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CLIENT'S COPY



October 23, 2024

THE MARFAN FOUNDATION, INC. 22 MANHASSET AVENUE PORT WASHINGTON, NY 11050-2023

THE MARFAN FOUNDATION, INC .:

Enclosed are the original and one copy of the 2023 Exempt Organization return, as follows...

2023 Form 990

The attached PDF copies are required to be retained for the Organization to be compliant with the document retention requirements established by the Internal Revenue Service (IRS). Please have an officer sign and then retain them for your records. We recommend that you retain all pertinent tax records for a period of at least three years as taxing agencies possess the authority to request these supporting documents.

Upon receipt of the signed Form 8879, we will immediately electronically file the return(s) with the IRS.

If your return contains Schedule B, *Schedule of Contributors,* please note that public inspection copy of Form 990 containing redacted version of Schedule B is the only version which should be provided to any requesting third party or the general public.

Please call us at any time should you have any questions relating to your tax situation, business, financial or estate planning or any other financial matters. As a part of your advisory team, we will be happy to assist you.

Tax or Professional advice contained in or accompanying this document, unless otherwise specifically stated, is not intended or written to be used, and cannot be used, for the purpose of (I) avoiding penalties under the Internal Revenue code, or (II) promoting, marketing, or recommending to another party any transaction or matter that is contained in or accompanying this document. In addition, unless otherwise specifically stated, any advice provided shall not be deemed a formal tax opinion upon which the addressee can rely.

We sincerely appreciate the opportunity to serve you. If you have any questions regarding the returns, please do not hesitate to call.

Very truly yours,

Mary Ann Mendel Marcum LLP

TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING

June 30, 2024

Prepared For:

THE MARFAN FOUNDATION, INC. 22 MANHASSET AVENUE PORT WASHINGTON, NY 11050-2023

Prepared By:

Marcum LLP 10 Melville Park Road Melville, NY 11747-3146

Amount Due or Refund:

Not applicable

Make Check Payable To:

Not applicable

Mail Tax Return and Check (if applicable) To:

Not applicable

Return Must be Mailed On or Before:

Not applicable

Special Instructions:

This return has qualified for electronic filing. After you have reviewed the return for completeness and accuracy, please sign, date and return Form 8879-TE to our office. We will transmit the return electronically to the IRS and no further action is required. Return Form 8879-TE to us by November 15, 2024

If your tax return(s) are being electronically filed, we cannot release them until we have your signed authorization(s). After reviewing your return(s) for accuracy and completeness, please sign and email your authorization(s) to <u>8879tax@marcumllp.com</u> or fax to (212) 485-5514.

	3879	-TE		IR	S E-file Signature for a Tax Exer	e Authorization Mot Entity	on	-	OMB No. 1545-0047
Form •			For calendar ve	ar 2023 or 1	iscal year beginning JUL 1		N 30	20 2 4	0000
			r or ourorraur y		Do not send to the IRS. Ke		, <u>, ,</u>		2023
	ent of the Revenue S			Go	to www.irs.gov/Form8879TE		ion.		
Name o	of filer				v			EIN or SSN	
		THE MA	RFAN FO	UNDA	TION, INC.			52-12	65361
Name a	and title	of officer or pe	rson subject to	tax M	ICHAEL L. WEAMER				
					RESIDENT AND CEC)			
Part	: I	Type of	Return and	l Retur	n Information				
Form sor 10a which	5330 fil below, ever is a	ers may ente , and the amo	r dollars and o ount on that li	cents. For ne for the	ing this Form 8879-TE and enter all other forms, enter whole do return being filed with this form But, if you entered -0- on the ret	llars only. If you check th n was blank, then leave l	he box on li line 1b, 2b,	ne 1a, 2a, 3 3b, 4b, 5b, 1	a, 4a, 5a, 6a, 7a, 8a, 9a, 6b, 7b, 8b, 9b, or 10b,
1a	Form	990 check ł	nere	Хb	Total revenue, if any (Form 9	90, Part VIII, column (A)	, line 12)		1b <u>5,486,020.</u>
2a	Form	990-EZ che	ck here	b b	Total revenue, if any (Form 9	90-EZ, line 9)			2b
3a	Form	1120-POL	check here	b b	Total tax (Form 1120-POL, lir	ne 22)			3b
4a	Form	990-PF che	ck here	b	Tax based on investment in	come (Form 990-PF, Pa	art V, line 5)		4b
5a	Form	8868 check	here		Balance due (Form 8868, line				5b
6a	Form	990-T chec	k here	b	Total tax (Form 990-T, Part II	I, line 4)			6b
7a	Form	4720 check	here		Total tax (Form 4720, Part III				7b
8a		5227 check			FMV of assets at end of tax				8b
9a		5330 check		L b	Tax due (Form 5330, Part II,	ine 19)			9b
10a		8038-CP ch			Amount of credit payment r				10b
Part				<u> </u>	e Authorization of Office				
					m an officer of the above entity		-	-	
					ules and statements, and, to the				
later the	han 2 b ent of ta	usiness days axes to receiv	prior to the p confidential	ayment (s informat	unt. To revoke a payment, I mu settlement) date. I also authoriz ion necessary to answer inquiri ure for the electronic return and	e the financial institution es and resolve issues rel	is involved in lated to the	n the proces payment. I h	sing of the electronic ave selected a
_		ne box only		-					11111
L	X I au	ithorize MA	RCUM LL	P			to	enter my PII	
					ERO firm name				Enter five numbers, but do not enter all zeros
	witi on	h a state age the return's c an officer or	ncy(ies) regula lisclosure con person subjec	ating char sent scre t to tax w	vith respect to the entity, I will e	te program, I also autho nter my PIN as my signa	rize the afor ature on the	ementioned tax year 202	ERO to enter my PIN 3 electronically filed
					urn that a copy of the return is PIN on the return's disclosure o		agency(ies) r	egulating ch	arities as part of the
Signatur Part		r or person subject Certifica	et to tax Ition and A	uthent	cation			Date	
ERO's	EFIN/	PIN. Enter yo	our six-digit ele	ectronic f	ling identification				
numbe	er (EFIN	I) followed by	your five-digi	t self-sele	cted PIN.		811747 ter all zeros		
submi	-	is return in ac	-	-	vhich is my signature on the 20 uirements of Pub. 4163, Mode	-			
ERO's	signatur	e				Date	_10/	23/24	
					O Must Retain This For				
			Do N	ot Subr	nit This Form to the IRS	Unless Requested	a 10 Do §	50	0070 ==
For Pr	ivacy A	Act and Pape	erwork Reduc	ction Act	Notice, see instructions.				Form 8879-TE (2023)
LHA	302521 0	1-05-24							

Form	990

Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.



Internal Revenue Service 1, 2024 A For the 2023 calendar year, or tax year beginning JUL 2023 and ending JUN 30. Check if applicable: C Name of organization D Employer identification number В Address change THE MARFAN FOUNDATION, INC. Name change 52-1265361 Doing business as Initial Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ termin-ated 22 MANHASSET AVENUE 516-883-8712 9,540,484. City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ Amended 11050-2023 PORT WASHINGTON, NY H(a) Is this a group return Applica-tion pending 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 No Tax-exempt status: X 501(c)(3) 527 501(c) ((insert no.) 4947(a)(1) or If "No," attach a list. See instructions WWW.MARFAN.ORG J Website: H(c) Group exemption number **K** Form of organization: **X** Corporation Other L Year of formation: 1981 M State of legal domicile: MD Trust Association Part I Summary Briefly describe the organization's mission or most significant activities: SEESCHEDULE O. 1 Activities & Governance 2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 21 3 Number of voting members of the governing body (Part VI, line 1a) 3 21 Number of independent voting members of the governing body (Part VI, line 1b) 4 4 28 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 5 5 500 Total number of volunteers (estimate if necessary) 6 6 Ο. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 0. 7h Prior Year **Current Year** 7,656,928. 4,878,044. Contributions and grants (Part VIII, line 1h) 8 Revenue 225,206. 131,150. 9 Program service revenue (Part VIII, line 2g) 313,246. 476,826. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 0. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0. 11 8,195,380. 5,486,020. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 1,115,927. 1,172,413. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 13 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 3,415,406. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 3,721,663. 15 Expenses 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. 732.597. b Total fundraising expenses (Part IX, column (D), line 25) 2,227,164. 1,752,700. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 17 6,646,776. 6,758,497. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 1,436,883. -1,160,756. Revenue less expenses. Subtract line 18 from line 12 19 **Beginning of Current Year** End of Year P 18,561,612. 18,118,070. 20 Total assets (Part X, line 16) 1. 718,116. 1,860,516. 21 Total liabilities (Part X, line 26) let Elet 16,843,496. 16,257,554 Net assets or fund balances. Subtract line 21 from line 20 22 Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign	Signature of officer			Date				
Here	MICHAEL L. WEAMER, PRESID	ENT AND CEO						
	Type or print name and title							
	Print/Type preparer's name	Preparer's signature	Date	Check	PTIN			
Paid	MARY ANN MENDEL		10/23/	/24 self-employed	P00551302			
Preparer	Firm's name MARCUM LLP			Firm's EIN 11-	1986323			
Use Only	Firm's address 10 MELVILLE PARK	ROAD						
	MELVILLE, NY 1174	7-3146		Phone no. (631) 414-4000			
May the I	Aay the IRS discuss this return with the preparer shown above? See instructions							
LHA For	Paperwork Reduction Act Notice, see the separ	ate instructions. 332001 12-21-23			Form 990 (2023)			
S	EE SCHEDULE O FOR ORGANIZA	ATION MISSION STATEME	ENT CO	ΝΤΙΝΊΑΤΙΟΙ	N			

		m Service Accomplishments ns a response or note to any line in this Part III	X
1	Briefly describe the organization's SEE SCHEDULE O.		
2		y significant program services during the year which were not listed on the	Yes X No
3		cting, or make significant changes in how it conducts, any program services	s?Yes X No
4	Describe the organization's progra Section 501(c)(3) and 501(c)(4) org	am service accomplishments for each of its three largest program services, a ganizations are required to report the amount of grants and allocations to ot	
4a	revenue, if any, for each program (Code:) (Expenses \$ SEE SCHEDULE O •	service reported. 2,248,000. including grants of \$1,090,810.) (Re	evenue \$ 0 .
4b	(Code:) (Expenses \$ SEE SCHEDULE O.	2,059,592. including grants of \$ 76,323.) (Re	venue \$ 131,140.
4c	(Code:) (Expenses \$ SEE SCHEDULE O.	1,140,112. including grants of \$5,280.) (Re	evenue \$10 .
	Other program services (Describe	on Schedule O.)	
4d	(Expenses \$	including grants of \$) (Revenue \$)
4d 4e	Total program service expenses	5,447,704.	

