

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



Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545-0052

For stellard year 2006, of tax year beginning			t of the Treasury venue Service	Note The foundation may	Treated as a Priva			rting requirements	2009
Annex to a town of foundation Annex and foundation Annex and town of foundation Annex							 -		
See Specific Format Confidence Confi	G (heck	all that apply			· ·	harity	 : :::	
Otherwise ABRAHAM KAPLAN CHARTTABLE FOUNDATION print			ino	oundation				A Employer identification	number
of type C/O DONALD KAPLAN P.O. BOX 603 (781) 639-1910 City of town, state, and 2/F code Instructions City of town, state, and state City of town, state,			200211	AM KAPLAN CHARIT	TABLE FOUNDA	rion		04-6067737	
See Specific City or (town, state) and 2/19 code Contributions MARBLEHEAD MA		•		,	•		Room/suite		910
Contributions MARBLEHEAD, MA 01945			cific City of the	up state and ZID ands				<u> </u>	
H Check type of organization	Inst	ructio	ons. MARBL	EHEAD, MA 01945	5			D 1. Foreign organizations	, check here
Section 497(a)(1) nonexampt charitable trust				ation X Section 501(c)(3) e	xempt private foundation			Foreign organizations me check here and attach co	eting the 85% test, mputation
Fart market value of all assets at end of year J Accounting method Commercial (Col. Col. No. 16) St. Col. (Col. No. 16] Se	ction 4947(a)(1) nonexempt charitable trust				F. If private foundation sta	tus was terminated
Part Analytic to Revenue and Expenses Che total of among the expense	l Fa	ıır ma	irket value of all	assets at end of year J Account	ting method 🔀 Cash	Accr	ual	under section 507(b)(1)	(A), check here
Part Analysis of Revenue and Expenses (a) Revenue and expenses per books (b) Ret investment (c) Adjusted net record record records and the analysis of colors (b) Ret investment (c) Adjusted net record records and records (c) Adjusted net rec	(fi	rom l	Part II, col (c),				<u></u>	F If the foundation is in a	60-month termination
Contributions, grifts, grants, etc., received N/A					umn (d) must be on casi	h basis)		under section 507(b)(1)	(B), check here
2 Chook ■ A the foundation of an equired to stand Sch 8 3 microschied and interest from securities 4 Dischards and interest from securities 5a Gross rents 5a Gross rents 5a Gross rents 6a (3.51.) 5a Notice and or floats)	Pa	ert i	(The total of amenecessarily equ	evenue and Expenses ounts in columns (b), (c), and (d) may not al the amounts in column (a))				income	for chantable purposes
		1	Contributions,	gifts, grants, etc., received			***************************************	N/A	
13		2	Check ► X	if the foundation is not required to attach Sch. B.	,				
134,715. 134,715. STATEMENT 3		3	Interest on saving cash investments	gs and temporary s					
Description STATEMENT A		4	Dividends and	interest from securities	· · · · · · · · · · · · · · · · · · ·				
Sample S		5a	Gross rents	46 051	134,/15	. 13	4,715.		<u></u>
Day		1		· · · ·		 			STATEMENT 4
Net short-term capital gain Section Sect	ē	6a			0.3	•	~~~~~		
Net short-term capital gain Section Sect	Ē	b	assets on line 6a				63	·	
9 Income modifications RECEIVED 10a dross takes less returns 11 Other income 12 Total. Add lines 1 through 70 Lut 13 Compensation of officers, or but an income (if negative, enter -0-) 14 Other employee states and wages 15 Pension plans, employee benefits 16a Legal fees 17 Interest 18 Taxes 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 25 Contributions, grifts, grants pard 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 3 Excess of revenue over expenses and disbursements N/A	æ						03.		
10		8							
10		10-	Gross sales less	returns RECEIVED					
C Gross profit or 0681 AUG 0 2 2010					181				
11 Other income 12 Total. Add lines I through 11 150,734 150,734 150,734 13 Compensation of picers, declaration 12,000 8,000 4,000 4,000 14,000 15 Pension plans, employee salaries and wages 15 Pension plans, employee benefits 16 Legal fees STMT 5 17,381 17,381 0 0 0 0 0 0 0 0 0				AUG 0 2 7010	II + 1		······		
12 Total Add lines through T		1	•	1011	<u>E</u>				
13 Compensation of officers, described includes and continuous		1		1 - 1	150,734	. 15	0,734.		
14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees STMT 5 17,381 17,381			Compensation of	officers, organization, etc.			8,000.		4,000.
16a Legal fees STMT 5 17,381. 17,381. 0. b Accounting fees STMT 6 4,200. 4,200. 0. c Other professional fees 17 Interest 18 Taxes STMT 7 36,238. 36,168. 70. 17 18 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 8 31,898. 31,898. 0. 2 2 2 2 3 3 3 3 3 3		14							
22 Printing and publications 23 Other expenses STMT 8 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) N/A		15	Pension plans	, employee benefits					
22 Printing and publications 23 Other expenses STMT 8 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) N/A	ses	16a	Legal fees						
22 Printing and publications 23 Other expenses STMT 8 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) N/A	ben	b	Accounting fee	es STMT 6	4,200	•	<u>4,200.</u>		0.
22 Printing and publications 23 Other expenses STMT 8 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) N/A	Ä	C	Other professi	onal fees					
22 Printing and publications 23 Other expenses STMT 8 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) N/A	i,	17	Interest		26.020	<u> </u>	<u> </u>		
22 Printing and publications 23 Other expenses STMT 8 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) N/A	tra	1							/0.
22 Printing and publications 23 Other expenses STMT 8 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) N/A	inis	1	•	nd depletion	1,723	•	1,/23.		
22 Printing and publications 23 Other expenses STMT 8 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) N/A	투	1							
23 Other expenses STMT 8 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 68, 200. 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) N/A	. A				-				
24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 28 Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-)	ä				31 898	3	1 898		0
25 Contributions, girls, grains paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) N/A	Ę.	23	•		31,000	•	1,000.		
25 Contributions, girls, grains paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) N/A	era :	24	•	-	103.440	. 9	9.370.		4.070.
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A	ှိဝီ	25	•						68,200.
Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A	3				33,230				
27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A	Ś	"	-		171.640	. 9	9,370.		72,270.
a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A	_	27					<u> </u>		
b Net Investment Income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A		1			<20,906	.>			
C Adjusted net income (if negative, enter -0-)		1		•		5	1,364.		, , , , , , , , , , , , , , , , , , ,
		C						N/A	

