

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



__Form 990-PF

Department of the Treasury Internal Revenue Service

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust

Treated as a Private Foundation

Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0052

2009

For	calen	dar year 2009, or tax	year beginnin	g				, 2009, ar	nd end	ding		, 20	
G	heck	all that apply:	Initial return			nitial return		er public c	- ·	ne change	Final retu	rn	
Use	the I	IRS Name of founda	ation						<u> </u>	A Emplo	ver identifi	cation number	
	label.	,,,•		SCO CI	TARI	TART.E	TRUS	T.			5 4165 0		
Otl	nerwi								/outto	+		s (ooo unatrustia na)	
	print r type	משתיפתם ו		umberit maii	ber if mail is not delivered to street address) Room/suite					B Telephone number (see instructions) (781) 273 - 5478			
	Spec		ate, and ZIP cod	de						C If exemp	t. application	is pending, check here	
Inst	ructio	ons. Burlingto	on MA 01	803						D 1. Fore	eign organiz	ations, check here	
H C	heck	type of organization:	X Section 5	501(c)(3) ex	empt	private four	ndation			2. Fore	ign organizatio	ons meeting the 85% and attach computation	
\square s	Section	n 4947(a)(1) nonexem				xable priva		tion				on status was	
		rket value of all assets	 			nethod:		X Accrua	al le	termina	ated under : (1)(A), chec	section	
		om Part II, col. (c), line			er (spe		Joann	- Accide	ш			in a 60-month	
▶ \$	w (11 c		93,538	. –		d) must be	an asah k	nania \		! termina	ation under	section	
Pa	4 1	Analysis of Revenue			iumn (a) musi be	on cash t	oasis.)		507(a)	(1)(B), chec	T	
Ta		The total of amounts i		(a)	Reven	rue and	(b) Ne	t investme	nt	(c) Adjus	sted net	(d) Disbursements for charitable	
	(c), & (d) may not nec	essarily equal th	,	xpens	•	, , ,	ncome	``	inco		purposes	
		amounts in column (a) Contributions, gifts, grant).)	bool	KS						(cash basis only)	
	•	(attach echodulo)				·····							
	2	Check ► If the found to attach So	ch. B	irea									
	3	Interest on savings and te	mp. cash investme	nts		137					137	- 4 - 4	
	4	Dividends and interes	st from securitie	s	7	8,609				•	78,609	`	
	5 a	Gross rents											
_		Net rental income or (loss)			***********						***************************************		
R	-	Net gain/(loss) from sale of	of assets not on line	e 10	-2	7,113		·		***********	***********		
E		Gross sales price for all assets on line 6a	133,554										
Ē	_	Capital gain net income (fr	rom Part IV. line 2)	_		••••		••••••••	0		***************************************		
'N		Net short-term capita			*************						0	· · · · · · · · · · · · · · · · · · ·	
U		Income modifications				•••••••		••••••			0		
E.		Gross sales less		`o				······			<u> </u>		
		rtns. & allowances Less: Cost of		<u> </u>						······································	.,		
		goods sold L	/					······				, ,	
		Gross profit or (loss)	•				ļ						
•		Other income (attach			<u>-</u>				_				
$\overline{}$	12	Total. Add lines 1 three Compensation of officers	ough 11			1,633			0		78,746	,	
. P	13	directors, trustees, etc	·		1	.8,500				:	18,500	18,500	
E,		Other employee salar	_										
R		Pension plans, emplo	•				ļ						
T		Legal fees (attach sch		·	1	3,540				:	13,540	13,540	
1	b.	Accounting fees (attack	ch schedule)									,	
N G	C	Other professional fee	9 9 (attach schedu	le)				RE	CE	VED			
&	17	Interest		[10		
	18	Taxes (attach schedule)	(see instructions)					JUN	<u>ال</u> س ا	2010	80	~	
AD		Depreciation (attach so					182	3014	W P	UI WA	S		
M		Occupancy	•					L		***	萬		
N		Travel, conferences,						OG	DA	N, UT		,	
E		Printing and publication	-				-			- '			
X		Other expenses (attac		-		152			-+		152	-· 152-	
PI		•	•										
E		Total operating and			•	2 102			0		32,192	32,192	
N S E		expenses. Add lines	_			2,192				***************************************	, 4, 476		
Ē		Contributions, gifts, g				5,000			+		10 100	95,000	
S		Total exp. & disbursement		1 25	12	7,192			0		32,192	127,192	
	a	Subtract line 26 from Excess of revenue o	ver expenses									` `	
- 1	i	and disbursements .			-7	5,559			<u> </u>	***************************************	***************************************	***************************************	
		Net Investment Inco							0				
\Box	C	Adjusted net income	(if neg., enter -0-)						4	16,554	/ · · · › · · · ·	

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions.