Form	990	(2023)

 Form 990 (2023)
 THE MARFAN FOUNDATION, INC.

 Part IV
 Checklist of Required Schedules

			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? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	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			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			37
-	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			v
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		х
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			х
•	Schedule D, Part III	8		<u></u>
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?	9		х
10	If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	9		
10		10	х	
11	or in quasi-endowments? <i>If</i> "Yes," <i>complete Schedule D, Part V</i> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X,			
••	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	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			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		_X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		37	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
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	4-	v	
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			v
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	47		v
10	column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	18	х	
19	1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"	10	- 23	
19		19		х
20a	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19 20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
	domestic government on Part IX, column (A), line 1? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i>	21	х	
332003	12-21-23			(2023)

3

332003 12-21-23

2023.04030 THE MARFAN FOUNDATION, IN 306512_1

Form	990	(2023)
	330	

 Form 990 (2023)
 THE MARFAN FOUNDATION, INC.
 52-1265361
 Page 4

 Part IV
 Checklist of Required Schedules (continued)
 Continued)
 Continued

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
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	Х	
24a	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		х
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
Ŭ		24c		
Ь	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	<u>2</u> 1 0		
zJa		25a		х
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	258		
D	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	051		x
~~	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			37
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		<u> </u>
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member 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 the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		<u>X</u>
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	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?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u> .		
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 27			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
332004	12-21-23	Form	990	(2023)
	4			

2023.04030 THE MARFAN FOUNDATION, IN 306512_1

Form	990 (2023) THE MARFAN FOUNDATION, INC.		52-1265	361	P	age 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)					
				_	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	2a	28			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		2b	Х	
				3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	ο		3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other a					
	financial account in a foreign country (such as a bank account, securities account, or other financial a			4a		Х
b	If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccoun	ts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact	ction?		5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th					
	any contributions that were not tax deductible as charitable contributions?			6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributi					
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices r	provided to the payor?	7a	Х	
				7b	Х	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					
•	to file Form 8282?	10104		7c		х
Ь	If "Yes," indicate the number of Forms 8282 filed during the year	7d		10		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or			7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra			7f		X
-						
8						
U	sponsoring organization have excess business holdings at any time during the year?					
9	Sponsoring organizations maintaining donor advised funds.			8		
				9a		
				9b		
10	Section 501(c)(7) organizations. Enter:			30		
	Initiation fees and capital contributions included on Part VIII, line 12	10a	1			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a				
	Section 501(c)(12) organizations. Enter:					
	Gross income from members or shareholders	11a	1			
	Gross income from other sources. (Do not net amounts due or paid to other sources against	110				
U		11b				
100	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		2	12a		
		1041		128		
b 13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120	1			
				13a		
a	Note: See the instructions for additional information the organization must report on Schedule O.			154		
h	Enter the amount of reserves the organization is required to maintain by the states in which the					
U	organization is licensed to issue qualified health plans	13b	1			
•		13c				
	Enter the amount of reserves on hand	· · · · ·		14a		х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu			14a		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remunel excess parachute payment(s) during the year?			15		х
	excess parachute payment(s) during the year?			15		23
16	If "Yes," see the instructions and file Form 4720, Schedule N.	tinco	mo?	16		х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment If "Yea" complete Form 4720. Schedule O		ne?	16		Δ
47	If "Yes," complete Form 4720, Schedule O.	T .'' '.T.' -				
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac					
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
	If "Yes," complete Form 6069.			Г <u>о</u> тт	900	(2023)
332005	12-21-23			rorm	330	(2023)

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THE MARFAN FOUNDATION, INC.

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X

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 on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI	
Section A. Governing Body and Management	

					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	21			
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	21			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	ny other			
	officer, director, trustee, or key employee?			2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the	e direc	supervision			
	of officers, directors, trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 wa	s filed?	4	Х	
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?		5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point	one or		ſ	
	more members of the governing body?			7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st	ockho	ders, or		ſ	
	persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	r 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 read	ched a	the		ſ	
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue	Code.)			
					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 ch	apters	affiliates,		ſ	
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	Х	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	/ befor	e filing the form?	11a	Х	
b	Describe on 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 cont	licts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	′es," d	escribe		ſ	
	on Schedule O how this was done			12c	X	
13	Did the organization have a written whistleblower policy?			13	X	
14	Did the organization have a written document retention and destruction policy?			14	X	
15	Did the process for determining compensation of the following persons include a review and approva	l by ine	lependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
	The organization's CEO, Executive Director, or top management official			15a	X	<u> </u>
b	Other officers or key employees of the organization			15b	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen	nent w	th a			77
	taxable entity during the year?			<u>16a</u>		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat		-			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ					
<u> </u>	exempt status with respect to such arrangements?			16b		
	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed <u>SEE SCHEDULE</u>		T () () () () ()		<u> </u>	<u> </u>
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and	nd 990	I (section 501(c)(3)	s only)	availat	ble
	for public inspection. Indicate how you made these available. Check all that apply.	_				
40	X Own website Another's website X Upon request Other (explain		,	J.C	-:-!	
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	ntiict c	i interest policy, an	a tinan	cial	
00	statements available to the public during the tax year.		l rooordo			
20	State the name, address, and telephone number of the person who possesses the organization's boc INDERJEET KAUR - $516-883-8712$	oks and	recoras			
	22 MANHASSET AVENUE, PORT WASHINGTON, NY 11050					
	· · ·			Eoro	1 990	(2022)
532006	6 12-21-23 6			ruill	,000	(2023)

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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, Trustees, 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, directors, trustees (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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See the instructions for the order in which to list the persons above.

____ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A)	(B) Average			(Pos	C) itior			(D) Reportable	(E) Reportable	(F) Estimated
Name and the	hours per	hours per box, unles		(do not check more than one box, unless person is both an officer and a director/trustee)			ı an	compensation	compensation	amount of
	week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer D		Highest compensated solution		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations
(1) MICHAEL L. WEAMER	35.00									
PRES/CEO				Х				457,343.	0.	27,314.
(2) HELAINE BARUCH	35.00									
CHIEF DEVELOPMENT OFFICER						X		243,822.	0.	17,371.
(3) JOSEPHINE GRIMA	35.00									
CHIEF SCIENCE OFFICER						X		207,595.	0.	17,371.
(4) EILEEN NOVINS	35.00									
CHIEF GLOBAL BUSINESS DEVEL. OFFICER						X		189,021.	0.	17,371.
(5) INDERJEET KAUR, CPA	35.00									
CHIEF FINANCIAL OFFICER				Х				154,779.	0.	17,371.
(6) LAUREN E. MAY	35.00									
DIRECTOR OF RESEARCH						X		131,937.	0.	17,371.
(7) JUDITH GIBALDI	35.00									
CHIEF OPERATIONS OFFICER				Х				118,377.	0.	27,314.
(8) KIMBERLY K. HUDDLESTON	35.00									
VP. OF DEVELOPMENT						X		117,954.	0.	17,371.
(9) BERT MEDINA	8.00									
CHAIR		Х		Х				0.	0.	0.
(10) CORY A. EAVES	1.00									
IMMEDIATE PAST CHAIR		Х		Х				0.	0.	0.
(11) CARYN E. KAUFFMAN, CPA	3.00									
TREASURER		Х		Х				0.	0.	0.
(12) PATRICIA MCCABE ESTRADA	1.00									
SECRETARY		Х		Х				0.	0.	0.
(13) JERRY L. LERMAN	1.00									
DIRECTOR		Х						0.	0.	0.
(14) ALAN BRAVERMAN, MD	1.00									
DIRECTOR		Х						0.	0.	0.
(15) BRANDY BANKS HOTCHKISS	1.00									
DIRECTOR		Х						0.	0.	0.
(16) GIL BASHE	1.00									
DIRECTOR		Х						0.	0.	0.
(17) JOAQUIN RAMOS JR.	1.00									
DIRECTOR		Х						0.	0.	0.
332007 12-21-23										Form 990 (2023)

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Form 990 (2023)

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Form 990 (2023) THE MARF2				-					52-1265	361	Page 8
Part VII Section A. Officers, Directors, Trus	tees, Key Emp	ploye	ees,	and	l Hig	ghes	st Co	ompensated Employee	s (continued)		
(A)	(B)			(0				(D)	(E)	(F	-)
Name and title	Average	(da		Posi				Reportable	Reportable	Estim	nated
	hours per	box,	, unles	ss per	son i	than o s both	n an	compensation	compensation	amou	int of
	week	offic	cer an	d a di	irecto	or/trus	tee)	from	from related	oth	ner
	(list any	ector						the	organizations	comper	nsation
	hours for	r dire				ted		organization	(W-2/1099-MISC/	from	the
	related	tee o	ustee			ensat		(W-2/1099-MISC/	1099-NEC)	organi	zation
	organizations	l trus	nal tr		oyee	dwo		1099-NEC)		and re	elated
	below	Individual trustee or director	Institutional trustee	cer	ƙey employee	Highest compensated employee	Former			organiz	zations
	line)	Indi	Inst	Officer	Key	High	For				
(18) JEFFREY C. LESAGE	1.00									1	•
DIRECTOR		Х						0.	0.	 	0.
(19) SINCLAIR LI	1.00									1	
DIRECTOR		Х						0.	0.		0.
(20) DAVID WARREN	1.00										
DIRECTOR		х						0.	0.	1	0.
(21) ANDREW TOY	1.00										
DIRECTOR		х						0.	0.	1	0.
(22) GARY KAUFFMAN	1.00							• •			
DIRECTOR		x						0.	0.		0.
(23) JON TULLIS	1.00										<u> </u>
DIRECTOR	1.00	x						0.	0.	1	0.
(24) SCOTT D. AVITABILE, ESQ	1.00	~						0.	0.		0.
	1.00	77						0	0	1	0
DIRECTOR	1 00	X						0.	0.	 	0.
(25) ANTHONY YASICK, MD	1.00								•	1	•
DIRECTOR		Х						0.	0.	 	0.
(26) JUAN BOWEN, MD	1.00									1	
DIRECTOR		Х						0.	0.		0.
1b Subtotal								1,620,828.	0.	158,	854.
c Total from continuation sheets to Part VI								0.	0.		0.
_d Total (add lines 1b and 1c)								1,620,828.	0.	158,	854.
2 Total number of individuals (including but n) wh	o re	ceived more than \$100.	000 of reportable		
compensation from the organization						,		· · · · · · · · · · · · · · · · · · ·	I		8
										Ye	
3 Did the organization list any former officer.	director trust	oo k		mol	0.000	a or	hia	hest compensated empl			
	-		•	•	•		Ŭ			3	x
line 1a? If "Yes," complete Schedule J for s										3	
4 For any individual listed on line 1a, is the su											7
and related organizations greater than \$150	,		•							4 X	
5 Did any person listed on line 1a receive or a											37
rendered to the organization? If "Yes," con	nplete Schedule	e J fo	or su	ich p	bers	on .				5	X
Section B. Independent Contractors											
1 Complete this table for your five highest co	mpensated ind	lepe	nder	nt co	ontra	actor	rs th	at received more than \$	100,000 of compensa	tion from	
the organization. Report compensation for	the calendar ye	ear e	ndin	ig w	ith c	or wi	thin	the organization's tax y	ear.		
(A)								(B)		(C)	
Name and business	address	NC	ONE	2				Description of s	ervices C	Compensa	ation
							+				
2 Total number of independent contractors (i	•	ot lin	nited	to t	thos	se lis	ted	above) who received mo	ore than		
\$100,000 of compensation from the organi					0)					0
SEE PART VII, SECTION	A CONT	τN	UA'	ΤŢ	ON	S	HE:	ETS		Form 99	U (2023)
332008 12-21-23											