В	· · · · · · ·	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of y	year
<u></u>	arı	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	137,701.	148,463.	148,463.
	3	Accounts receivable			
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
	ŀ	Less allowance for doubtful accounts	[
S	8	Inventories for sale or use			
Assets	l	Prepaid expenses and deferred charges			
As	i i	Investments - U S and state government obligations			
	ŀ	Investments - corporate stock STMT 9	878,552.	689,343.	663,619.
		Investments - corporate bonds		,	
	11	Investments - land buildings, and equipment basis			
	''	Less accumulated depreciation STMT 10 133,271.	58,248.	163,206.	1,300,000.
	12		30,2101	100,2000	2,000,000
		Investments - mortgage loans Investments - other			<u> </u>
	13		7K- MOTO - 1011 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation Other assets (describe STATEMENT 11)	25,000.	73,333.	73,333.
	15	Other assets (describe STATEMENT 11)	23,000.	13,333.	13,333.
			1,099,501.	1 074 245	2 105 415
		Total assets (to be completed by all filers)	1,099,301.	1,074,345.	2,185,415.
	l	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable			
_	22	Other liabilities (describe SECURITY DEPOSIT)	3,000.	3,000.	
_	23	Total liabilities (add lines 17 through 22)	3,000.	3,000.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
Ses	24	Unrestricted			
<u>a</u>	25	Temporarily restricted			
Ва	26	Permanently restricted			
5		Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds	9,021.	9,021.	
Net Assets or Fund Balances	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
Ass	29	Retained earnings, accumulated income, endowment, or other funds	1,087,480.	1,062,324.	
e	30	Total net assets or fund balances	1,096,501.	1,071,345.	
_				•	
	31	Total liabilities and net assets/fund balances	1,099,501.	1,074,345.	
P	art	Analysis of Changes in Net Assets or Fund Ba	iances	_	
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line 30)		
	(mu	st agree with end-of-year figure reported on prior year's return)		1	1,096,501.
2	Ente	r amount from Part I, line 27a		2	<20,906.
3	Othe	r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	1,075,595.
5	Decr	eases not included in line 2 (itemize) > SECTION 4940 FE	DERAL TAXES P	AID 5	<u>4,250.</u>
6	<u>Tota</u>	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu	mn (b), line 30	6	1,071,345.
					Form 990-PF (2009)

Par	t IV Capital Gains	and Lo	sses for Tax on In	vestment	Income							
			nd(s) of property sold (e g or common stock, 200 shs			`P	How ac - Purc - Dona	nase	(c) Date a (mo , d		(d) Date sold (mo , day, yr)	
1a C	CAPITAL GAINS	DIVII	DENDS									
<u>b</u>												
<u>c</u>						-			-			
<u>d</u>												
_е	(e) Gross sales price	(f) [Depreciation allowed (or allowable)	107	st or other basis expense of sale					ain or (loss s (f) minus		
<u></u>	63.										63.	
b												
C												
<u>d</u>										_		
<u>e</u>			naluma (h) and aumad bu	the foundation	00 10/21/60					. 1. 40.3		
	omplete only for assets showin			1		\dashv				ol (h) gain iot less tha		
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (i) col (j), if any					(from col ((h))	
<u>a</u>		-				-					63.	
_b				<u> </u>								
C d						-	•	-				
e												
	pital gain net income or (net ca	nital loce\	If gain, also enter	r in Part I, line	7 7	}	2				63.	
	•				′	7	-					
If g	t short-term capital gain or (los jain, also enter in Part I, line 8, loss), enter -0- in Part I, line 8			10 (6)		}	3			N/A		
	t V Qualification U	nder S	ection 4940(e) for	Reduced	Tax on Net	Inv		ent Inc	ome			
(For o	ptional use by domestic private	foundation	ons subject to the section 4	4940(a) tax on	net investment in	come	;)					
If cont	ion 4940(d)(2) applies, leave th	ne nart his	ink									
												