Form **990-PF** (2009)

JVÁ

Ds	irt II	Balance Sheets description column should be for	Beginning of year	End	of year
	47 N - 4X	end-of-year amounts only. (See inst.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash non-interest-bearing			
	2	Savings and temporary cash investments			, -
	3	Accounts receivable▶			,
		Less: allowance for doubtful accts. ▶	1		
	4	Pledges receivable ▶			· · · · · · · · · · · · · · · · · · ·
		Less: allowance for doubtful accts. ▶	Ì		
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	•	disqualified persons (attach schedule) (see the instructions)			
A	7	Other notes and loans receivable (attach schedule)			
S		Less: allowance for doubtful accounts	Ì		_ : ,
S	8	Inventories for sale or use			
Ĕ	9	Prepaid expenses and deferred charges			
Ś	10a	Investments U.S. and state govt. obligations (attach sch)			,
		Investments corporate stock (attach schedule)			.,
	ı	Investments corporate bonds (attach schedule)			
	11	Investments — land, buildings, and equipment: basis		······································	· · · · · · · · · · · · · · · · · · ·
		Less: accumulated depreciation (attach schedule)	†		
	12	Investments mortgage loans			
	13	Investments other (attach schedule) #3.	1,935,330	1,705,466	1,793,538
•4.	14		1,933,330	1,703,400	1,733,536
	'-	Land, buildings, and equipment: basis Less: accumulated depreciation (attach schedule)	İ		
,	15	(attach schedule) Other assets (describe			
	16	Total assets (to be completed by all filers see the			
		instructions. Also, see page 1, item I)	1,935,330	1 705 466	1 702 520
T	17	Accounts payable and accrued expenses	1,935,330	1,705,466	1,793,538
Ţ	18	Grants payable			┥ , .
A B	19	Deferred revenue			
1	20	ł			
Ĩ	21	Loans from officers, directors, trustees, and other disqualified persons			
i	22	Mortgages and other notes payable (attach schedule) Other liabilities (describe ▶			┥ ′ ∵
E S	23				
<u> </u>	23	Total liabilities (add lines 17 through 22)	0	0	`┤
	l				
NF.	24	and complete lines 24 through 26 and lines 30 and 31.	1		
E V T N	24	Unrestricted			⊣ ` ` `
Ď	25	Temporarily restricted			┥` ′ 、′
. ASSETS OR	26	Permanently restricted			⊣ ` · · · ·
s A		and complete lines 27 through 31.			*** **
ξÀ		-			32.1
έŅ	27	Capital stock, trust principal, or current funds			
oΕ	28	Paid-in or capital surplus, or land, bldg., and equipment fund	1 005 000	1 705 466	.
RS		Retained earnings, accumulated income, endowment, or other funds	1,935,330	1,705,466	
	30	Total net assets or fund balances (see the instructions)	1,935,330	1,705,466	
	31	Total liabilities and net assets/fund balances (see the inst.)	1,935,330	1,705,466	
		Analysis of Changes in Net Assets or Fund Bal			
1		I net assets or fund balances at beginning of year Part II, column	• • • • •	1	1 025 220
^		-of-year figure reported on prior year's return)			
2		r amount from Part I, line 27a			
		er increases not included in line 2 (itemize)		3	
_		lines 1, 2, and 3			
5		reases not included in line 2 (itemize) See attachmer			
6	ıota	I net assets or fund balances at end of year (line 4 minus line 5)	- raπ II. column (b), line :	30 6	1,705,466

