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SCANNED JUL 28 2010

Return of Private Foundation

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

OMB No 1545-0052

			I reated as a Privat be able to use a copy of this		orting requirements.	2009
For	caler	ndar year 2009, or tax year beginning		, and ending		· !·
G (heck	all that apply: Initial return Amended return	Initial return of a fo	ormer public charity	Final return Name change	
	the abel	.	_		A Employer identification	number
	ierwi print			Room/suite	04-6628772	
0	r typ: Spe	62 WALNUT STREET		Noonvalie	B Telephone number 781-237-333	
	ructio	City or town, state, and ZIP code			C if exemption application is per	
ш с	'hool	type of organization: X Section 501(c)(3) ex	amat ariusta faundation		D 1. Foreign organizations, 2. Foreign organizations meet check here and attach com-	check here
<u>"</u>	_	· · · · · · · · · · · · · · · · · · ·	Other taxable private foundation	ation		
I Fa		arket value of all assets at end of year J Accounti	·	Accrual	If private foundation statu under section 507(b)(1)(/	
		- I	ther (specify)		F If the foundation is in a 60	••
, 'i			mn (d) must be on cash l	basis.)	under section 507(b)(1)(l	
Pa	ırt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	36,000.		N/A	
	2	Check if the foundation is not required to attach Sch. B. Interest on savings and temporary				
	3	cash investments				· · · · · · · · · · · · · · · · · · ·
	4	Dividends and interest from securities				
		Gross rents Net rental income or (loss)			-	
			18		 	
Jue	ľъ́	Net gain or (loss) from sale of assets not or the figure of assets on the figure of th	101			······································
Revenue	7	Capital gain net income (from Part IV, line 2)	2010 /0/	0		
ď	8	Net short-term capital gain				· · · · · · · · · · · · · · · · · · ·
	9	January modernium [5]	11111			
	10a	Gross sales less returns and allowances	10,			
	b	Less Cost of goods sold				
	l	Gross profit or (loss)				
	111	Other income	36,000.	0		
_	12 13	Total. Add lines 1 through 11 Compensation of officers, directors, trustees, etc	30,000.	0	<u> </u>	0.
	14	Other employee salaries and wages	0.		•	
		Pension plans, employee benefits			**********	
ses	ı	Legal fees	·····			
en en	b	Accounting fees			iii ii	
ŭ	C	Other professional fees				
tive	ı			A P		
Operating and Administrative Expens	18	Taxes STMT 1	35.	35	•	0.
į	19	Depreciation and depletion				
β	20 21	Occupancy _ Travel, conferences, and meetings	<u></u>			
þ	22	Printing and publications				
<u>в</u>	23	Other expenses	<u></u>		 	
atin	24	Total operating and administrative			1	
De :	l	expenses. Add lines 13 through 23	35.	35		0.
0	25	Contributions, gifts, grants paid	33,440.			33,440.
	26	Total expenses and disbursements.				
	<u> </u>	Add lines 24 and 25	33,475.	35	•	33,440.
	27	Subtract line 26 from line 12:	ا م حمد ا			
	Į.	Excess of revenue over expenses and disbursements	2,525.	0	 	
		Net investment income (if negative, enter -0-)		U	N/A	
9235		Adjusted net income (if negative, enter -0-)		<u></u>	IN/A	5 000 DE (0000)

П	art	Balance Sheets Attached schedules and amounts in the description solution should be for and at year amounts only	Beginning of year	End o	
	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	1,544.	4,069.	4,069.
	2	Savings and temporary cash investments			
	3	Accounts receivable ►			
	l	Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶		· · · · · · · · · · · · · · · · · · ·	
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	_	Receivables due from officers, directors, trustees, and other			
	ľ	disqualified persons			
	٦,	Other notes and loans receivable			
	Ι΄	Less; allowance for doubtful accounts	1		
rΛ	۱	Inventories for sale or use			
Assets	_	Prepaid expenses and deferred charges			
As		Investments - U.S. and state government obligations			
	ı	Investments - corporate stock			
	ı	Investments - corporate stock		~	
	ı				
	יין	Investments - land, buildings, and equipment basis	.		
	۱.,	Less accumulated depreciation		· · · · · · · · · · · · · · · · · · ·	
	ı	Investments - mortgage loans			
	1	Investments - other			
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation			
	15	Other assets (describe)			
_	_	Total assets (to be completed by all filers)	1,544.	4,069.	4,069.
	ı	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
흅	21			w	
_	22	Other liabilities (describe)			
				_	
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
S		and complete lines 24 through 26 and lines 30 and 31.			
ž	24	Unrestricted			
Net Assets or Fund Balances	25	Temporarily restricted			
Ä	26	Permanently restricted .	;		
Ĕ		Foundations that do not follow SFAS 117, check here			
F		and complete lines 27 through 31.			
ts	27	Capital stock, trust principal, or current funds	0.	0.	
3Se	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Ž	29	Retained earnings, accumulated income, endowment, or other funds	1,544.	4,069.	
ž	30	Total net assets or fund balances	1,544.	4,069.	
				4 060	
_	31	Total liabilities and net assets/fund balances	1,544.	4,069.	
P	art	III Analysis of Changes in Net Assets or Fund B	lalances		
-	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		st agree with end-of-year figure reported on prior year's return)			1,544.
	•	r amount from Part I, line 27a		1 2	2,525.
		r increases not included in line 2 (itemize)		3	2,323.
		lines 1, 2, and 3			4,069.
		eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, ci	olumn (b), line 30	. 8	4,069.
_					Form 990-PF (2009)