	he foundation liable for the sec				•	10d?					Yes X No	
	," the foundation does not qual iter the appropriate amount in (25						
	(a)	sacii coldi	(b)	detions belote	making any cite	(C)			T		(d)	
Cale	Base periód years endar year (or tax year beginnii	na in)	Adjusted qualifying dis	tributions	Net value of no	٠,,		use assets			oùtión ratio vided by col. (c))	
	2008	• 1	10	3,525.	-	2	,43	7,298		.042		
	2007		14	2,391.				1,936			.058550	
	2006			2,986.				1,641			.062395	
	2005			0,236.		2	<u>, 09</u>	8,651	•		.057292	
	2004		11	1,904.	<u> </u>	T	,99	1,216	•		.056199	
	tal of line 1, column (d)								2		.276911	
	erage distribution ratio for the			on line 2 by 5,	or by the number	of ye	ars				055300	
the	e foundation has been in exister	nce if less	than 5 years						3		.055382	
4 En	ter the net value of noncharitat	le-use ass	sets for 2009 from Part X,	line 5					4		2,177,774.	
5 Mı	ultiply line 4 by line 3								5		120,609.	
6 En	ter 1% of net investment incon	ne (1% of	Part I, line 27b)						6	-	514.	
7 Ad	d lines 5 and 6								7		121,123.	
8 En	ter qualifying distributions fron	n Part XII,	line 4						8		72,270.	
	ine 8 is equal to or greater than	line 7, ch	eck the box in Part VI, line	1b, and comp	lete that part usin	g a 1	% tax ı	rate				

Forn	990-PF (2009) ABRAHAM KAPLAN CHARITABLE FOUNDATION 04-6067			Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i	nstru	ctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 📖 and enter 1%		1,0	27.
	of Part I, line 27b			
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		1 0	0.
3	Add lines 1 and 2		1,0	27.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		1,0	27.
6	Credits/Payments			
	2009 estimated tax payments and 2008 overpayment credited to 2009 <u>6a</u> <u>2,993.</u>			
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868) 6c 1,500.			
	Backup withholding erroneously withheld			00
	Total credits and payments Add lines 6a through 6d		4,4	<u>93.</u>
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		2 4	-
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		3,4	00.
	Enter the amount of line 10 to be Credited to 2010 estimated tax > 3, 466 . Refunded > 11			0.
	art VII-A Statements Regarding Activities		Voc	NIa
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	4-	Yes	X
	any political campaign?	1a		X
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
_	distributed by the foundation in connection with the activities	1.		х
	: Did the foundation file Form 1120-POL for this year? I Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	10		
u	(1) On the foundation > \$ 0 • (2) On foundation managers. > \$ 0 •			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
6	managers > \$ 0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
-	If "Yes," attach a detailed description of the activities	-		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	of "Yes," has it filed a tax return on Form 990-T for this year?	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in the governing instrument?	6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year?	7	X	
	If "Yes," complete Part II, col. (c), and Part XV.			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	MA			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
	of each state as required by General Instruction G? If "No," attach explanation	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		<u>X</u>
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	10		X

May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2009)

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form **990-PF** (2009)

X

Х

3b

4a

4h

N/A

Form 990-PF (2009) ABRAHAM KAPLAN CHARITAB			04-606//	3/	Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	lequired (contin	ued)		
5a During the year did the foundation pay or incur any amount to					
(1) Carry on propaganda, or otherwise attempt to influence legislation (sect			es X No		
(2) Influence the outcome of any specific public election (see section 4955)	, or to carry on, directly or indire	ectly,			
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purpos	es?	Y6	es X No		
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?		YE	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literal	ry, or educational purposes, or f	or			
the prevention of cruelty to children or animals?		Y6	es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify t	inder the exceptions described i	n Regulations			
section 53 4945 or in a current notice regarding disaster assistance (see ins		· ·	N/A	5b	
Organizations relying on a current notice regarding disaster assistance check					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption		ned			
expenditure responsibility for the grant?	N	/A 🔲 Ye	es No		
		,			
If "Yes," attach the statement required by Regulations section 53 49					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to appear hopeful contract?	to pay premiums on		es X No		
a personal benefit contract?	- name and boards t tO	16	10 LAN 65	6b	x
b Did the foundation, during the year, pay premiums, directly or indirectly, on	a personal benefit contract?		Į.	On	
If "Yes" to 6b, file Form 8870			□		
7a At any time during the tax year, was the foundation a party to a prohibited ta		Y6	es X No		—
b If yes, did the foundation receive any proceeds or have any net income attrib			N/A	7b	
Part VIII Information About Officers, Directors, True Paid Employees, and Contractors		nagers, Highl	y 		
1 List all officers, directors, trustees, foundation managers and the		1.10	T (=No		
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) acco all	Expense ount, other owances
DONALD M. KAPLAN	TRUSTEE/MANAG	ER			
20 LEHMAN ROAD					
MARBLEHEAD, MA 01945	6.00	12,000.	0.		0.
JUDITH KAPLAN	TRUSTEE	·			
20 LEHMAN ROAD					
MARBLEHEAD, MA 01945	0.00	0.	0.		0.
JONATHAN KAPLAN	TRUSTEE				
479 29TH ST		:			
SAN FRANCISCO , CA 94131	0.00	0.	0.		0.
SAN FRANCISCO, CA 94131	0.00			 	
2 Compensation of five highest-paid employees (other than those i	neluded on line 1). If some	enter "NONE "	L		
2 Compensation of tive nignest-paid employees (other than those i	(b) Title, and average	THE HOIL.	(d) Contributions to	(e)	Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	acco	Expense ount, other owances
NONE			1		
<u> </u>			1		
					_
	7		1		
		1			
	7				
Total number of other employees paid over \$50,000			·		0
Total named of other employees paid over 400,000					