	e kind(s) of property sold (e.g., re se; or common stock, 200 shs. N	•	(b) How acquired P Purchase D Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a See attachment			D Denation	(111, 111, 111,	(,,, ,,
b			·		
- C					
d					
<u> e </u>			1		
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or plus exper			n or (loss)) minus (g)
·a · `					
b '					
d d	···	 			
e	· • • • • • • • • • • • • • • • • • • •	 			
	ring gain in column (h) and owne	d by the foundation	on 12/21/60		
	(j) Adjusted basis	(k) Excess			(h) gain minus less than -0-) or
(i) F.M.V. as of 12/31/69	as of 12/31/69	over col.			om col. (h))
<u>a</u>		ļ			
<u>b</u>					
d		 			
e e		-			
			¬	· -	
2 Capital gain net income or (net	t capital loss) If gain, if	also enter in Part I, I enter -0- in Part I,	line 7	2	-27,113
3 Net short-term capital gain or (— · ·			-	277223
	8, column (c) (see the instruction]		
4	8		`````	3	· 0 -
	nder Section 4940(e) for		n Net Investn	nent Income	**
section 4940(d)(2) applies, leave Vas the foundation liable for the se "Yes," the foundation does not q	ection 4942 tax on the distributab			od?	. Yes 🗓 No
1 Enter the appropriate amount	ın each column for each year; se	e the instructions be	efore making any e	ntries.	
(a) Base period years Calendar year (or tax year beg. in)	(b) Adjusted qualifying distribu	tions	(C) Net value of haritable–use assets	Dis	(d)
2008	2,945,6		3,429,95		0.858810
2007	181,0		4,725,42		0.038317
2006	158,0	00			
2005	165,5	82			
2004	120,0	00			
2 Total of line 1, column (d)					0.897127
•	he 5-year base period divide				
of years the foundation has be	en in existence if less than 5 yea	rs		3	0.179425
. Catas the wet welve of sevents		3 V - P =			
4 Enter the net value of noncha	madie-use assets for 2009 from I	Part X, line 5	• • • • • • • • • • • • • • • • • • • •	4	3,429,957
E Martinta lang 4 har ling 0					C1E 400
5 Multiply line 4 by line 3			• • • • • • • • • • • • • • • • • • • •	5	615,420
6 Enter 1% of net investment inc	come (1% of Part L line 27h)				•
- Lines 170 or her myestrile lift	жию (170 VI Fait I _I IIII 27 V), , , ,			6	
7 Add lines 5 and 6				7	615,420
	***********************			··· - 	727720
B Enter qualifying distributions for	rom Part XII, line 4			8	127,192
If line 8 is equal to or greater t					

Form **990–PF** (2009)

11. 6 6.4.

X

NXA

X

X

8b

10

	1 990-PF (2009) AMERICO J FRANCISCO CHARIT 03-0541650 1 VII-A Statements Regarding Activities (continued)		P	age 5
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	1	l	Γ
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		x
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before	<u> </u>		
	August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13		
	Website address ▶N/A		ı.	
14	The books are in care of ▶See attachment #6 Telephone no. ▶		17, 2	
	Located at ► ZIP+4 ►			-
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 Check here			•
	and enter the amount of tax-exempt interest received or accrued during the year ▶ 15			_
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	·No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		.	Ì
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		ŀ	•
,	a disqualified person?			Ī
.	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		,	Ī
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			•
	(5) Transfer any income or assets to a disqualified person (or make any of either available			Ī
	for the benefit or use of a disqualified person)?			I
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			•
	If the foundation agreed to make a grant to or to employ the official for a period			•
	after termination of government service, if terminating within 90 days.)			I
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in			▋.
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see the instructions)?	1b	L	X
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
	that were not corrected before the first day of the tax year beginning in 2009?	1c		X
, 2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	,		•
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		`	I
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d			I
	and 6e, Part XIII) for tax year(s) beginning before 2009?			•
٠ _	If "Yes," list the years ▶ 20 , 20 , 20 , 20			•
Ь			."	•
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			!
	to all years listed, answer "No" and attach statement see the instructions.)	2b	ļ	X
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			ŧ
ξ.	▶ 20 , 20 , 20 , 20		1	ŧ

09 990PF5

JVA

TWF 33163

Copyright Forms (Software Only) - 2009 TW

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?.............

3a Did the foundation hold more than a 2% direct or indirect interest in any business