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (A) (B) (C) (D) (E) Name and title Average hours per week (list any hours for related organizations below line) Position (check all that apply) Reportable compensation from the organizations (W-2/1099-MISC) Reportable compensation from related organizations (W-2/1099-MISC) (27) RAY CHEVALLIER 1.000 X 0 0 0 DIRECTOR X 0 0 0	
Name and title Average hours per week (list any hours for related organization below line) Position (check all that apply) Reportable compensation from the organization (W-2/1099-MISC) Reportable compensation from the organization (W-2/1099-MISC) (27) RAY CHEVALLIER 1.00 X I <td>Estimated amount of other compensation from the organization and related organizations</td>	Estimated amount of other compensation from the organization and related organizations
hours per week (list any hours for related organizations below line)(check all that apply) evek (list any hours for related organizations below line)compensation from the organization (W-2/1099-MISC)compensation from the organizations (W-2/1099-MISC)(27) RAY CHEVALLIER DIRECTOR1.00 X100.00.0.000.0.000.0.000.0.000.0.00.0.00.0.00.0.0	amount of other compensation from the organization and related organizations
per week (list any hours for related organizations below line)iiifrom the organization (W-2/1099-MISC)from related organization (W-2/1099-MISC)(27) RAY CHEVALLIER DIRECTOR1.00Xiiii01RECTOR1.00Xiiiii01RECTORXiiiiii01RECTORXiiiiii01RECTORXiiiiii01RECTOR1.00iiiiii01RECTOR1.00iiiiii01RECTOR1.00iiiiii01RECTOR1.00iiiiii01RECTOR1.00iiiiii	compensation from the organization and related organizations
(27) RAY CHEVALLIER 1.00 X 0. 0 DIRECTOR X 0. 0 0 (28) JAMES PRUTOW 1.00 0 0. 0 DIRECTOR X 0. 0 0 (29) DAWN REINER 1.00 0 0 0	
DIRECTOR X 0. 0 (28) JAMES PRUTOW 1.00 0 0 0 DIRECTOR X 0. 0 0 (29) DAWN REINER 1.00 0 0 0	
(28) JAMES PRUTOW 1.00 X 0. 0 DIRECTOR X 0. 0 0 0 (29) DAWN REINER 1.00 0 0 0 0 0	
DIRECTOR X 0. 0 (29) DAWN REINER 1.00 0 0 0 0 0 0 0 0 0 0 0 0	. 0.
	_
DIRECTOR X 0. 0	
	. 0.
Total to Part VII, Section A, line 1c	1

332201 04-01-23

					AN FO	DUNDATION	, INC.		52-1265	361 Page 9
Pa	rt V	/11	Statement of Rev	/enue						
			Check if Schedule O c	ontains a	response	e or note to any lir	ne in this Part VIII	(B)		
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
s s	1	а	Federated campaigns		1a					
Contributions, Gifts, Grants and Other Similar Amounts		b			1b		1			
Ū,		с	Fundraising events		1c	2,905,528.				
ar /			–		1d					
is, 0		е	Government grants (contril	butions)	1e					
rtion S		f	All other contributions, gifts, g	grants, and						
ibu			similar amounts not included a	above	1f	1,972,516.				
ontro		g	Noncash contributions included in li		1g \$	33,591.				
Ŭ Ū		h	Total. Add lines 1a-1f				4,878,044.			
		_	MARFAN CONFERENCE			Business Code 541700		116 428		
/ice	2	a ⊾	OTHER CONFERENCES			541700	116,428. 14,722.	116,428. 14,722.		
Ser.		b				541700	14,722.	14,722.		
E S La S		c d								
Program Service Revenue		e								
Pro			All other program service r	evenue						
		g	Total. Add lines 2a-2f				131,150.			
	3		Investment income (includi							
			other similar amounts)				431,623.			431,623.
	4		Income from investment of			•				
	5		Royalties							
	_			, in the second se	i) Real	(ii) Personal	4			
	6	а		6a			-			
		b		6b			-			
		c d	Rental income or (loss) Net rental income or (loss)	6c						
	7		Gross amount from sales of		ecurities	(ii) Other				
	•	u	assets other than inventory		161,822		1			
		b	Less: cost or other basis		,		-			
ne			and sales expenses	7b 3,	116,619					
evenue		с		7c	45,203	•				
Ê		d	Net gain or (loss)		·····		45,203.			45,203.
Other	8	а	Gross income from fundraisin							
ð			including \$ 2,9							
			contributions reported on I			007.045				
			Part IV, line 18				-			
			Less: direct expenses				0.			
	٥		Net income or (loss) from from Gross income from gaming		-		0.			
	9	d	Part IV, line 19							
		h	Less: direct expenses				-			
			Net income or (loss) from g			-				
	10		Gross sales of inventory, le							
			and allowances			a				
		b	Less: cost of goods sold							
		с	Net income or (loss) from s	sales of in	ventory					
s						Business Code				
eou	11	а								
scellaneo Revenue		b								
Miscellaneous Revenue		С								
Ξ.			All other revenue				1			
	12		Total. Add lines 11a-11d Total revenue. See instruction				5,486,020.	131,150.	0.	476,826.
33200					<u></u>				1 2.	Form 990 (2023)
										()

THE MARFAN FOUNDATION, INC.

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THE MARFAN FOUNDATION, Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

INC.

Sect	ion 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respons			npiete column (A).	
		(A)		(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations	601 050	601 000		
	and domestic governments. See Part IV, line 21	681,370.	681,370.		
2	Grants and other assistance to domestic	E1 0.40	F1 040		
	individuals. See Part IV, line 22	71,043.	71,043.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	400.000	400 000		
	individuals. See Part IV, lines 15 and 16	420,000.	420,000.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	000 000			04 047
	trustees, and key employees	832,290.	655,587.	151,756.	24,947.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0 004 000	1 000 500	1 (1 1 5 0	216 265
7	Other salaries and wages	2,384,033.	1,906,509.	161,159.	316,365.
8	Pension plan accruals and contributions (include				
-	section 401(k) and 403(b) employer contributions)	202 750	226 110	25 650	20 652
9	Other employee benefits	292,759. 212,581.	226,448. 167,867.	35,658.	30,653.
10	Payroll taxes	414,301.	10/,00/.	41,443.	23,469.
11	Fees for services (nonemployees):				
	Management				
b		38,951.		38,951.	
C L	Accounting	15,000.	15,000.	50,951.	
d	, c F	15,000.	15,000.		
e 4	3	12,093.	11,883.	105.	105.
f	Investment management fees Other. (If line 11g amount exceeds 10% of line 25,	12,055.	11,005.	105.	105.
g	column (A), amount, list line 11g expenses on Sch 0.)	111,790.	110,208.	1,551.	31.
12	Advertising and promotion	86,957.	66,742.	139.	<u>31.</u> 20,076.
12	Office expenses	257,328.	169,674.	19,984.	67,670.
13 14	Information technology	226,159.	185,701.	7,420.	33,038.
15	Royalties	22071351	100,7010	,,1200	
16	Occupancy	54,601.	37,295.	8,653.	8,653.
17	Travel	413,289.	266,532.	2,160.	144,597.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	387,343.	377,180.		10,163.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	49,955.	29,973.	9,991.	9,991.
23	Insurance	9,625.	5,775.	1,925.	1,925.
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),				
	amount, list line 24e expenses on Schedule 0.)				
а		64,755.	29,850.	0.	34,905.
b	DUES AND SUBSCRIPTIONS	21,111.	9,324.	5,778.	6,009.
с	FEES AND PERMITS	3,743.	3,743.		
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	6,646,776.	5,447,704.	466,475.	732,597.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				000
33201	0 12-21-23	11			Form 990 (2023)

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9,469,581.

16,843,496.

18,561,612.

28

29

30

31

32

33

8,106,627.

16,257,554.

18,118,070.

Form 990 (2023)

Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year (B) End of year 1 1 Cash - non-interest-bearing 826,752. 2,029,585. 2 2 Savings and temporary cash investments 2,096,801. 3,194,059. Pledges and grants receivable, net 3 3 203,386. 16,549. 4 4 Accounts receivable, net Loans and other receivables from any current or former officer, director, 5 trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 6 Loans and other receivables from other disgualified persons (as defined 6 under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) Notes and loans receivable, net 7 7 8 Inventories for sale or use 8 184,515. 204,159. 9 Prepaid expenses and deferred charges 9 **10a** Land, buildings, and equipment: cost or other 1,552,400. basis. Complete Part VI of Schedule D _____ 10a 995,920. 606,435. 556,480. b Less: accumulated depreciation _____ 10b 10c 12,270,093. 11,853,616. Investments - publicly traded securities 11 11 219,091. 260,077. Investments - other securities. See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 13 13 14 14 Intangible assets 1,057,281. 1,100,803. Other assets. See Part IV, line 11 15 15 18,561,612. 18,118,070. 16 16 **Total assets.** Add lines 1 through 15 (must equal line 33) 544,203. 482,564. 17 Accounts payable and accrued expenses 17 970,000. 800,000. 18 18 Grants payable 216,461. 86,236. 19 19 Deferred revenue Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 Secured mortgages and notes payable to unrelated third parties 23 23 24 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 219,091. 260,077. of Schedule D 25 1,718,116. 1,860,516. 26 26 Total liabilities. Add lines 17 through 25 X Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions 7,373,915. 27 8,150,927.

THE MARFAN FOUNDATION, INC.

Net assets with donor restrictions

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Organizations that do not follow FASB ASC 958, check here

and complete lines 29 through 33.