Form **990-PF** (2009)

Part VIII Information About Officers, Directors, Trustees, Foundate Paid Employees, and Contractors (continued)	tion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	<u> </u>	
	-	
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers produced.	cal information such as the uced, etc	Expenses
1 GRANTS TO CHARITABLE ORGANIZATIONS THAT QUAL	IFY UNDER	
SECTION 501(C)(3)	···	60 200
		68,200.
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on I	ines 1 and 2	Amount
1 <u>N/A</u>		
2		<u> </u>
All other program-related investments See instructions		
3		
		0.
Total Add lines 1 through 3	▶	0.

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndation	s, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а	Average monthly fair market value of securities	1a	349,189.
	Average of monthly cash balances	1b	511,749.
	Fair market value of all other assets	10	1,350,000.
	Total (add lines 1a, b, and c)	1d	2,210,938.
	Reduction claimed for blockage or other factors reported on lines 1a and		
_	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	2,210,938.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	33,164.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	2,177,774.
6	Minimum investment return. Enter 5% of line 5	6	108,889.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a foreign organizations check here and do not complete this part)	nd certai	
1	Minimum investment return from Part X, line 6	1	108,889.
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	1,027.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,027. 107,862.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	107,862.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	107,862.
P	art XII Qualifying Distributions (see instructions)	11	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		72 270
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	72,270.
þ	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
þ	Cash distribution test (attach the required schedule)	3b	70.070
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	72,270.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	72,270.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years	qualifies	for the section

Form **990-PF** (2009)

Page 9 Part XIII Undistributed Income (see instructions) (a) (b) (c) (d) Corpus Years prior to 2008 2008 2009 1 Distributable amount for 2009 from Part XI. 107,862. line 7 2 Undistributed income, if any, as of the end of 2009 0. a Enter amount for 2008 only **b** Total for prior years 0 . 3 Excess distributions carryover, if any, to 2009 15,007. a From 2004 18,779. **b** From 2005 31,730. 24,452. c From 2006 d From 2007 e From 2008 89,968 f Total of lines 3a through e 4 Qualifying distributions for 2009 from 72,270. Part XII, line 4 > \$ 0. a Applied to 2008, but not more than line 2a **b** Applied to undistributed income of prior 0. years (Election required - see instructions) c Treated as distributions out of corpus 0. (Election required - see instructions) 72,270. d Applied to 2009 distributable amount 0. e Remaining amount distributed out of corpus 35,592. 35,592. Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))

	deficiency has been issued, or on which						
	the section 4942(a) tax has been previously assessed						
d	Subtract line 6c from line 6b Taxable						
	amount - see instructions						
e	Undistributed income for 2008 Subtract line						
	4a from line 2a Taxable amount - see instr						
f	Undistributed income for 2009 Subtract						
	lines 4d and 5 from line 1. This amount must						
	be distributed in 2010						
	Amounts treated as distributions out of						
	corpus to satisfy requirements imposed by						

6 Enter the net total of each column as

c Enter the amount of prior years'

2 Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract

indicated below:

line 4b from line 2b

U	Excess distributions carryover from 2004
	not applied on line 5 or line 7
9	Excess distributions carryover to 2010.
	Subtract lines 7 and 8 from line 6a
10	Analysis of line 9
	l l

section 170(b)(1)(F) or 4942(g)(3) Expose distributions correquer from 2004

000000000000000000000000000000000000000	
Analysis of line 9	
a Excess from 2005	
b Excess from 2006	29,924.
c Excess from 2007	24,452.
d Excess from 2008	
e Excess from 2009	

0.

0.

54,376.

0 0.

0. 0. 54,376.

0.