Form **990-PF** (2009

4a

		F (2009)AMERICO J FRANCISCO					Page 6
Par	t VII-I	Statements Regarding Activ	vities for Which	Form 4720 May Be	Required (continued	1)	
5a	During	the year did the foundation pay or incu	r any amount to:				
	(1) C	arry on propaganda, or otherwise attemp	ot to influence legislation	on (section 4945(e))?	Yes 🖾 N	lo	l I
	(2) Ir	fluence the outcome of any specific pub	lic election (see section	n 4955); or to carry			
	0	n, directly or indirectly, any voter registra	tion drive?		Yes 🕱 N	lo	
	(3) P	rovide a grant to an individual for travel,	study, or other similar	purposes?	Yes 🕱 N	lo	
•		rovide a grant to an organization other th					∤ .
		section 509(a)(1), (2), or (3), or section		=	Yes 🗷 N	lo	l
		rovide for any purpose other than religio		· · · · · · · · · · · · · · · · · · ·			1 1
		ducational purposes, or for the preventio		•	Yes 🖾 N	lo l	1 1
b		answer is "Yes" to 5a(1)-(5), did any of t					
• -		ations section 53.4945 or in a current not				5b	l x
		zations relying on a current notice regar			•		
С		answer is "Yes" to question 5a(4), does to					
		se it maintained expenditure responsibile		•	N/A Yes A	lo É	
		s," attach the statement required by Regu					
6a		e foundation, during the year, receive an					
		ersonal benefit contract?	-	. ,	Yes 🛣 N	10	
b		e foundation, during the year, pay premi				6b	x
_		" to 6b, file Form 8870.	arris, ancony or manoc	ay, on a personal benefit	Contracti	- 00	
7a		time during the tax year, was the foundary	ation a narty to a nrohi	hitad tay shaltar transact	ion? Vee X		
		did the foundation receive any proceeds					x
	1 VIII						
• 441	\$ 3F43FE	and Contractors	Directors, Truste	es, i odiladion me	inagers, riiginy Pa	id Linpio	yees,
1	l let al	l officers, directors, trustees, foundati	on managers and the	ilr compensation (see ti	ne Instructions)		
•	Elot u	Tomocio, uncotoro, u ustees, iounidad	(b) Title, and avg.	(-) C	(d) Contributions to	(-) F	
		(a) Name and address	hours per week	(c) Compensation (If not paid, enter -0-)	employee benefit plans	(e) Expens	e account, owances
g _A	<u> </u>	tachment #7	devoted to position	(, c	and deferred comp.	Other and	
566	- 40	caciment #/					
							٠
							_
							ž.
							•
			L				
2		ensation of five highest-paid employe e, enter "NONE."	es (other than those	Included on line 1 se	ee the instructions).	,	'
		o, onto: 11011£.	T	<u> </u>	(d) Contributions to		
(a) Name	and address of each employee paid	(b) Title, and avg.	4-> 0	emplovee benefit	(e) Expens	e accòunt,
-	-	more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred		owances
10N	TP		dovoted to position		compensation		·
HOI	12						
			1			., '	· · ·
			•				
							-
-							
							1
						·	
<u>.</u>							
[otal	numb	er of other employees paid over \$50,000					▶

JVA

09 990PF6

TWF 33164

Form 990-PF (2009) AMERICO J FRANCISCO CHARIT 03-0541650 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services (see the instructions). If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year, include relevant statistical information such as the number Expenses of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 2 3 Part IX-B Summary of Program-Related Investments (see the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount 1 2 All other program-related investments. See the instructions. 3

09 990PF7

Total. Add lines 1 through 3

TWF 33165

Copyright Forms (Software Only) - 2009 TW

Form **990-PF** (2009)

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	dations,	
	see the instructions.)	p	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
_	purposes:		
_	Average monthly fair market value of securities.	1a	1,774,394
b	<u> </u>	1b	1,707,796
c	Fair market value of all other assets (see the instructions)	1c	
d	Total (add lines 1a, b, and c).	1d	3,482,190
е	The second secon		
_	1c (attach detailed explanation)	1	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	3,482,190
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see	1	
	the instructions)	4	52,233
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,429,957
6	Minimum Investment return. Enter 5% of line 5	6	171,498
Pa	Distributable Amount (see the instructions) (Section 4942(j)(3) and (j)(5) private operating		
	foundations and certain foreign organizations check here > X and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2009 from Part VI, line 5		
ь	Income tax for 2009. (This does not include the tax from Part VI.)]	
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see the instructions)	6	
7.	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	
Da	rt XII Qualifying Distributions (see the instructions)		-
		,	-
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		•••
а	Expenses, contributions, grfts, etc total from Part I, column (d), line 26	1a	127,192
b	Program-related investments total from Part IX-B	1b	<u> </u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		-
а	Suitability test (prior IRS approval required)	3a	<u> </u>
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	127,192
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
::-	Enter 1% of Part I, line 27b (see the instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	127,192
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether t	he found	ation
	qualifies for the section 4940(e) reduction of tax in those years.		
JVA	09 990PF8 TWF 33168 Copyright Forms (Software Only) - 2009 TW	F	orm 990–PF (2009)