Total liabilities and net assets/fund balances

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Assets

Liabilities

Net Assets or Fund Balances

28

29

30 31

32

33

Part X | Balance Sheet

Form	990 (2023) THE MARFAN FOUNDATION, INC.	52-1	265361	Pag	_{ge} 12
Par	t XI Reconciliation of Net Assets				
	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	5,480		
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,640		
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,160		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	16,843		
5	Net unrealized gains (losses) on investments	5	531	L,20	09.
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 on Schedule O)	9	43	3,60	05.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	16,25	7,55	54.
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	e 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	l on a			
	separate basis, consolidated basis, or both:				
	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 separat	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th				
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.			
	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		<u> </u>
	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	red audit	1		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		I I	I	

Form **990** (2023)

Department of the Treasury

Internal Revenue Service

(Form 990)

Part I

1

2

3

4

5

8

a

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.gov/Form990 for instructions and the latest information

OMB No. 1545-0047
2023
Open to Public Inspection

Name of the	organization
-------------	--------------

city, and state:

		au to www.i	13.g0v/101113301011113		lest information.		
he organizatio	on					Employer	r identification numb
	THE	MARFAN	FOUNDATION,	INC.		5	2-1265361
Reason f	for Public	Charity Sta	atus. (All organizations	must complete this	part.) See instructior	IS.	
zation is not a	private foun	dation becaus	e it is: (For lines 1 throug	h 12, check only one	e box.)		
A church, cor	nvention of c	hurches, or as	sociation of churches de	scribed in section 1	70(b)(1)(A)(i).		
A school desc	cribed in sec	tion 170(b)(1)	(A)(ii). (Attach Schedule	E (Form 990).)			
A hospital or	a cooperativ	e hospital serv	ice organization describe	ed in section 170(b)	(1)(A)(iii).		
A medical res	earch organ	ization operate	d in conjunction with a h	nospital described in	section 170(b)(1)(A)(iii). Enter	the hospital's name,

5 [An organization operated for the benefit of a college or university owned or operated by a governmental unit described in
	section 170(b)(1)(A)(iv). (Complete Part II.)

6		A federal,	state, or	local	government	or governmental	unit	described in	section	170(b)(1)(A)(v)
---	--	------------	-----------	-------	------------	-----------------	------	--------------	---------	-----------------

7 X	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in
	section 170(b)(1)(A)(vi). (Complete Part II.)

	A community trust described in	section 170(b)(1)(A)(vi). (Complete Part II.)
--	--------------------------------	-----------------------	--------------------------

The organization is not a private foundation because it is: (For lines

9	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). 11

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 on
	lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a [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.

	organization(s). You must complete Part IV. Sections A and C.
	control or management of the supporting organization vested in the same persons that control or manage the supported
b	Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having

с	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.

е	Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III
	functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations

Provide the following information about the supported organization(s). g (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions)) Total

Schedule	A (Form 990) 2023
Part II	Suppo	rt Sc

THE MARFAN FOUNDATION, INC.

52-1265361 Page 2

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.)

Sec	Section A. Public Support									
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total			
1	Gifts, grants, contributions, and									
	membership fees received. (Do not									
	include any "unusual grants.")	3428052.	4543195.	9568552.	7626928.	4843044.	30009771.			
2	Tax revenues levied for the organ-									
	ization'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	3428052.	4543195.	9568552.	7626928.	4843044.	30009771.			
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)						5325043.			
	Public support. Subtract line 5 from line 4.						24684728.			
	ction B. Total Support	1		[1	1				
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total			
	Amounts from line 4	3428052.	4543195.	9568552.	7626928.	4843044.	30009771.			
8	Gross income from interest,									
	dividends, payments received on									
	securities loans, rents, royalties,									
	and income from similar sources \dots	126,789.	85,176.	205,040.	317,063.	431,623.	1165691.			
9	Net income from unrelated business									
	activities, whether or not the									
	business is regularly carried on									
10	Other income. Do not include gain									
	or loss from the sale of capital									
	assets (Explain in Part VI.)									
11	Total support. Add lines 7 through 10						31175462.			
	Gross receipts from related activities,		,			12	209,234.			
13	First 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third, t	fourth, or fifth tax y	ear as a section 5/	01(c)(3)				
-	organization, check this box and stop									
	ction C. Computation of Publi						70 10			
	Public support percentage for 2023 (I					14	<u>79.18 %</u>			
	Public support percentage from 2022					15	79.59 %			
16a	33 1/3% support test - 2023. If the other have The experimentian multifier						V			
	stop here. The organization qualifies		-		line 15 in 00 1/00/					
a	33 1/3% support test - 2022. If the c									
47-	and stop here. The organization qual				10 160 or 16b o					
1/a	10% -facts-and-circumstances test									
	and if the organization meets the fact			-	-	-				
Ŀ	meets the facts-and-circumstances te	-			-	7a and line 15 is				
a	10% -facts-and-circumstances test	-								
	more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the									
18	organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions									
10	The organization in the organization			a, 100, 17a, 01 170			<u>s</u>			
							,			

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 Schedule A (Form 990) 2023
 THE MARFAN FOUNDATION, INC.

 Part III
 Support Schedule for Organizations Described in Section 509(a)(2)

(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

	qualify	[,] under	the tests	s listed	below,	please	comp	lete F	Part I	II.
Section		nlic Si	unnort							

Sei	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 202	3 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, 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						
	Amounts included on lines 1, 2, and						
70	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. (Subtract line 7c from line 6.)						
See	ction B. Total Support			1	-	1	
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 202	3 (f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11							
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3) orga	nization,
				<u></u>	-		
Se	ction C. Computation of Publi	ic Support Per	centage				
15	Public support percentage for 2023 (I	ine 8, column (f), d	livided by line 13, o	column (f))		15	%
16	Public support percentage from 2022				·····	16	%
See	ction D. Computation of Inves	stment Income	e Percentage				
17	Investment income percentage for 20)23 (line 10c, colur	mn (f), divided by li	ne 13, column (f))		17	%
18	Investment income percentage from					18	%
19a	a 33 1/3% support tests - 2023. If the					3 1/3%, and	line 17 is not
	more than 33 1/3%, check this box a						
k	33 1/3% support tests - 2022. If the	-	•				'3%, and
	line 18 is not more than 33 1/3%, che	-					
20	Private foundation. If the organization			-		-	
3320	23 12-21-23						dule A (Form 990) 2023
			16				•

^{2023.04030} THE MARFAN FOUNDATION, IN 306512_1

THE MARFAN FOUNDATION, INC.

Yes No

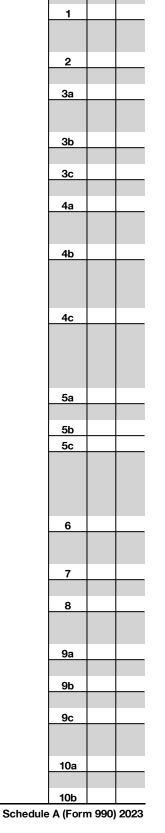
Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c 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?
- 6 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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If "Yes," complete Part I of Schedule L (Form 990).*
- **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 on 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 on 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.
- **10a** 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 line 10b below.*
- **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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e A (Form 990) 2023	THE	MARFAN	FOUNDATION,	INC

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2

No

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated supervised or controlled the organization's activities. If the organization had more than one supported			

organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If* "Yes," *explain in* **Part VI** how providing such benefit carried out the purposes of the supported organization(s) that operated,

supervised or controlled the supporting organization

Section C. Type II Supporting Organizations

Part IV Supporting Organizations (continued)

 1
 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).
 1

Section D. All Type III Supporting Organiza	ations
---	--------

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year	(see instructions)).
	O	1000 11104 4040110	,

- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

с	The organization supported a governmental entity.	Describe in Part VI how you supported a governmental entity (see instructions).

- 2 Activities Test. Answer lines 2a and 2b below.
- **a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "No" provide details in **Part VI.**

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If* "Yes," *describe in* **Part VI** *the role played by the organization in this regard.*

 Yes
 No

 2a
 ...

 2a
 ...

 2b
 ...

 3a
 ...

 3b
 ...

Schedule A (Form 990) 2023

332025 12-21-23

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instructions).

2023.04030 THE MARFAN FOUNDATION, IN 306512_1

Sect	ion 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other 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 0.015 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 0.035.	6		
7	Recoveries of prior-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 0.85 of line 1.	2		
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		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
U				

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.

THE MARFAN FOUNDATION, INC. Schedule A (Form 990) 2023 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Schedule A (Form 990) 2023

Schedule A (Form 990) 2023

1 Amounts paid to supported organizations to accomplish exempt purposes

organizations, in excess of income from activity

2 Amounts paid to perform activity that directly furthers exempt purposes of supported

Section D - Distributions

20 2023.04030 THE MARFAN FOUNDATION, IN 306512_1

3	Administrative expenses paid to accomplish exempt purpose	3			
4	Amounts paid to acquire exempt-use assets		4		
5	Qualified set-aside amounts (prior IRS approval required - pro	5			
6	Other distributions (describe in Part VI). See instructions.	6			
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2023	าร	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
a	From 2018				
b	From 2019				
с	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2023 distributable amount				
c	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
a	Excess from 2019				
b	Excess from 2020				
C	Excess from 2021				
d	Excess from 2022				
е	Excess from 2023				
				Sc	hedule A (Form 990) 2023

52-1265361 Page 7

Current Year

1

2

Schedule A	(Form 990) 2023	THE	MARFAN	FOUNDA	TION,	INC.		52-1265361	Page 8
Part VI	Supplemental Infor Part IV, Section A, lines 1 line 1; Part IV, Section D, Section D, lines 5, 6, and (See instructions.)	lines 2 and	d 3; Part IV, 9	Section E, line	es 1c, 2a, 1	2b, 3a, and 3b;	Part V, line 1; Part	V, Section B, line 1e; Pa	n C, art V,
	(See Instructions.)								
332028 12-21-2	3				21			Schedule A (Form	990) 2023

SCHEDULE C	SC	HE	DU	LE	С
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Department of the Treasury

Internal Revenue Service

(Form 990)

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.

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) organizations: Complete Part III.