7

	KAPLAN CHA			04-606	67737 Page 10
Part XIV Private Operating I			-A, question 9)	N/A	
1 a If the foundation has received a ruling					
foundation, and the ruling is effective for			· · ·		
b Check box to indicate whether the foun		ig foundation described		4942(j)(3) or 494	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(h) 0000	Prior 3 years	(4) 2006	(a) Total
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for					
each year listed			ļ 		
b 85% of line 2a				ļ	
c Qualifying distributions from Part XII,					
line 4 for each year listed				 	
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities			ļ		
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon a "Assets" alternative test - enter (1) Value of all assets					
(2) Value of assets qualifying under section 4942(1)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	ormation (Comple	te this part only	if the foundation	had \$5,000 or mo	re in assets
at any time during	the year-see the i	nstructions.)			
1 Information Regarding Foundati	on Managers:				
a List any managers of the foundation w year (but only if they have contributed			ributions received by the	foundation before the close	e of any tax
NONE					<u> </u>
b List any managers of the foundation we other entity) of which the foundation has			(or an equally large porti	on of the ownership of a pa	rtnership or
NONE					
2 Information Regarding Contribu			-	not accept unsolicited reque	ests for funds If
the foundation makes gifts, grants, etc	(see instructions) to indiv	riduals or organizations u	inder other conditions, c	omplete items 2a, b, c, and	d
a The name, address, and telephone nur	nber of the person to who	n applications should be	addressed		
SEE STATEMENT 12					
b The form in which applications should	be submitted and informa	tion and materials they s	nould include		
c Any submission deadlines				, ,	
d Any rootrictions or limitations on access	le euch ac hu accomplia	al arone, chardable fields	kinds of institutions of	other factors	
d Any restrictions or limitations on award	is, sucii as by geographic	ni aidas, chafitable fields,	viiing of illefitations, of	ottier lactors	

Page 11

3 Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount			
	or substantial contributor	recipient					
a Paid during the year SEE SCHEDULE ATTACHED	N/A	PUBLIC CHARITY	PUBLICLY-SUPPORTED NON-PROFIT CHARITABLE ORGANIZATIO	68,200.			
Total		<u></u>	<u>▶ 3a</u>	68,200.			
NONE							
Total			▶ 3b	0.			

Part XVI-A Analysis of Income-Produ			· , · · · · ·		
Enter gross amounts unless otherwise indicated	(a)	(b)	(C) Exclu-	section 512, 513, or 514 (d)	(e) Related or exempt
1 Program service revenue	Business code	Amount	sion	Amount	function income
a					
b	_	<u> </u>			
c	-				_
d					
8					
<u> </u>					
g Fees and contracts from government agencies					·
2 Membership dues and assessments					<u> </u>
3 Interest on savings and temporary cash	1		14	2 523	
Investments 4 Dividends and interest from securities	+	<u> </u>	14	2,523.	
5 Net rental income or (loss) from real estate		711 31777311111111111111111111111111111		13,433.	
a Debt-financed property					
b Not debt-financed property			16	46,351.	
6 Net rental income or (loss) from personal			 - - 	10,0010	
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			14	63.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a	_				<u> </u>
b	_				
c	_				
d	_				
e			, 	62 270	
12 Subtotal Add columns (b), (d), and (e)).	62,370.	0
13 Total Add line 12, columns (b), (d), and (e)				13	62,370
(See worksheet in line 13 instructions to verify calculations)					
Part XVI-B Relationship of Activities	to the Accom	plishment of	Exempt Pu	rposes	
Line No Explain below how each activity for which inc	come is concited in a	olumn (a) of Part YV	I-A contributed	importantly to the accomp	lichment of
the foundation's exempt purposes (other tha				importantly to the accomp	iisiiineiit oi
•		, , , , , , , , , , , , , , , , , , , ,			
				-	
			-	·	
					
					 .
				 	
					
					

Page 13

	Exempt Organizations					
1	Did the organization directly or indirectly engage in any of the following	ig with any other organization	on described in section 501(c) of		Yes	No
	the Code (other than section 501(c)(3) organizations) or in section 52	27, relating to political organ	izations?			
а	Transfers from the reporting foundation to a noncharitable exempt or	ganization of				
	(1) Cash			1a(1)		X
	(2) Other assets			1a(2)		X
b	Other transactions					
	(1) Sales of assets to a noncharitable exempt organization			1b(1)		X
	(2) Purchases of assets from a noncharitable exempt organization			1b(2)		X
	(3) Rental of facilities, equipment, or other assets			1b(3)		X
	(4) Reimbursement arrangements			1b(4)		X
	(5) Loans or loan guarantees			1b(5)		X
	(6) Performance of services or membership or fundraising solicitation	ons		1b(6)		X
C	Sharing of facilities, equipment, mailing lists, other assets, or paid em	ployees		10	<u> </u>	<u> </u>
d	I If the answer to any of the above is "Yes," complete the following sche				sets,	
	or services given by the reporting foundation. If the foundation receive	ed less than fair market valu	ie in any transaction or sharing arrangement, s	how in		
	column (d) the value of the goods, other assets, or services received		·			
(a)	Line no (b) Amount involved (c) Name of noncharitable	e exempt organization	(d) Description of transfers, transactions, and	shanng ar	rangeme	ents
	N/A					
		·				
						
						
	Le the foundation divertible and discretible officiated with the registed to one	or more toy everet erecou	rations described			
2a	Is the foundation directly or indirectly affiliated with, or related to, one		zations described	Yes	ГХ	☐ No
_	in section 501(c) of the Code (other than section 501(c)(3)) or in sect	11011 327	_	162		-) INO
	o If "Yes," complete the following schedule (a) Name of organization	(b) Type of organization	(c) Description of relations			
	N/A	(2) type or organization	(0)			
	 					