Part XIII	Undistributed Income (see			T	
4 Dietmbe	utable amount for 0000 from Bort VI	(a)	(b)	(c)	(d)
	utable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009
	buted income, if any, as of the end of 2009.		,		
	amount for 2008 only				
	r prior years: 20 , 20 , 20	·			
	distributions carryover, if any, to 2009				·····
	2004				
	2005	1			
	2006	1			
d From 2	2007	1			
e From 2	2008]			,
f Total (of lines 3a through e	0			
4 Qualifyi	ng distributions for 2009 from Part XII,				
line 4	▶ \$ <u>127,192</u>				
a Applie	d to 2008, but not more than line 2a				
b Applied	to undistributed income of prior years				
	n required see the instructions)				
	d as distributions out of corpus				
•	on required see the instructions)				
	d to 2009 distributable amount				
_	ing amount distributed out of corpus			,	`
	distributions carryover applied to 2009				,
	nount appears in column (d), the same			`	
	must be shown in column (a).) the net total of each column as				
	ted below:				
	Add lines 3f, 4c, and 4e. Subtract line 5				
7	ears' undistributed income. Subtract				
	from line 2b				`
►	ie amount of prior years' undistributed				
•	for which a notice of deficiency has been				
1 -	or on which the section 4942(a) tax has				
been pro	eviously assessed				
d Subtra	ct line 6c from line 6b. Taxable	***************************************			
amoun	nt see the instructions			.	,
e Undisti	nbuted income for 2008. Subtract				
line 4a	from line 2a. Taxable amount				
see the	e instructions				,
	ributed income for 2009. Subtract				
	d and 5 from line 1. This amount				
	e distributed in 2010				
	nts treated as distributions out of				
•	to satisfy requirements imposed				
	tion 170(b)(1)(F) or 4942(g)(3) (see				
	tructions)				· //·
	distributions carryover from 2004				•
	plied on line 5 or line 7 (see the				,
	tions)s distributions carryover to 2010.				
	ct lines 7 and 8 from line 6a				
	is of line 9:				
-	s from 2005				11 11
	s from 2006				1 11 11
	s from 2007				,
	s from 2008				
	s from 2009			1	

Pai	XIV Private Operating Found	ations (see instruc	ctions and Part VII-A	, question 9)		
1a	If the foundation has received a ruling or	determination letter	that it is a private op	erating		
	foundation, and the ruling is effective for	2009, enter the date	of the ruling	▶ 06-10	-2003	
b	Check box to indicate whether the found	ation is a private ope	erating foundation de	escribed in section	X 4942(j)(3) or	4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum investment return from Part X for each	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
	year listed	46,554	69,483	188,666	· · · · · · · · · · · · · · · · · · ·	304,703
b	85% of line 2a	39,571	59,061	160,366		258,998
c	Qualifying distributions from Part XII,					· · · · · · · · · · · · · · · · · · ·
•	line 4 for each year listed	127,192	59,061	160,366		346,619
d	Amounts included in line 2c not used			· · · · ·		
_	directly for active conduct exempt act.		3,083,843	181,106	158,000	3,422,949
, e	Qualifying distributions made directly					
·	for active conduct of exempt activities.					
	Subtract line 2d from line 2c	127,192				o
3	Complete 3a, b, or c for the alternative					
٠.	test relied upon:					
а	"Assets" alternative test enter:					
	(1) Value of all assets		"			0
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)		3,083,843	181,106	158,000	3,422,949
b	"Endowment" alternative test enter 2/3 of min. investment return shown in					
	Part X, line 6 for each year listed					0
C	"Support" alternative test enter:					
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on securities loans (section 512(a)					
·	(5)), or royalties)					0
	(2) Support from general public and					
	5 or more exempt organizations as provided in section 4942(j)(3)					
	(B)(iii)					0
	(3) Largest amount of support from an	i				. ,
	exempt organization					. 0
-	(4) Gross investment income	(2)				. 0
Pai	Supplementary Informati			the foundation	had \$5,000 or r	more in assets
	at any time during the ye		instructions.)			
1	Information Regarding Foundation Mai					
a	List any managers of the foundation who				eived by the founda	tion before the
	close of any tax year (but only if they hav	e contributed more i	man \$5,000). (See Se	ection 507(a)(2).)		
b	List any managers of the foundation who	04/n 109/ or more o	f the steels of a semi	oration (or an aquelle	. large pertian of the	
	of a partnership or other entity) of which		-		y iaige poilloii oi liit	- Anterania
	None	ine loundation has a	1076 or greater litter	1651.		
2	Information Regarding Contribution, G	rant Gift Loan Sci	holarship etc. Proc	arame.		
_	Check here ▶ if the foundation only				and does not accen	t unsolicited
	requests for funds. If the foundation make					
	complete items 2a, b, c, and d.	,	(
a	The name, address, and telephone numb	per of the person to	whom applications s	hould be addressed:		
	. ,					
b	The form in which applications should be	submitted and infor	mation and materials	s they should include);	
				,		
С	Any submission deadlines:					
		····				
ď	Any restrictions or limitations on awards,	such as by geograpi	hical areas, chantable	e fields, kinds of inst	tutions, or other fac	tors:

Form 990-PF (2009) AMERICO J FRANCISCO CHARIT 03-0541650 Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient Purpose of grant or show any relationship to status of Amount contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year See attachment #8 95,000 Approved for future payment

