Art - Historical treasures						
3	Art - Fractional interests						
4	Books and publications						
5	Clothing and household goods						
6	Cars and other vehicles						
7	Boats and planes						
8	Intellectual property						
9	Securities - Publicly traded	X	10	39,214.	FMV		
10	Securities - Closely held stock						
11	Securities - Partnership, LLC, or trust interests						
12	Securities - Miscellaneous						
13	Qualified conservation contribution -						
14	Augustian Contribution - Other		- E				
15	Real estate - Residential						
16	Real estate - Commercial						
17	Real estate - Other						
18	Collectibles						
19	Food inventory		7				
20	Drugs and medical supplies						
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	Other >						
26	Other >						
27	Other						
28	Other •		e e				
29	Number of Forms 8283 received by the organiz	ation during	the tax year for co	ontributions			
	for which the organization completed Form 828					0	
					(an)	Yes	No
30a	During the year, did the organization receive by	contribution	n any property repo	orted in Part I, lines 1 through	n 28, that it		
	must hold for at least three years from the date	of the initial	contribution, and	which isn't required to be us	ed for		
	exempt purposes for the entire holding period?			FT-100-717-300-71-100000000000000000	30a	1	Х
b	If "Yes," describe the arrangement in Part II.						
31	Does the organization have a gift acceptance p	olicy that re	quires the review o	f any nonstandard contributi	ons? 31	X	
32a	Does the organization hire or use third parties of						
	contributions?				32a	X	127
b	If "Yes," describe in Part II.		WITH SECURIORI	STATE OF THE PARTY	ALAMAN MERCHAN — 195		
33	If the organization didn't report an amount in co	olumn (c) for	a type of property	for which column (a) is chec	ked,		
- 8	describe in Part II.						

Schedule M (Form 990) 2018 THE MARFAN FOUNDATION, INC.	52-1265361 Page 2
Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 3 is reporting in Part I, column (b), the number of contributions, the number of items received, or a contribution part for any additional information.	33, and whether the organization mbination of both. Also complete
SCHEDULE M, LINE 32B:	
THE MARFAN FOUNDATION, INC. USES THE SERVICES OF AN INVES	STMENT FIRM TO
SELL DONATED SECURITIES.	

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

THE MARFAN FOUNDATION, INC.

Employer identification number

52-1265361 FORM 990 PART I, LINE 1 DESCRIPTION OF ORGANIZATION MISSION: THE MARFAN FOUNDATION CREATES A BRIGHTER FUTURE FOR EVERYONE AFFECTED BY MARFAN SYNDROME AND OTHER RELATED CONDITIONS. - WE PURSUE THE MOST INNOVATIVE RESEARCH AND MAKE SURE THAT IT RECEIVES PROPER FUNDING. WE INFORM THE PUBLIC AND EDUCATE THE PATIENT COMMUNITY TO INCREASE EARLY DIAGNOSIS AND ENSURE LIFE-SAVING TREATMENT. WE PROVIDE RELENTLESS SUPPORT TO FAMILIES, CAREGIVERS, AND HEALTHCARE PROVIDERS. WE WILL NOT REST UNTIL WE'VE ACHIEVED VICTORY IN A WORLD IN WHICH EVERYONE WITH MARFAN SYNDROME OR OTHER RELATED CONDITIONS RECEIVES A PROPER DIAGNOSIS GETS THE NECESSARY TREATMENT. AND LIVES A LONG AND FULL LIFE. FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

THE FOUNDATION'S VOLUNTEERS FOR VICTORY PROGRAM OFFERS OPPORTUNITIES FOR AFFECTED PEOPLE TO CONNECT WHILE HELPING TO ADVANCE THE FOUNDATION'S MISSION.

FORM 990 PART VI SECTION A LINE 2:

CARYN KAUFFMAN, CPA TREASURER HAS FAMILY RELATIONSHIP WITH GARY KAUFFMAN, DIRECTOR

FORM 990 PART VI SECTION B LINE 11B:

THE 990 IS REVIEWED BY THE CEO, CFO AND THE AUDIT COMMITTEE. ONCE THE

AUDIT COMMITTEE APPROVES THE 990, IT IS THEN PRESENTED TO THE BOARD FOR

Employer identification number 52-1265361

REVIEW BEFORE FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

ALL OFFICERS, DIRECTORS AND KEY EMPLOYEES ARE REQUIRED TO COMPLETE A

CONFLICT OF INTEREST FORM ANNUALLY WHICH INCLUDES DISCLOSURE OF POSSIBLE

CONFLICTS OF INTEREST. THESE DOCUMENTS ARE MAINTAINED AT THE

ORGANIZATION'S HEADQUARTERS. ANY POTENTIAL CONFLICTS OF INTEREST ARE

DISCLOSED TO THE BOARD. OFFICERS AND DIRECTORS ARE REQUIRED TO ABSTAIN FROM

ANY VOTE WHICH HAS A POTENTIAL CONFLICT OF INTEREST.

FORM 990, PART VI, SECTION B, LINE 15:

THE EXECUTIVE COMMITTEE CONDUCTS AN ANNUAL PERFORMANCE REVIEW OF THE

PRESIDENT/CEO WHICH INCLUDES DIRECT FEEDBACK FROM MEMBERS OF THE BOARD. AN

EXECUTIVE SESSION IS CONDUCTED AS PART OF THE REVIEW AND AN EXECUTIVE

SESSION IS ALSO CONDUCTED WITH THE BOARD REPORTING THE RESULTS AND ANY

CHANGE IN COMPENSATION CONSIDERATION. COMPENSATION SURVEYS ARE ALSO

REFERENCED IN DETERMINING SALARIES. IN ADDITION, THE FOUNDATION CONDUCTS AN

ANNUAL PERFORMANCE REVIEW FOR ALL OF ITS OFFICERS, AND ALL OTHER EMPLOYEES.

THE ANNUAL PERFORMANCE REVIEW INCLUDES FEEDBACK FROM THE CEO, DISCUSSES ANY

ACCOMPLISHMENTS DURING THE YEAR AND INCLUDES RECOMMENDATIONS FOR

IMPROVEMENTS AS NEEDED. COMPENSATION CHANGES ARE BASED ON PERFORMANCE AND

NONPROFIT COMPENSATION SURVEYS.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL, AK, AR, CA, CT, FL, GA, IL, KS, KY, MD, MA, MI, MN, MO, NH, NJ, NM, NY, NC, OH, OK, OR, PA, RI

SC, TN, UT, VA, WV, WI, HI, MS, NV, ND, LA