				-		
	Under penalties of penury, I declare that I have examined this return, including according	ompanying schedules and statem	nents, and to the best of my knowledge and belief, it is	true, corre	ect,	
	and complete Declaration of preparer (other than taxpayer or fiduciary) is based on	all information of which preparer	r has any knowledge			
	K child the King	1/7/21/10	■ TRUSTEE/MANAGER			
9	Signature of officer or trustee	D ate	Title			
Ĭ	Preparer's March Sorboen		200	er's identif		
Sign Here	JAMES BODOIN, CPA		7//5// self- employed ► □ fc	50043	527	6
-	Firm's name (or yours COLES & BODOIN, LLP)	EIN ►			
	it self-employed). >75 SECOND AVENUE					
	address, and ZIP code NEEDHAM, MA 02494		Phone no 781-	<u> 455-</u>	140	0
			Fo	orm 990	PF	(2009)

ABRAHAM KAPLAN CHARITABLE FOUNDATION

FORM 990-PF 04-6067737

Year ended December 31, 2009

PART XV - SUPPLEMENTARY INFORMATION LINE 3(a) - CONTRIBUTIONS PAID

Beth Israel Hospital	250
Boston University	5,000
Brandeis University	5,000
Brown University	2,500
Buckingham Browne & Nichols School	250
Cambridge Health Alliance	1,000
Chelsea Jewish Nursing Home	500
Chewonki Foundation	100
Community Boating, Inc.	100
Congregation Shırat Hayam	1,750
Hebrew Rehabilitation Center	100
Jewish Community Center	1,000
Jewish Federation of the North Shore	1,000
Museum of Science	41,000
Nature Conservancy	100
Parkinson's Disease Research	100
Temple Beth Sholom	100
Tower School	100
University of Pennsylvania	2,000
WBUR	250
WGBH Educational Foundation	5,000
Woods Hole Oceaniographic Institute	1,000
	\$ 68,200

				
FORM 990-PF INTEREST ON SAVINGS	AND TEMPORARY C	ASH INVESTMENTS	STATEMENT	1
SOURCE			AMOUNT	
BANK OF AMERICA			2,5	23.
TOTAL TO FORM 990-PF, PART I, LI	NE 3, COLUMN A		2,5	23.
FORM 990-PF DIVIDENDS A	ND INTEREST FROM	SECURITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A AMOUNT)
FIDELITY MMKT FUNDS FIDELITY SPARTAN 500 LPL MUTUAL FUNDS	2,177. 1,422. 9,897.	0. 0. 63.	2,1 1,4 9,8	22.
TOTAL TO FM 990-PF, PART I, LN 4	13,496.	63.	13,4	33.
FORM 990-PF R	ENTAL INCOME		STATEMENT	3
KIND AND LOCATION OF PROPERTY		ACTIVITY NUMBER	GROSS RENTAL INC	OME
COMMERCIAL REAL ESTATE, JAMAICA	PLAIN, MA	1	134,715	
TOTAL TO FORM 990-PF, PART I, LI	NE 5A		134,7	15.
FORM 990-PF REI	NTAL EXPENSES		STATEMENT	4
DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL	
DEPRECIATION AMORTIZATION LEGAL & ACCOUNTING FEES REAL ESTATE TAXES WATER & SEWER REPAIRS AND MAINTENANCE INSURANCE UTILITIES		1,723. 1,667. 21,581. 36,168. 4,121. 7,260. 3,983. 11,861.		

ABRAHAM KAPLAN CHARITABLE E	FOUNDATION			04-6067737
- 8	SUBTOTAL -	1		88,364.
TOTAL RENTAL EXPENSES				88,364.
NET RENTAL INCOME TO FORM 990)-PF, PART I	, LINE 5B	-	46,351.
FORM 990-PF	LEGAL	FEES	;	STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
BASS, DOHERTY & FINKS - LEGAL	17,381.	17,381.		0.
TO FM 990-PF, PG 1, LN 16A	17,381.	17,381.		0.
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
COLES & BODOIN, CPA'S - ACCOUNTING & TAX PREPARATION SERVICES	4,200.	4,200.		0.
TO FORM 990-PF, PG 1, LN 16B	4,200.	4,200.		0.
FORM 990-PF	ORM 990-PF TAXES			STATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
REAL ESTATE TAXES - CITY OF BOSTON MA FILING FEE	36,168. 70.	36,168.		0. 70.
-				

TO FORM 990-PF, PG 1, LN 18 36,238. 36,168.

70.