Total

▶ 3b

Form 990-PF (2009) AMERICO J FRANCISCO CHARIT 03-0541650

Page 12

Enter gross amounts unless otherwise indicated.	Unrelated	business income	Excluded b	y section 512, 513, or 514	(e)
	(a)	(b)	(c)	(d)	Related or exempt
	Business	Amount	Excl.	Amount	function income (See the
1 Program service revenue:	code		code		instructions.)
a					
b			7		
c					
d					
e					
f					
g Fees & contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments	i i				137
4 Dividends and interest from securities					78,609
5 Net rental income or (loss) from real estate:				Ÿ	
a Debt-financed property		***************************************			<u> </u>
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income		· · · · · · · · · · · · · · · · · · ·			
8 Gain or (loss) from sales of assets other than inventory					-27,113
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory				•	
11 Other revenue: a					_
b					
c					
d					- (
e				•	-
12 Subtotal. Add columns (b), (d), and (e)		0		0	51,633
13 Total. Add line 12, columns (b), (d), and (e)				13	51,633
(See worksheet in line 13 instructions to verify calcula	tions.)				- · · · · · · · · · · · · · · · · · · ·

Line No. ▼ Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See the instructions.)

See attachment #9

Form **990-PF** (2009)

35

1	KEE W		intormation I Exempt Orga		ransfers To and T	ransactio	ns and i	Relations	ships Wit	h Nonchai	ritable	
1	Did				age in any of the follow	ing with any	other orga	nızatıon de	scribed in se	ection	Yes	No
				-)(3) organizations) or in		_			i i	ļ	1
а				-	noncharitable exempt of		_	,	J			1
			-		· · · · · · · · · · · · · · · · · · ·	_				1a(1)	, 1	X
												X
b		er transa										1
	(1)	Sales o	f assets to a nor	ncharitable exem	pt organization					1b(1)	, 1	T X
					le exempt organization							X
					assets							X
												X
	(5)	Loans	or loan guarante	es								X
					or fundraising solicitati							X
c					other assets, or paid er							X
. d	good	ds, othe	r assets, or serv	ices given by the	omplete the following so reporting foundation. I the value of the goods,	f the foundat	on receive	ed less than	fair market	air market val value in any t	ue of the	e on
(a) L	ine no.	(b) Ar	nount involved	(c) Name of no	nchantable exempt org	anization (d)	Descriptio	n of transfer	, transactions,	and sharing arra	angement	is
	sect	ion 501(other than sectio	d with, or related to, on n 501(c)(3)) or in section						: /es [2	☑ No
		(a) N	ame of organiza	tion	(b) Type of or	ganızation		(c)	Description	n of relationsh	ıp	
	Under true, c	penalties orrect, an	of perjury, i declare d complete. Declar	e that I have examin ation of preparer (ot	ed this return, including acc her than taxpayer or fiducia	ompanying schi ry) is based on a	edules and st	tatements, ar	d to the best o	of my knowledge y knowledge.	and beli	ef, it is
ا ۽			-0	()			11 -					
S	_		MCDIC:	17ac		5	1145	<u>) </u>	PRESID	ENT		
G	y Sig	gnature	of officer or trus	tee '		· · · · · · · · · · · · · · · · · · ·	Date		Title			
N	Dold					Date	ا	Check if		reparer's iden		
	Paid Pre-		. 1	1	$\Omega \Lambda \Lambda$		Š	self-employ	eu 🗀 j	umber (see S	_	e in
H	par-		arer's	1 1 1	1 / mallan	50	2010	,	l th	ne instructions	s)	
R	er's	signa	y a gin	york 1	unoveren	5-20	-8016	,				
E	Use		s name (of your	3 L	AX GROUP INC		ME 4.4		IN ▶			
	Only		f−emploýed), ess, and ZIP cod			LOOR S	TE 10		hone no. 701 \ 00:	0 2011		
								(781)89		0 05	(0000)
JVA	09	990PI	F13 TWF 3315	59 Copyright F	orms (Software Only) – 2009	ΤW				Form 99	リーアド	(2009)

j -

SCHEDULE OF LEGAL FEES

Attachment	1:	page	_1	_	990-PF	Page	1,	Part	I,	Line	16a			
Open to Public		· -												
Inspection	For c	alendar v	ear	2009	or tax period	d bealnnir	ıa			. and	endina		_	

Open to Public						
Inspection	For calendar year	2009, or tax period	d beginning	, and	ending	
Name of Organizat AMERICO J	ion FRANCISCO	CHARITABLI	E TRUST			ntification Number 5 0
	egal Description		Amount	Net Investment	Adjusted	Disbursements for
				Income	Net Income	Charity
LEGAL		İ	13,540		13,540	13,540
						- '
						- 1
,						
						se emercia
						,
· ;						-
•						
•						,
No.						
-	,					, ,
						,
			İ			-
						•
			,			
		ļ				