Nan	ne of organization				Emplo	over identification number
	THE MAR	FAN FOUNDATION,	INC.			52-1265361
Pa	art I-A Complete if the org	anization is exempt und	er section 501(c) o	r is a section 52	?7 org	anization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures				
Pa	art I-B Complete if the org	anization is exempt unde	er section 501(c)(3) .		
1	Enter the amount of any excise tax	incurred by the organization und	ler section 4955		\$	
	Enter the amount of any excise tax					
	If the organization incurred a section					
	Was a correction made?					
	If "Yes." describe in Part IV.					
Pa	art I-C Complete if the org	anization is exempt und	er section 501(c), e	except section 5	601(c)	(3).
1	Enter the amount directly expended	by the filing organization for sec	ction 527 exempt function	on activities	\$	
2	Enter the amount of the filing organ	ization's funds contributed to oth	her organizations for sec	ction 527		
	exempt function activities		-		\$	
3	Total exempt function expenditures					
	line 17b				\$	
4	Did the filing organization file Form					Yes No
5	Enter the names, addresses, and er					
	made payments. For each organization	tion listed, enter the amount paid	d from the filing organiza	ation's funds. Also en	ter the	amount of political
	contributions received that were pro-	omptly and directly delivered to a	a separate political organ	nization, such as a se	eparate	segregated fund or a
	political action committee (PAC). If	additional space is needed, prov	ide information in Part IV	V.		
	(a) Name	(b) Address	(c) EIN	(d) Amount paid f filing organizatio funds. If none, ente	n's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990) 2023

LHA 332041 11-06-23

OMB No. 1545-0047

2023 Open to Public Inspection

	edule C (Form 990) 2023 THE M.	ARFAN FOUNDATION, INC.			265361	
Pa		n is exempt under section 501(c)(3)	and file	ed Form 5768 (ele	ction und	er
	section 501(h)).					
Α (Check if the filing organization belon	gs to an affiliated group (and list in Part IV each	affiliated	group member's name	e, address, E	IN,
	expenses, and share of exces	s lobbying expenditures).				
B (Check if the filing organization check	ed box A and "limited control" provisions apply				
		oying Expenditures eans amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliate total	
1a	Total lobbying expenditures to influence pub	ic opinion (grassroots lobbying)		15,000.		
b	Total lobbying expenditures to influence a leg	islative body (direct lobbying)				
с	Total lobbying expenditures (add lines 1a and	l 1b)		15,000.		
d				6,631,776.		
е		s 1c and 1d)		6,646,776.		
f	Lobbying nontaxable amount. Enter the amo			482,339.		
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:				
	not over \$500,000,	20% of the amount on line 1e.				
	over \$500,000 but not over \$1,000,000,	\$100,000 plus 15% of the excess over \$500	,000.			
	over \$1,000,000 but not over \$1,500,000,	\$175,000 plus 10% of the excess over \$1,0	00,000.			
	over \$1,500,000 but not over \$17,000,000,	\$225,000 plus 5% of the excess over \$1,50	0,000.			
	over \$17,000,000,	\$1,000,000.				
g	Grassroots nontaxable amount (enter 25% of	line 1f)		120,585.		
h	Subtract line 1g from line 1a. If zero or less, e	nter -0-		0.		
i	Subtract line 1f from line 1c. If zero or less, e	nter -0-		0.		
j	If there is an amount other than zero on eithe	r line 1h or line 1i, did the organization file Form	4720			
	reporting section 4911 tax for this year?				Yes	No

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

	Lobbying Expen	ditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
2a Lobbying nontaxable amount	394,558.	385,264.	487,925.	482,339.	1,750,086.
 b Lobbying ceiling amount (150% of line 2a, column(e)) 					2,625,129.
c Total lobbying expenditures	17,600.	0.	0.	15,000.	32,600.
d Grassroots nontaxable amount	98,640.	96,316.	121,981.	120,585.	437,522.
e Grassroots ceiling amount (150% of line 2d, column (e))					656,283.
f Grassroots lobbying expenditures	17,600.	0.	0.	15,000.	32,600.

Schedule C (Form 990) 2023

332042 11-06-23

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 e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(1)
	e lobbying activity.	Yes	No	Amo	ount
1 a	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: Volunteers?				
b c	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
d	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	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?				
	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	504()(5)			
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	1 501(C)(5), or sec	tion	
	501(c)(6).			Vee	Na
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section			tion	
Fai	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered				3 ie
	answered "Yes."		by i diti	ii A, iiiC	0, 13
1			1		
2	Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political				
2	expenses for which the section 527(f) tax was paid).	a			
			2a		
	Current year				
	Carryover from last year				
3	Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce				
т	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po				
	expenditures next year?		4		
5	Taxable amount of lobbying and political expenditures. See instructions		. 5		
<u> </u>	t IV Supplemental Information				
Prov	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list): Part II-A	lines 1 a	nd 2 (see	

instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Schedule C (Form 990) 2023

	HEDULE D n 990)	Complete if the orga	al Financial Statemen nization answered "Yes" on Form 990),		OMB No. 15	545-0047 73
	tment of the Treasury	A	, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or ttach to Form 990.) for instructions and the latest inforr			Open to Inspecti	
	e of the organization	on THE MARFAN FOUNDAT	ION, INC.		5	identificatio	61
Pa		ntions Maintaining Donor Advised n answered "Yes" on Form 990, Part IV, line		s or Ac	counts.	Complete if th	ie
	-		(a) Donor advised funds	(b) Funds and	d other accou	nts
1	Total number at er	nd of year					
2		f contributions to (during year)					
3	Aggregate value of	f grants from (during year)					
4	Aggregate value at	end of year					
5	0	on inform all donors and donor advisors in v n's property, subject to the organization's o	0			Yes	No.
6	Did the organizatio	n inform all grantees, donors, and donor a	dvisors in writing that grant funds can b	e used o	nly		
	for charitable purp	oses and not for the benefit of the donor or	r donor advisor, or for any other purpos	e conferri	ing		
	impermissible priva					Yes	No.
Pa	rt II Conserva	ation Easements. Complete if the org	anization answered "Yes" on Form 990	, Part IV,	line 7.		
1	Purpose(s) of cons	ervation easements held by the organization	on (check all that apply).				
	Preservation	of land for public use (for example, recreat	tion or education) Preservation	of a histo	orically impor	rtant land area	ı
	Protection o	f natural habitat	Preservation	of a certi	fied historic	structure	
	Preservation	of open space					

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 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 structure included on line 2a	2c
d	Number of conservation easements included on line 2c acquired after July 25, 2006, and not	
	on a historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organiz	zation during the tax
	year	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation	n easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easily	ements during the year
8	Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i)	l l
	and section 170(h)(4)(B)(ii)?	Yes No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense stateme	
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that	at describes the
	organization's accounting for conservation easements.	
Par	t III Organizations Maintaining Collections of Art, Historical Treasures, or Other Si	imilar Assets.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balan	ince sheet works
	of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherand	ice of public
	service, provide in Part XIII the text of the footnote to its financial statements that describes these items.	
b	If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance	sheet works of
	art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance	of public service,
	provide the following amounts relating to these items.	
	(i) Revenue included on Form 990, Part VIII, line 1	\$
	(ii) Assets included in Form 990, Part X	\$
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, p	provide
	the following amounts required to be reported under FASB ASC 958 relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1	\$
b	Assets included in Form 990, Part X	\$
LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	Schedule D (Form 990) 2023
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2023.04030 THE MARFAN FOUNDATION, IN 306512_1

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Sche		FAN FOUNDAT					ļ	52-12	65361	LР	'age 2
Par	t III Organizations Maintaining C	ollections of Art	t, Histo	orical Tre	asures, o	r Other	Similar	Assets	(contin	ued)	
3	Using the organization's acquisition, accession	on, and other records	s, check	any of the f	ollowing that	make sig	nificant u	se of its			
	collection items (check all that apply).										
а	Public exhibition	d	I 🗌 I	Loan or excl	hange progra	am					
b	Scholarly research	е		Other							
с	Preservation for future generations										
4	Provide a description of the organization's co	ellections and explain	how the	ey further th	e organizatio	n's exem	ot purpos	e in Part	XIII.		
5	During the year, did the organization solicit o										
	to be sold to raise funds rather than to be ma								Yes		No
Par	t IV Escrow and Custodial Arran							Part IV, li	ne 9, or		
	reported an amount on Form 990, Par			0			,	,	,		
1a	Is the organization an agent, trustee, custodi	an. or other intermed	liarv for o	contribution	s or other as	sets not ir	ncluded				
	on Form 990, Part X?	•	•						Yes		No
b	If "Yes," explain the arrangement in Part XIII										
	······································		j						Amount		
c	Beginning balance						1c				
	Additions during the year						1d				
	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on Fe								Yes		No
	If "Yes," explain the arrangement in Part XIII.						,	·····			
Par											<u></u>
		(a) Current year		rior year	(c) Two year			ears back	(e) Four	vears	back
1a	Beginning of year balance	1,629,161.		,585,912.	., ,	3,015.		28,897.		<u>,</u>	,412.
h	Contributions			, · · · , · ·		<i>, , , , , , , , , ,</i>	,	00,000.	/	,	
0	Net investment earnings, gains, and losses	237,314.		157,111.	37	7,897.		20,263.		117	,485.
с А		,				,		,		,	
d	-										
е	Other expenditures for facilities	162,269.		113,862.			2	01,145.		400	,000.
	and programs	102,205.		115,002.			2	51,145.		400,	
	Administrative expenses	1,704,206.	1	,629,161.	1 5 8 5	5,912.	1 5	48,015.	1	128	,897.
g	End of year balance				•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1,5	10,013.	±,	120,	
2	Provide the estimated percentage of the curr	100		, column (a)) neid as:						
a	Board designated or quasi-endowment O 0 0 0		_%								
a		%									
с											
•	The percentages on lines 2a, 2b, and 2c show										
за	Are there endowment funds not in the posse	ssion of the organiza	tion that	are held an	id administer	ed for the			Г	Yes	No
	organization by:									165	<u> </u>
	(i) Unrelated organizations?								3a(i)		X X
									3a(ii)		<u> </u>
	If "Yes" on line 3a(ii), are the related organiza								3b		
	Describe in Part XIII the intended uses of the t VI Land, Buildings, and Equipm		wment fu	unds.							
Fai				line 11e C	aa Farm 000		no 10				
	Complete if the organization answere		-								
	Description of property	(a) Cost or of		(b) Cost		• • •	cumulate	d	(d) Bool	< valu	le
		basis (investr	nent)	basis	, ,	depi	reciation		4 0 -		<u></u>
	Land				<u>7,927.</u>		00.00				27.
	Buildings			91	7,564.	4	92,90	18.	424	±,6	56.
с	Leasehold improvements				<u> </u>		00.01				~
d	Equipment			52	<u>6,909.</u>	5	03,01	2.	23	3,8	97.
	Other										
Tota	. Add lines 1a through 1e. (Column (d) must e	<u>qual Form 990, Part)</u>	X <u>, line 10</u>)c. column	<u>(B))</u>						80.
							:	Schedule	D (Form	ı 990)) 2023

Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990 Part IV line	11c See Form 990 Part X line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	-of-vear market value
		(c) Method of Valdation. Cost of end	-or-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes"		11d. See Form 990, Part X, line 15.	
	Description		(b) Book value
(1) BENEFICIAL INTEREST IN CHA	ARITABLE REMAI	INDER TRUST	1,100,803.
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, col	((B))		1,100,803.
Part X Other Liabilities	<u>. (D))</u>		_/_000
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990. Part X. line 25.	
(a) Description of liability			(b) Book value
(1) Federal income taxes (2) OTHER PAYABLES			260,077.
			200,077
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 25, co	. (B))		260,077.
2. Liability for uncertain tax positions. In Part XIII. provide	. ,,		at reports the

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2023

X

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Schedule D (Form 990) 2023 THE MARFAN FOUNDATION, INC.