FORM 990-PF	OTHER EXPENSES			STATEMENT
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		
INVESTMENT MANAGEMENT FEES WATER & SEWER REPAIRS AND MAINTENANCE INSURANCE OFFICE EXPENSES UTILITIES AMORTIZATION	2,712. 4,121. 7,260. 3,983. 294. 11,861. 1,667.	4,1 7,2 3,9 2 11,8	12. 21. 60. 83. 94. 61.	000000000000000000000000000000000000000
TO FORM 990-PF, PG 1, LN 23	31,898.	31,8	98.	
FORM 990-PF	CORPORAT	E STOCK		STATEMENT
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE
MONEY MARKET FUNDS MUTUAL FUNDS		_	213,889. 475,454.	213,889 449,730
TOTAL TO FORM 990-PF, PART II	, LINE 10B	=	689,343.	663,619
FORM 990-PF DEPRECIATION C	F ASSETS HE	LD FOR INV	ESTMENT	STATEMENT 1
DESCRIPTION		ST OR R BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
BUILDING ROOF ROOF HEATING & A/C UNITS		95,407. 22,770. 13,040. 21,155.	95,407. 22,770. 5,053. 8,199.	7,987
HEATING & A/C UNITS (FINAL PMT) LAND BUILDING IMPROVEMENTS BROKERS FEE GOODWILL STORE		2,811. 34,613. 106,681. 50,000.	1,044. 0. 798. 1,667.	1,767 34,613 105,883
TOTAL TO FM 990-PF, PART II,	LN 11	346,477.	134,938.	

FORM 990-PF	OTHER ASSETS	OTHER ASSETS				
DESCRIPTION	BEGINNING OF	END OF YEAR	FAIR MARKET			
	YR BOOK VALUE	BOOK VALUE	VALUE			
EXCHANGE RECEIVABLE	25,000.	25,000.	25,000.			
BROKERS FEE, NET		48,333.	48,333.			
TO FORM 990-PF, PART II, LINE 15	25,000.	73,333.	73,333.			

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 12

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

DONALD M. KAPLAN, TRUSTEE, P.O. BOX 603 MARBLEHEAD, MA 01945

TELEPHONE NUMBER

781-639-1910

FORM AND CONTENT OF APPLICATIONS

WRITTEN APPLICATION SETTING FORTH THE FUNCTION OF THE 501(C)(3) ORGANIZATION AND THE PURPOSE FOR WHICH THE GRANT WOULD BE USED.

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

NONE

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Depreciation and Amortization RENT (Including Information on Listed Property)

➤ See separate instructions.

➤ Attach to your tax return.

OMB No 1545-0172

Business or activity to which this form relates

COMMERCIAL REAL ESTATE,

Identifying number

1

ABRAHAM KAPLAN CHARIT.	ABLE FOUN	DATION	JAM	AICA PI	JAIN, MA		04-6067737
Part Election To Expense Certain Prope	rty Under Section 17	9 Note: If you	u have any lis	ted property,	complete Part	V before yo	ou complete Part I
1 Maximum amount. See the instructions	s for a higher limit f	or certain bu	sinesses			1	250,000.
2 Total cost of section 179 property place						2	
3 Threshold cost of section 179 property						3	800,000.
4 Reduction in limitation. Subtract line 3	from line 2. If zero	or less, ente	r -0-			4	
5 Dollar limitation for tax year Subtract line 4 from line	e 1 If zero or less, enter	-0- If marned filir	ng separately, see	instructions		5	
6 (a) Description of pa	roperty		(b) Cost (busin	ess use only)	(c) Elected	l cost	
7 Listed property. Enter the amount from	n line 29			7		, -	
8 Total elected cost of section 179 proper	erty. Add amounts	ın column (c), lines 6 and	7		8	
9 Tentative deduction Enter the smaller	r of line 5 or line 8					9	
10 Carryover of disallowed deduction from	n line 13 of your 20	008 Form 456	32			10	···
11 Business income limitation. Enter the s	maller of business	income (not	less than zer	o) or line 5		11	
12 Section 179 expense deduction Add I	ines 9 and 10, but	do not enter	more than lin	ne 11		12	
13 Carryover of disallowed deduction to 2				▶ 13			
Note: Do not use Part II or Part III below fo	r listed property. Ir	nstead, use F	Part V			 	
Part II Special Depreciation Allows		-					
14 Special depreciation allowance for qua	ılıfıed property (oth	er than listed	d property) pla	aced in servic	e during		
the tax year						14	· · · · · · · · · · · · · · · · · · ·
15 Property subject to section 168(f)(1) el	ection					15	
16 Other depreciation (including ACRS)						16	925.
Part III MACRS Depreciation (Do no	ot include listed pre		·	<u> </u>			
			ction A			1 1	
17 MACRS deductions for assets placed	in service in tax ye	ars beginning	g before 2009	9	. .	_ <u> 17 </u>	
18 If you are electing to group any assets placed in ser				,		<u> </u>	
Section B - Assets			depreciation		nerai Deprecia	ition Syste	<u> </u>
(a) Classification of property	(b) Month and year placed in service	(business/in	vestment use instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property	_		<u> </u>				
b 5-year property	_						
c 7-year property	_						
d 10-year property	_						
e 15-year property	_						
f 20-year property	_	<u> </u>					
g 25-year property				25 yrs.		S/L_	
h Residential rental property	/			27 5 yrs.	MM	S/L	
n nesidential ferital property	//			27.5 yrs.	MM	S/L	
i Nonresidential real property	09/09	10	06,681.	39 yrs	MM	S/L	798.
					MM	S/L	
Section C - Assets I	Placed in Service	During 2009	Tax Year Us	sing the Alter	mative Deprec	iation Sys	tem
20a Class life	_					S/L	
b 12-year				12 yrs.	_	S/L	
c 40-year				40 yrs	MM	S/L	
Part IV Summary (See instructions.)							
21 Listed property Enter amount from line						21	
22 Total. Add amounts from line 12, lines							
Enter here and on the appropriate lines				tions · <u>see ins</u>	tr	22	1,723.
23 For assets shown above and placed in		current year	r, enter the				
portion of the basis attributable to sec	tion 263A costs			23		ļ	