13,540

13,540

13,540

Total

OTHER EXPENSES SCHEDULE

Open to Public	2: page 1 990-							
Inspection	For calendar year 2009, or ta	ex period beginning	$_{}$, and ϵ					
lame of Organizat				Employer Iden	Employer Identification Number			
MERICO J	FRANCISCO CHARI	TABLE TRUST		03-05416	50			
	scription of Activity	Revenue and Expenses	Net Investment Income	Adjusted Net Income	Disbursements for Charity			
BANK FEES	NG FEE	82 70		82 70	82 70			
				,				
					,			
	Tota	152		152	15			

SCHEDULE OF INVESTMENTS - OTHERS

Open to Public Inspection	3: page 1 - 990-PF Page 2, For calendar year 2009, or tax period beginning		, and en				
ame of Organizat					r Identification Number 41650		
	Description	Cost	FMV at Year End	Book Value	Fair Market Value		
NVESTMENT	rs .			1,705,466	1,793,53		
				2,700,200	_,,,,,,,		
2.							
ì							
•							
				;			
				1 505 466	1 800 50		
			Total	1,705,466	1,793,53		

Open to Public Inspection For calendar year 2009, or tax period beginning	, and ending .
ame of Organization MERICO J FRANCISCO CHARITABLE TRUST	Employer Identification Number 03-0541650
Description of Decrease	Total Amount
ECREASE IN BOOK VALUE	154,30
(12년) 원교 :	
· ·	
	,

Total

154,305

PART IV CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

	en to Public	: pag	e 1 - 990-PF Page	3, Part I	V, line 1	•	
-		r calendar	r year 2009 or tax period beginni	na	, and endir	na	
Name	e of Organization		CO CHARITABLE TRU		, and endir		fication Number
1	(a) List and 2-story MA HEALTH	d describe brick war	e the kind(s) of property sold (e.g., rehouse; or common stock, 200 sh	real estate,	P Purchase D Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.) 02-24-2009
2 3 4	MA STATE MA STATE WAYLAND M	A			P P P	11-07-2001	10-22-2009 01-02-2009 07-15-2009
	(e) Gross sales p	price	(f) Depreciation allowed (or allowable)	(g) Cost or ot		(h) Gain o	r (loss) minus (g)
1 2 3 4	5 9 5	3,917 9,637 5,000 5,000		pido oxport	70,817 59,850 5,000 25,000	(e) plus (i)	-26,900 -213
1 2 3 4	Complete only for (I) F.M.V. as of 12		nowing gain in column (h) and own (j) Adjusted basis as of 12/31/69	ned by the foundation (k) Excess ri over col. (col. (i)	(I) Gains (Col. (I col. (k), but not I Losses (fro	ess than -0-) or
•							,

BOOKS ARE IN CARE OF

Attachment 6 - 990-PF Page 5, Part VII-A, Line 14	
Open to Public	
Inspection For calendar year 2009, or tax period beginning , and er	nding
Name of Organization	Employer Identification Number
AMERICO J FRANCISCO CHARITABLE TRUST	03-0541650
Part VII-A - Line 14	
Individual Name	
, or	
Business Name:	
AMERICO J. FRANCISCO CHARITABLE TRUST	
Street Address	<u> </u>
burlington	
NO 814	
U.S. Address:	
Zip code 01803 City Burlington	ws
	State MA
Or Facility Add	
Foreign Address	
Cety	
City	
Province or State	
Province or State	
Country	
, Soundy	
Postal code	6
1 0000 0000	
Phone Number	/781\273 5478
i nama manasa — i i i i i i i i i i i i i i i i i i	
Fax Number	

L0819F

CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

Attachment 7: page 1 - 990-PF Page 6, Part VIII										
Open to Public										
Inspection Name of Organizat	For calendar year 2009, of	or tax period beginning	, and ending Employer Identification Number							
	FRANCISCO CHAI	RITABLE TRUST		03 - 0541650						
(A) Name and Address		d Address (B) Title and Average Hrs. per Week		(D) Cont. to Employee Ben. Plans & Def. Comp.	(E) Expense Account & Other Allowances					
ANGELA RAC		TRUSTEE			, , , , , , , , , , , , , , , , , , , ,					
1 PORTER A Burlington	AVE A, MA 01803	20.00	30,000	0	0					
_	,		30,000		Ů					
3.0										
* ()										
•										
•					•					
-					- ;					
Ţ,										
v •										
-										
-										
			<u>L</u>							

GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

Attachment 8: page 1 990-PF Page 11, Part XV Line 3a

Open to Pu Inspection For calendar year 2009, or tax period beginning , and ending