Part VII Investments - Other Securities

	dule D (Form 990) 2023 THE MARFAN FOUNDATION, INC				1203301 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Stateme	nts With	Revenue per Ret	turn	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a				
1	Total revenue, gains, and other support per audited financial statements			1	6,115,469.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	. 2a	531,209.		
b	Donated services and use of facilities	2b	66,811.		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	43,522.		
е	Add lines 2a through 2d			2e	641,542.
3	Subtract line 2e from line 1			3	5,473,927.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a	12,093.		
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	12,093.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)			5	5,486,020.
—	Total revenue. Add lines of and to: (This must equal Form 990, Farth, line 12.)				
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem	ents With	Expenses per R	eturr	
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	ents With	Expenses per R		1
Pa 1	rt XII Reconciliation of Expenses per Audited Financial Statem	ents With	Expenses per R	eturr 1	
	TXII Reconciliation of Expenses per Audited Financial Statemed Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	ents With	Expenses per R		1
1	Reconciliation of Expenses per Audited Financial Statemed Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements	ents With	Expenses per R		1
1 2	Image: State of the state	ents With	Expenses per R		1
1 2 a	Reconciliation of Expenses per Audited Financial Statemed Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	ents With 	Expenses per R		1
1 2 a b c	Image: Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	ents With	Expenses per R		6,701,411.
1 2 b c d	Image: Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	ents With	Expenses per R 66,811. 35,000.		101,811.
1 2 b c d	Image: Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	Expenses per R 66,811. 35,000.	1	6,701,411.
1 2 b c d e	Reconciliation of Expenses per Audited Financial Stateme Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a 2b 2c 2d	Expenses per R 66,811. 35,000.	1 2e	101,811.
1 2 b c d 3	Reconciliation of Expenses per Audited Financial Statemer Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	2a 2b 2c 2d	Expenses per R 66,811. 35,000. 12,093.	1 2e	101,811.
1 2 d c 3 4 a	Reconciliation of Expenses per Audited Financial Stateme Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	ents With	Expenses per R 66,811. 35,000.	1 2e	101,811. 6,599,600.
1 2 d c 3 4 a	Reconciliation of Expenses per Audited Financial Statemer Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2b 2c 2d	Expenses per R 66,811. 35,000. 12,093. 35,083.	1 2e	101,811. 6,599,600. 47,176.
1 2 3 4 5	Reconciliation of Expenses per Audited Financial Statemer Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2b 2c 2d	Expenses per R 66,811. 35,000. 12,093. 35,083.	1 2e 3	101,811. 6,599,600.

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:

RESERVE FUND - TO PROVIDE AN EMERGENCY FUND EQUAL TO 50% OF THE PROGRAM

AND OPERATIONS BUDGET IN ORDER TO SAFEGUARD ORGANIZATION IN THE EVENT OF

ECONOMIC DIFFICULTIES.

PART X, LINE 2:

MANAGEMENT HAS EVALUATED THE FOUNDATION'S TAX POSITIONS AND CONCLUDED THAT

34

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

CODIFICATION (ASC) NO. 740.

332054 09-28-23

Schedule D (Form 990) 2023 THE MARFAN FOUNDATION, INC. Part XIII Supplemental Information (continued)	52-1265361 Page 5
PART XI, LINE 2D - OTHER ADJUSTMENTS:	
CHANGE IN VALUE OF CHARITABLE REMAINDER TRUST	43,522.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
UNCOLLECTIBLE EXPENSE	35,000.
PART XII, LINE 4B - OTHER ADJUSTMENTS:	
AWARD REFUNDS	35,083.
332055 09-28-23	Schedule D (Form 990) 2023
35	

Depart	tment of the Treasury			Attach to Form 990.			Open to Public		
	al Revenue Service	Go to w	ww.irs.gov/Form	990 for instructions and the latest i	nformation.		Inspection		
Nam	e of the organization					Employer ic	dentification number		
тня	E MARFAN FOUN	FOUNDATION, INC. 52-12							
Pa	rt I General Info	rmation on A	ctivities Out	side the United States. Compl	ete if the organ	ization answe	red "Yes" on		
	Form 990, Part I								
1				ds to substantiate the amount of its gra he selection criteria used to award the			X Yes No		
2	For grantmakers. Dese United States.	cribe in Part V the	e organization's	procedures for monitoring the use of its	s grants and ot	her assistance	e outside the		
3				an be duplicated if additional space is r					
(a) Region (b) Number of offices in the region			(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)	is a program service,		expenditures for and investments		
EURC	PE (INCLUDING								
ICEL	AND & GREENLAND)								
- AL	BANIA, ANDORRA,								
AUST	RIA, BELGIUM	0	0	GRANT TO RECIPIENT	RESEARCH		420,000.		
3 2	Subtotal	0	0				420,000.		
	Total from continuation sheets to Part I	0	0				0.		
с	Totals (add lines 3a and 3b)	0	0				420,000.		

Statement of Activities Outside the United States

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

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

Schedule F (Form 990) 2023

OMB No. 1545-0047

LHA 332071 11-29-23

SCHEDULE F (Form 990) Part II 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.

1 (a) Name of organization	(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 valuation (book, FMV, appraisal, other)
		EUROPE	RESEARCH	220,000.	CHECK	0.		FMV
		EUROPE	RESEARCH	200,000.	СНЕСК	0.		FMV

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax

exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities .

Schedule F (Form 990) 2023

2

0

Page 2

52-1265361

Part 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.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Schedule F (Form 990) 2023

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the Instructions for Form 926)</i>	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 the 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? <i>If</i> "Yes," <i>the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see the Instructions for Form 5471)</i>	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? <i>If</i> "Yes," <i>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 the Instructions for Form 8621)</i>	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 the 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? <i>If</i> "Yes," <i>the organization may be required to separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990)</i>	Yes	X No

Schedule F (Form 990) 2023

				FOUNDATION,	INC.
Part V	Supplemental	Infor	nation		

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2:

THE GRANT RECIPIENTS MUST SUBMIT INTERMEDIATE AND FINAL PROGRESS REPORTS

AND FINANCIAL REPORTS.

Schedule F (Form 990) 2023

332075 11-29-23

17511023 150872 306512 2023.04030 THE MARFAN

SCHEDULE G	Suppleme	ntal Information Regarding	Fund	Iraisi	ng or Gaming A	ctiv	ities	OMB No. 1545-0047			
(Form 990)		e organization answered "Yes" on organization entered more than \$15				r 19,	or if the	2023			
	C		Open to Public								
Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.										
Name of the organization			~					entification number			
Part I Fundrais		FAN FOUNDATION, IN Complete if the organization answe		'oo" or	Correction Double	in a 1	<u>52-1265</u>				
	complete this part		rea r	es or	1 Form 990, Part IV, I	ine i	7. FOIII 990-E2	liers are not			
 a Mail solicitat b Internet and c Phone solicitat d In-person so 2 a Did the organization key employees list 	1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a Mail solicitations e Solicitation of non-government grants b Internet and email solicitations f Solicitation of government grants c Phone solicitations g Special fundraising events										
compensated at le	•	viduals or entities (fundraisers) pursus organization.		agreer	nents under which tr	ie iui	Idraiser is to b	e			
(i) Name and addres or entity (func	s of individual	(ii) Activity	(iii) fundr have ci or con contribu	ustody itrol of	(iv) Gross receipts from activity	tò (e	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization			
			Yes	No							
Total											
	ch the organizatio	n is registered or licensed to solicit o	ontrib	utions	or has been notified	it is	exempt from re	egistration			

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990) 2023

LHA 332081 09-13-23

THE MARFAN FOUNDATION,

52-1265361 Page 2

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b, List events with gross receipts greater than \$5,000.

INC.

		of fundraising event contributions and gro	oss income on Form 990	-EZ, lines 1 and 6b. List ev	vents with gross receipt	ts greater than \$5,000.
				(b) Event #2 HEARTWORKS-H	(c) Other events	(d) Total events (add col. (a) through
۵			NYC GALA (event type)	OUSTON (event type)	29 (total number)	col. (c))
Sevenue	1	Gross receipts	968,562.	498,605.	2,376,206.	3,843,373.
ш	2	Less: Contributions	683,472.	387,037.	1,835,019.	2,905,528.
	3	Gross income (line 1 minus line 2)	285,090.	111,568.	541,187.	937,845.
	4	Cash prizes				
ú	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs	39,240.		89,989.	129,229.
rect Ex	7	Food and beverages	97,159.	52,653.	243,444.	393,256.
Ō		Entertainment	<u>33,620.</u> 115,070.	<u>19,332</u> . 39,583.	<u>44,036.</u> 163,719.	96,988.
	9	Other direct expenses			•	318,372. 937,845.
		Direct expense summary. Add lines 4 through Net income summary. Subtract line 10 from li	.,			937,845.
Pa	rtl			990. Part IV. line 19. or re		
		\$15,000 on Form 990-EZ, line 6a.				
anue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1	Gross revenue				
SS	2	Cash prizes				
xpense	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				

5 Other direct expenses

7 Direct expense summary. Add lines 2 through 5 in column (d)

8 Net gaming income summary. Subtract line 7 from line 1, column (d)

9 Enter the state(s) in which the organization conducts gaming activities:

6 Volunteer labor

%

Yes

No

%

Yes

No

Yes

No

332082 09-13-23

Schedule G (Form 990) 2023

Yes

No

No

%

Sch	edule G (Form 990) 2023	THE MARFAN	FOUNDATION,	INC.	52-1	265361	Page 3
	Does the organization conduct gas Is the organization a grantor, bene	ning activities with noni	nembers?			Yes	No No
	to administer charitable gaming?			·····	·	Yes	No
	Indicate the percentage of gaming	•					
	The organization's facility					13a 13b	<u>%</u>
	An outside facility Enter the name and address of the					130	70
			ine enganization e gan	in ig, op colai of chilo of			
	Name						
	Address						
15a	Does the organization have a cont	ract with a third party fr	om whom the organiz	ation receives gaming	revenue?	Yes	No No
k	If "Yes," enter the amount of gami			\$	_ and the amount		
	of gaming revenue retained by the						
c	If "Yes," enter name and address of	of the third party:					
	Name						
	Address						
16	Gaming manager information:						
	Name						
	Gaming manager compensation	\$	_				
	Description of services provided						
	Description of services provided						
	Director/officer	Employee		nt contractor			
				IL CONTRACTOR			
17	Mandatory distributions:						
a	Is the organization required under	state law to make chari	able distributions fror	n the gaming proceed	s to		
						Yes	No
k	 Enter the amount of distributions r organization's own exempt activiti 	•	to be distributed to o	ther exempt organizat	ions or spent in the		
Pa	rt IV Supplemental Inform			by Part I, line 2b, colun	nns (iii) and (v); and Par	t III, lines 9,	9b, 10b,
	15b, 15c, 16, and 17b, as						, ,
3320	33 09-13-23		4.5		Schedu	ule G (Form	990) 2023
			43				