Form 4562 (2009) ABRAHAM KAPLAN CHARITABLE FOUNDATION 04-6067737 Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.) Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, completeonly 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable Section A - Depreciation and Other Information (Caution: See the Instructions for limits for passenger automobiles) 24a Do you have evidence to support the business/investment use claimed? No 24b If "Yes," is the evidence written? Yes Yes . No (b) (c) (i) (e) (d) Date Elected Business/ Depreciation Basis for depreciation Recovery Method/ Type of property Cost or placed in investment (business/investment section 179 (list vehicles first) other basis period Convention deduction use only) use percentage service cost 25 Special depreciation allowance for qualified listed property placed in service during the tax year and 25 used more than 50% in a qualified business use 26 Property used more than 50% in a qualified business use. % % % 27 Property used 50% or less in a qualified business use: S/L· % S/L· % % S/L· 28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 28 29 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles. (c) (d) (e) (f) (a) (b)

		, ,	-,	,	•	, ·	•	ı ,	-,	, ,	•	, ·	•
30	Total business/investment miles driven during the	V <u>eh</u>	ıcie	Veh	ıcle	Veh	ıcle	Veh	ıcle	Veh	icle	Veh	iicle
	year (do not include commuting miles)	<u> </u>		ļ									
31	Total commuting miles driven during the year												
32	Total other personal (noncommuting) miles							ļ					
	driven												
33	Total miles driven during the year												
	Add lines 30 through 32					<u> </u>							
34	Was the vehicle available for personal use	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	during off-duty hours?											<u> </u>	
35	Was the vehicle used primarily by a more] [1					
	than 5% owner or related person?							<u></u>					
36	Is another vehicle available for personal	-				١.		,					
_	use?											<u> </u>	

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related nersons

211	Title of Total of Policier		
37	Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your	Yes	No
	employees ⁹		
38	Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your		
	employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39	Do you treat all use of vehicles by employees as personal use?		
40	Do you provide more than five vehicles to your employees, obtain information from your employees about		
	the use of the vehicles, and retain the information received?		
41	Do you meet the requirements concerning qualified automobile demonstration use?		
	Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles		<u> </u>
0	art VI Amortization		

Part VI Amortization						
(a) Description of costs	(b) Cate amortization begins	(C) Amortizable amount	(d) Code section	(e) Amortization period or period		(f) Amortization for this year
42 Amortization of costs that begins during	your 2009 tax year:					
BROKERS FEE GOODWILL						
STORE	090109	50,000.		1201	M	1,667.
43 Amortization of costs that began before	our 2009 tax year				43	
44 Total. Add amounts in column (f). See the	44	1,667.				

Form 8868

(Rev. April 2009

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

The dispersion of the dispersi	
If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	•
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously fil	led Form 8868.
Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).	
A corporation required to file Form 990⋅T and requesting an automatic 6⋅month extension ⋅ check this box and com Part I only	nplete
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an o file income tax returns	n extension of time
Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension toted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electroning not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or colorou must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic fill www.irs.gov/efile and click on e-file for Charities & Nonprofits.	ically if (1) you want the additional nsolidated Form 990-T. Instead,
Type or Name of Exempt Organization	Employer identification number
orint ABRAHAM KAPLAN CHARITABLE FOUNDATION	04-6067737
Number, street, and room or suite no. If a P.O. box, see instructions. C/O DONALD KAPLAN P.O. BOX 603	1
City, town or post office, state, and ZIP code. For a foreign address, see instructions. MARBLEHEAD, MA 01945	
Check type of return to be filed (file a separate application for each return):	
Form 990 Form 990-T (corporation) Form 47 Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 52 Form 990-EZ Form 990-T (trust other than above) Form 60 X Form 990-PF Form 1041-A Form 88	227 069
DONALD M. KAPLAN The books are in the care of 20 LEHMAN ROAD — MARBLEHEAD, MA 01945	
Telephone No. ► (781) 639–1910 FAX No. ► If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this box Lift it is for part of the group, check this box ► and attach a list with the names and EINs of all	
1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt AUGUST 15, 2010 Is for the organization's return for: X calendar year 2009 or	
tax year beginning, and ending	<u> </u>
2 If this tax year is for less than 12 months, check reason: Initial return Final return	Change in accounting period
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a \$ 4,493.
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	зь \$ 2,993.
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,	50 \$ 27753.
deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	3c \$ 1,500.
OCC INSTRUCTIONS	17500.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.