Name of Organization **Employer Identification Number**

AMERICO J FRANCISCO CHARI	03-0541650			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
OUVILLE LIFE CARE				
1575 CAMBRIDGE STREET				
CAMBRIDGE, MA 02138				6,000
MAPS				
1046 CAMBRIDGE STREET				
CAMBRIDGE, MA 02139				3,000
EAST END HOUSE				
105 SPRING STREET				
CAMBRIDGE, MA 02140				29,000
EAST CAMBRIDGE				
SCHOLARSHIP FUND				
CAMBRIDGE, MA				5,000
SOMERVILLE/CAMBRIDGE		1		
ELDER SERVICES				
61 MEDFORD STREET				
SOMERVILLE, MA 02143]		10,00
CAMBRIDGE HEALTH ALLIANCE]		
1493 CAMBRIDGE STREET				•
CAMBRIDGE, MA 02139				5,00
SOAR AGING RELIGIOUS				
900 VARNUM STREET, NE				
ASHINGTON, DC 20017				4,00
ITALIAN HOME FOR CHILDREN				
1125 CENTER STREET				
JAMACA PLAIN, MA 02130				5,00
LITTLE SISTERS OF THE				
POOR				, ,
L86 HIGHLAND AVENUE				
SOMERVILLE, MA 02143				3,50
ST FRANCIS HOUSE				
39 BOYLSTON STREET				4 00
BOSTON, MA 02116				4,000
NEW ENGLAND HOME FOR		-		
LITTLE WANDERS		1		
271 HUNTINGTON STREET				2 00
BOSTON, MA 02115				2,00
ROSIE'S PLACE				
889 HARRISON AVENUE		·		2 00
BOSTON, MA 02118				3,000
CATHOLIC RELIEF PO BOX 17152				
				Ė 00
SALTIMORE, MD 21298-8452				5,00
CATHOLIC TELEVISION				
34 CHESTNUT STREET				2.00
VATERTOWN, MA 02471				2,000
ST ANTHONY, S CHURCH				
100 CARDINAL MEDEIROS AVE		Щ.		86,50
	I NA19E			09 EOPFGR

GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

Attachment 8: page 2 990-PF Page 11, Part XV Line 3a

Open to Pu

Inspection For calendar year 2009, or tax period beginning , and ending Name of Organization

AMERICO J FRANCISCO CHARITABLE TRUST

Employer Identification Number 0.3 - 0.541.650

AMERICO J FRANCISCO CHARIT			03-0541650				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount			
. Name and address (home or business)	or substantial contributor	recipient	oonan Dagon				
CAMBRIDGE, MA 02141 ST JOSEPH'S INDIAN SCHOOL 1301 NORTH MAIN STREET				4,000			
CHAMBERLAIN, SD 57325 CHRISTIAN APPALACHIAN PROJECT				2,000			
322 CRAB ORCHARD ROAD							
LANCASTER, KENTUCKY 40444-9989		Ì		2,000			
DAUGHTERS OF ST PAUL 50 ST PAUL'S AVE				2,000			
JAMAICA PLAIN, MA 02130-3491			:	500			
•				~			
Section 1	1						
was a second							
	İ						
		-					
		,					
•							
· ,							
A				* * * * * * * * * * * * * * * * * * * *			
To have							
-							
• .							
•							
	<u> </u>			8,500			
				1 0,300			

SCHEDULE OF RELATIONSHIP OF ACTIVITIES TO THE ACCOMPLISHMENT OF EXEMPT PURPOSES page 1 990-PF Page 12, Part XVI-B

Open to Pu	blic											
Inspection		For calendar y	ear 2009, or ta	x period be	eginning			, and e	nding			•
Name of Org	janizati	ion								Employ	er Identification	on Number
AMERICO J		FRANCISC	O CHARI	FABLE	TRUST				ŀ	03-0	541650	
⊔ne		Briefly descri	be how the act	vitv reporte	d in column (E) of Part V	/II specifi	cally con	ntributed	to the a	ccomplishmen	t of the
		,		, ,	•	•	•	•				
Number			Organizalic	ins exempt	purposes (ot	ner man by	providin	ig iunas	ioi suci	purpos	es).	
3	THE	PURPOSE	OF THIS	TRUST	IS TO	HOLD	AND 2	APPL	Y IN	COME	AND PRI	NCIPAL
þ	BXCL	USIVELY	FOR CHAI	RITABL	E PURPO	SES V	IA C	ONTR	IBUT:	IONS	TO TWO	NAMED
þ	BENE	FICIARIE	S. THEY	ARE T	HE BOST	ON FO	UNDA:	TION	AND	THE	CAMBRII	GE
k	COMM	UNITY FO	UNDATIO	N. INC	OME FRO	M AT.T.	SOTT	RCES	ATD	S TN	REACHIN	IC THE
1		S OF THE										
1	JULL	D OI IME	ORGANI	BALLON	•							
- 1												
B												