	G (Form 990)
Dart IV	Quinnla

Supplemental mormation (continued)	
	Schedule G (Form 990
332084 04-01-23	

SCHEDULE I (Form 990)		arants and Oth vernments, ar					OMB No. 1545-0047
		ete if the organizatio					2023
Department of the Treasury			Attach to Form	n 990.			Open to Public
Internal Revenue Service		Go to www.irs	s.gov/Form990 for	the latest information	ation.		Inspection
Name of the organization THE MARFA	N FOUNDAT	ION, INC.					Employer identification number 52-1265361
Part I General Information on Grants a	nd Assistance						
1 Does the organization maintain records	to substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assis	stance, and the selecti	
criteria used to award the grants or assis	stance?						X Yes No
2 Describe in Part IV the organization's pro	ocedures for monit	oring the use of grant	funds in the United	l States.			
Part II Grants and Other Assistance to	•				anization answered "Y	'es" on Form 990, Par	IV, line 21, for any
recipient that received more than s	5,000. Part II can		· · · · · · · · · · · · · · · · · · ·		(f) Method of		1
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
TOWNS HODELING INTERPOLITING SOUGOL OF							
JOHNS HOPKINS UNIVERSITY SCHOOL OF							
MEDICINE - 1101 EAST 33RD STREET -		50100	250.400	0			
BALTIMORE, MD 21218	52-0595110	50103	250,400.	0.			RESEARCH
BAYLOR COLLEGE OF MEDICINE							
ONE BAYLOR PLAZA, BCM 390							
HOUSTON, TX 77030	74-1613878	50103	84,222.	0.			RESEARCH
HOUSION, IX //050	74-1013070	50105	04,222.	0.			RESEARCH
THE ARNOLD P. GOLD FOUNDATION							
619 EAST PALISADE AVE							
ENGLEWOOD CLIFFS, NJ 07632	22-3052098	501C3	100,900.	0.			RESEARCH
MAYO CLINIC ROCHESTER							
200 FIRST STREET SW							
ROCHESTER, MN 55902	41-6011702	501C3	15,000.	0.			RESEARCH
WEILL MEDICAL COLLEGE OF CORNELL							
UNIVERSITY - 575 LEXINGTON AVENUE							
- NEW YORK, NY 10022	13-1623978	501C3	18,900.	0.			RESEARCH
HOSPTIAL FOR SPECIAL SURGERY							
535 EAST 70TH STREET							
NEW YORK, NY 10021	13-1624135	501C3	100,000.	٥.			RESEARCH
2 Enter total number of section 501(c)(3) a			a line 1 table		1		8.
3 Enter total number of other organization		•					0.

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

THE MARFAN FOUNDATION, INC.

		and Domostic Co	warnmanta (Scho	dulo I (Earm 990) Ba		<u>2-1265361</u> Р
(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
12 55 60 200	50162	100,000				
T3-226530à	50103	100,000.				RESEARCH
91-2055099	501C3	5,938.	0.			RESEARCH
	Assistance to Dor (b) EIN 13-5562309	Assistance to Domestic Organizations	Assistance to Domestic Organizations and Domestic Go (b) EIN (c) IRC section if applicable (d) Amount of cash grant 13-5562309 501C3 100,000.	Assistance to Domestic Organizations and Domestic Governments (Schering (b) EIN (c) IRC section if applicable (d) Amount of cash grant (e) Amount of noncash assistance 13-5562309 501C3 100,000. 0.	Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Pa (b) EIN (c) IRC section if applicable (d) Amount of cash grant (e) Amount of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) 13-5562309 501C3 100,000. 0.	Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (b) EIN (c) IRC section if applicable (d) Amount of cash grant (e) Amount of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance 13-5562309 501C3 100,000. 0. 0. 0.

Schedule I (Form 990)

Schedule I (Form 990) 2023

52-1265361 Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
ONFERENCE AWARD - HOTEL	82	46,920.	0.		
CONFERENCE AWARD - TRAVEL	6	5,085.	0.		
AMP AWARD - TRAVEL	2	2,138.	0.		
CAMP AWARD	64	16,900.	0.		
Part IV Supplemental Information Provide the information					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

THE GRANT RECIPIENTS MUST SUBMIT INTERMEDIATE AND FINAL PROGRESS REPORTS

AND FINANCIAL REPORTS.

sc	HEDULE J	Compensation Information	1	OMB No. 1	545-004	47
(Fo	rm 990)	- For certain Officers, Directors, Trustees, Key Employees, and Highest	ľ	20	ົງງ)
		Compensated Employees		20	ZJ)
Depa	tment of the Treasury	Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.		Open to		ic
	al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe		
Nan	e of the organization			identificatio		nber
		THE MARFAN FOUNDATION, INC.	52-2	126536	1	
Pa	rt I Question	s Regarding Compensation				
					Yes	No
1a		ate box(es) if the organization provided any of the following to or for a person listed on Form	990,			
		line 1a. Complete Part III to provide any relevant information regarding these items.				
	First-class or o	°				
	Travel for com					
		ation and gross-up payments Health or social club dues or initiation fee				
	Discretionary	spending account Personal services (such as maid, chauffer	ur, chef)			
b	•	on line 1a are checked, did the organization follow a written policy regarding payment or				
-				1b		
2	•	n require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2		<u> </u>
2	la dia ata udaia la lifa.					
3		ny, of the following the organization used to establish the compensation of the organization's				
		ector. Check all that apply. Do not check any boxes for methods used by a related organization of the CEO/Evolutive Director, but evolvin in Part III				
	X Compensation	ation of the CEO/Executive Director, but explain in Part III.				
		a committee Written employment contract ompensation consultant X Compensation survey or study				
	X Form 990 of o		ommittoo			
			ommittee			
4	During the year did	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
	organization or a re					
а	-	e payment or change-of-control payment?		4a		x
b		eive payment from a supplemental nonqualified retirement plan?				x
		eive payment from an equity-based compensation arrangement?				x
-		hes 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.				
5		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	n			
	contingent on the r					
а	-			5a		X
b		ation?				X
		r 5b, describe in Part III.				
6	For persons listed of	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatic	n			
	contingent on the r	et earnings of:				
а	The organization?			6a		X
b		ation?				X
		or 6b, describe in Part III.				
7	For persons listed of	on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	i			
		nes 5 and 6? If "Yes," describe in Part III		7		X
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	ne			
	initial contract exce	ption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8		X
9	If "Yes" on line 8, d	id the organization also follow the rebuttable presumption procedure described in				
	Regulations section	1 53.4958-6(c)?		9		
For	Paperwork Reduct	on Act Notice, see the Instructions for Form 990.	Schee	dule J (Forn	n 990)	2023

52-1265361

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.

		(B) Breakdown of W	-2 and/or 1099-MISC compensation	and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) MICHAEL L. WEAMER	(i)	457,343.	0.	0.	10,000.	17,314.	484,657.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	243,822.	0.	0.	0.	17,371.	261,193.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JOSEPHINE GRIMA	(i)	207,595.	0.	0.	0.	17,371.	224,966.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) EILEEN NOVINS	(i)	189,021.	0.	0.	0.	17,371.	206,392.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) INDERJEET KAUR, CPA	(i)	154,779.	0.	0.	0.	17,371.	172,150.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2023

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 3:

WE RELY ON THE WRITTEN COMPENSATION SURVEYS PUBLISHED BY PRM CONSULTING

GROUP WHICH PROVIDES A MANAGEMENT COMPENSATION REPORT FOR NOT-FOR-PROFIT

ORGANIZATIONS. WE REVIEW THIS REPORT ANNUALLY TO STAY INFORMED REGARDING

COMPENSATION TRENDS.

Schedule J (Form 990) 2023

SCHEDULE	Μ
(Form 990)	

Department of the Treasury Internal Revenue Service

Noncash Contributions

OMB No. 1545-0047

Inspection

23

ſ

Employer identification number

52-1265361

ZU **Open to Public**

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

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

Name of the organization

THE MARFAN FOUNDATION, INC.

Pa	rt I Types of Property								
		(a)	(b) Number of	(c) Noncash contributio	n	(d) Mathadiafial		·	
		Check if applicable		amounts reported of		Method of de oncash contribu			9
			items contributed	Form 990, Part VIII, lin	e1g				,
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	Х	9	33,59	91.FMV	– NYSE			
10	Securities - Closely held stock								
11	Securities - Partnership, LLC, or								
	trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation contribution -								
	Historic structures								
14	Qualified conservation contribution - Other								
15	Real estate - Residential								
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other ()								
26	Other ()								
27	Other ()								
28	Other (
29	Number of Forms 8283 received by the organiz	ation during	the tax year for co	ontributions					
	for which the organization completed Form 828	33, Part V, D	onee Acknowledg	ement 29				0	
								Yes	No
30a	During the year, did the organization receive by	/ contributio	n any property rep	orted in Part I, lines 1 tl	hrough 28,	that it			
	must hold for at least 3 years from the date of t								
	exempt purposes for the entire holding period?)					30a		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	of any nonstandard con	tributions?		31	X	
32a	Does the organization hire or use third parties of	or related or	ganizations to solid	it, process, or sell non	cash				
	contributions?		•				32a	x	
b	If "Yes," describe in Part II.								
33	If the organization didn't report an amount in co	olumn (c) foi	r a type of property	for which column (a) is	checked,				
	describe in Part II.	. ,			,				
Ear D	Paperwork Beduction Act Notice see the Inst	ructions for	Form 000			Schedule M	I (Earn	- 000)	2022

edule M (Form 990) 202

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, LINE 32B:

THE FOUNDATION USES THE SERVICES OF AN INVESTMENT FIRM TO SELL DONATED

SECURITIES.

Schedule M (Form 990) 2023

332142 09-11-23

SCHEDULE O (Form 990) 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 Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.



52-1265361

Name of the organization

THE MARFAN FOUNDATION, INC.

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE MARFAN FOUNDATION SAVES LIVES AND IMPROVES THE QUALITY OF LIFE OF

INDIVIDUALS WITH GENETIC AORTIC AND VASCULAR CONDITIONS INCLUDING

MARFAN, LOEYS-DIETZ, AND VASCULAR EHLERS-DANLOS SYNDROMES.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE MARFAN FOUNDATION SAVES LIVES AND IMPROVES THE QUALITY OF LIFE OF

INDIVIDUALS WITH GENETIC AORTIC AND VASCULAR CONDITIONS, INCLUDING

MARFAN, LOEYS-DIETZ, AND VASCULAR EHLERS-DANLOS (VEDS) SYNDROMES WHILE

CREATING COMMUNITY.

WE PURSUE THE MOST INNOVATIVE RESEARCH AND MAKE SURE THAT IT RECEIVES

PROPER FUNDING.

WE FOSTER AN INFORMED PUBLIC AND EDUCATED PATIENT COMMUNITY TO

INCREASE EARLY DIAGNOSIS AND ENSURE LIFE-SAVING TREATMENT.

WE PROVIDE DEDICATED SUPPORT TO FAMILIES, CAREGIVERS, AND HEALTHCARE PROVIDERS.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

RESEARCH -

EXPENSES \$2,248,000, GRANTS \$1,090,810, REVENUE \$0

THE MARFAN FOUNDATION ADVANCES RESEARCH THAT SAVES LIVES AND

DRAMATICALLY ENHANCES THE QUALITY OF LIFE FOR PEOPLE LIVING WITH MARFAN

SYNDROME, LOEYS-DIETZ SYNDROME, VEDS, AND RELATED GENETIC AORTIC AND

VASCULAR CONDITIONS. OUR RESEARCH PROGRAM HAS ADVANCED SCIENCE SINCE

1981, FUNDING 176 RESEARCH GRANTS SINCE 1986. THE RESEARCH WE'VE

 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990) 2023

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 332211 11-14-23

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Schedule O (Form 990) 2023	Page 2
Name of the organization THE MARFAN FOUNDATION, INC.	Employer identification number 52-1265361
SUPPORTED HAS HELPED REDUCE LIFE-THREATENING PROBLEMS, IDE	NTIFIED
TREATMENTS THAT HAVE IMPROVED QUALITY OF LIFE, AND HELPED	PEOPLE LIVE
LONGER LIVES WITH MARFAN SYNDROME AND RELATED CONDITIONS.	THE MARFAN
FOUNDATION COLLABORATES WITH THE RESEARCH COMMUNITY AND OR	GANIZATIONS
TO IDENTIFY NEW THERAPIES AND TREATMENTS DOMESTICALLY AND	AROUND THE
GLOBE. THE FOUNDATION'S TWO-YEAR AND FOUR-YEAR GRANT MECHA	NISMS HELP
ENSURE A PIPELINE OF DEDICATED FELLOWS, NEW INVESTIGATORS,	AND FACULTY
MEMBERS WHO ARE COMMITTED TO THE SCIENTIFIC DISCOVERY NECE	SSARY TO
ADVANCE UNDERSTANDING OF RARE DISEASES. THE FOUNDATION CON	VENES
NATIONAL AND INTERNATIONAL RESEARCH CONFERENCES, FACILITAT	ES
COLLABORATIONS AMONG RESEARCHERS AND RESEARCH INSTITUTIONS	, AND HOLDS
SYMPOSIUMS IN THE US AND ABROAD TO FACILITATE THE SHARING	OF RESEARCH
FINDINGS THAT EXPEDITE PROGRESS. THE MARFAN FOUNDATION PAR	TNERS WITH
GOVERNMENT AGENCIES AND OTHER HEALTHCARE ORGANIZATIONS TO	ADVANCE ITS
RESEARCH GOALS AND ADVOCATE FOR ADDITIONAL RESEARCH FUNDIN	G FROM THE
GOVERNMENT.	

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: SUPPORT -EXPENSES \$2,059,592, GRANTS \$76,323, REVENUE \$131,140 THE MARFAN FOUNDATION ALWAYS HAS THE LATEST AND MOST ACCURATE INFORMATION ABOUT MARFAN, LOEYS-DIETZ, VASCULAR EHLERS-DANLOS (VEDS), AND OTHER GENETIC AORTIC AND VASCULAR CONDITIONS, AND IT REACHES A WORLDWIDE AUDIENCE DIGITALLY AND THROUGH IN-PERSON PROGRAMMING. THE MARFAN FOUNDATION CONNECTS THOUSANDS OF INDIVIDUALS AND FAMILIES TO MORE THAN 70 U.S. AND A GROWING NUMBER OF GLOBAL INSTITUTIONS OFFERING EXPERIENCE AND EXPERTISE IN MARFAN, LDS, VEDS, AND RELATED GENETIC AORTIC AND VASCULAR CONDITIONS. WE PROVIDE EXPANSIVE INFORMATION FOR 332212 11-14-23

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Schedule O (Form 990) 2023 Name of the organization THE MARFAN FOUNDATION, INC.	Page 2 Employer identification number 52-1265361
PATIENTS, FAMILY MEMBERS, AND HEALTHCARE PROVIDERS THROUGH	OUR WEBSITE
AND HELPLINE, ACCESSIBLE VIA PHONE AND EMAIL, AS WELL AS W	EBINARS ON
MEDICAL TOPICS, MENTAL HEALTH ISSUES, SUPPORT GROUPS, AND	QUALITY OF
LIFE. PROGRAMS ARE SCHEDULED AT VARIOUS TIMES TO INCREASE	ACCESS ACROSS
TIME ZONES (US AND ABROAD). AN INCREASING NUMBER OF RESOUR	CES AND
EDUCATIONAL OPPORTUNITIES ARE OFFERED IN SPANISH AND OTHER	LANGUAGES TO
BETTER SERVE AFFECTED PEOPLE AND THEIR SUPPORT NETWORKS. T	HE FOUNDATION
IS FOCUSED ON REACHING MORE PEOPLE IN MARGINALIZED COMMUNI	TIES,
INCREASING HEALTH EQUITY, AND FOSTERING ADDITIONAL ACCESS	TO CARE.
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMEN	TS:
EDUCATION -	
EXPENSES \$1,140,112, GRANTS \$5,280, REVENUE \$10	
THE MARFAN FOUNDATION AND ITS DIVISIONS (THE LOEYS-DIETZ S	YNDROME
FOUNDATION, THE VEDS MOVEMENT, AND THE GENTAC ALLIANCE) AR	E THE
PREEMINENT PROVIDERS OF INFORMATION AND PROGRAMS FOR AFFEC	TED
INDIVIDUALS AND FAMILIES WITH GENETIC AORTIC AND VASCULAR	CONDITIONS,
MEDICAL PROFESSIONALS, RESEARCHERS, AND THE GENERAL PUBLIC	. WE REACH
ONE MILLION PEOPLE ANNUALLY WITH OUR EDUCATIONAL RESOURCES	
THE MARFAN FOUNDATION OFFERS A WEALTH OF MEDICAL AND QUALI	TY-OF-LIFE
INFORMATION FOR PEOPLE LIVING WITH MARFAN SYNDROME, LOEYS-	DIETZ,
VASCULAR EHLERS-DANLOS (VEDS), AND RELATED CONDITIONS IN M	ANY LANGUAGES
THROUGH ITS HELP & RESOURCE CENTER, WHICH REACHES 5,000 PE	OPLE EVERY
YEAR DIRECTED BY IN-HOUSE NURSES AND A BILINGUAL MANAGE	R WHO ANSWER
QUESTIONS BY PHONE AND EMAIL, AND THROUGH ITS COMPREHENSIV	E WEBSITE,
WHICH IS AVAILABLE IN 25 LANGUAGES. THE FOUNDATION OFFERS	SPECIALIZED
RESOURCES FOR CHILDREN, TEENS, PARENTS, TEACHERS, AND SCHO	OL NURSES. IN
ADDITION, THE FOUNDATION IS FOCUSED ON MENTAL HEALTH, OFFE	
332212 11-14-23 55 511022 150972 206512 2022 04020 MUE MAREAN EC	Schedule O (Form 990) 2023

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OF OPPORTUNITIES, INCLUDING VIRTUAL SUPPORT GROUPS, VIDEOS, WEBINARS,

AND OTHER CONTENT. THE MARFAN FOUNDATION FOCUSES ON EXPANDING HEALTH

EQUITY AND ACCESS TO CARE FOR THE CONSTITUENTS WE SERVE GLOBALLY.

FORM 990, PART VI, SECTION A, LINE 2:

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

FORM 990, PART VI, SECTION A, LINE 4:

THE BY-LAWS WERE AMENDED TO UPDATE THE CURRENT MISSION, TERM LIMITS, CHAIR

AND OFFICER POSITIONS, AND NON-GOVERNMENTAL STANDING COMMITTEES.

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

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 332212 11-14-23 Schedule O (Form 990) 2023 56

Schedule O (Form 990) 2023	Page 2
Name of the organization THE MARFAN FOUNDATION, INC.	Employer identification number 52-1265361
EXECUTIVE SESSION IS CONDUCTED AS PART OF THE REVIEW AND A	N EXECUTIVE
SESSION IS ALSO CONDUCTED WITH THE BOARD REPORTING THE RES	ULTS AND ANY
CHANGE IN COMPENSATION CONSIDERATION. COMPENSATION SURVEYS	ARE ALSO
REFERENCED IN DETERMINING SALARIES. IN ADDITION, THE FOUND	ATION CONDUCTS AN
ANNUAL PERFORMANCE REVIEW FOR ALL OF ITS OFFICERS, AND ALL	OTHER EMPLOYEES.
THE ANNUAL PERFORMANCE REVIEW INCLUDES FEEDBACK FROM THE C	EO, DISCUSSES ANY
ACCOMPLISHMENTS DURING THE YEAR AND INCLUDES RECOMMENDATION	NS 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, AR, CA, FL, GA, HI, IL, KS, KY, MD, MA, MI, MN, MS, MO, NV, NH, NJ, NM, N	Y, NC, ND, OR, PA, RI
SC, TN, VA, WV, WI, AK, CO, CT, DC, LA, ME, OH, OK	
FORM 990, PART VI, SECTION C, LINE 19:	
THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND A	UDITED FINANCIAL
STATEMENTS ARE ALL AVAILABLE UPON REQUEST. IN ADDITION, T	HE AUDITED
FINANCIAL STATEMENTS AND THE FORM 990 ARE AVAILABLE TO THE	PUBLIC ON THE
ORGANIZATION'S WEBSITE, WWW.MARFAN.ORG.	

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
AWARD REFUNDS	35,083.
CHANGE IN VALUE OF CHARITABLE REMAINDER TRUST	43,522.
UNCOLLECTIBLE EXPENSE	-35,000.
TOTAL TO FORM 990, PART XI, LINE 9	43,605.

FORM 990, PART XII, LINE 2C, CHANGE IN OVERSIGHT PROCESS

NO CHANGE FROM THE PRIOR YEAR.

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chedule O (Form 990) 202 ame of the organization						Employer identification number 52-1265361
	THE M	ARFAN	FOUNDATIO	N,	INC.	52-1265361