(a) List and di	escribe the ki	ind(s) of property sold (e.g or common stock, 200 sh	., real estate,	. income	P	How ac - Purci - Dona	nase '	c) Date a (mo., da	acquired ay, yr.)	(d) Date sold (mo., day, yr.)
1a										
b N	IONE									<u></u>
C										
d										
e			· · · · · · · · · · · · · · · · · · ·		Щ,					
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		t or other basis xpense of sale					ain or (loss) (f) minus (
a b		w			-				·····	
C							-			* *
đ										
e			<u> </u>							
Complete only for assets sho									ol. (h) gain	
(i) F.M.V. as of 12/31/69		(j) Adjusted basis as of 12/31/69		cess of col. (ı) col. (ı), ıf any			COI. (Losses	ot less than (from col. (h))
8										
b					ļ					
С		 -	ļ		_					
d										
<u>e</u>			L							
2 Capital gain net income or (ne	t capital loss	$ \begin{cases} \text{If gain, also ente} \\ \text{If (loss), enter -0} \end{cases} $			}	2				
3 Net short-term capital gain or If gain, also enter in Part I, line			nd (6):		٦					
If (loss), enter -0- in Part I, line Part V Qualification		section 4940(e) for				3				
Was the foundation liable for the information for the information does not of the foundation liable for the foundation does not of the found	qualify under	section 4940(e). Do not co	mplete this pa	rt.						Yes X No
(a) Base period years Calendar year (or tax year begi	nning ın)	(b) Adjusted qualifying dis	stributions	Net value of no	(c) nchai		use assets	,	Distrib (col. (b) div	oution ratio rided by col. (c))
2008		3	8,190.				0,687.			3.573501
2007			2,950.				0,082.			5.251934
2006			5,575.				9,515.			4.789806
2005			3,385.				9,655.			2.102761
2004		2	5,900.			3	6,083.	ļ.,		.717790
2 Total of line 1, column (d)								2		16.435792
3 Average distribution ratio for t the foundation has been in ex	-		on line 2 by 5,	or by the number	of ye	ars		3		3.287158
4 Enter the net value of nonchar	rtable-use as	sets for 2009 from Part X,	line 5					4		3,026.
5 Multiply line 4 by line 3								5		9,947.
6 Enter 1% of net investment in	come (1% of	Part I, line 27b)					-	6		0.
7 Add lines 5 and 6	-					·		7		9,947.
8 Enter qualifying distributions (irom Part XII	, line 4						8		33,440.
If line 8 is equal to or greater to See the Part VI instructions.			th, and comp	lete that part usin	ıg a 19	% tax r	ate.			

Forn		62877		Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - s	see instr	ructio	ns)
18	Exempt operating foundations described in section 4940(d)(2), check here land 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%			0.
	of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
3	Add lines 1 and 2			0.
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-			0.
6	Credits/Payments;			
8	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 51.			
b	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d			<u>51.</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			51.
_11	Enter the amount of line 10 to be: Credited to 2010 estimated tax ▶ 51. Refunded ▶ 11			0.
Pa	art VII-A Statements Regarding Activities			
18	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		X
	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.			
C	Did the foundation file Form 1120-POL for this year?	1c		X
d	I Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0 .			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers. ► \$0 .		1	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X_
	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		X
48	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	olf "Yes," has it filed a tax return on Form 990-T for this year?	A 4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	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			1
	remain in the governing instrument?	_ 6	X	<u>L</u>
7	Did the foundation have at least \$5,000 in assets at any time during the year?	7	X	<u> </u>
	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)			ľ
	MA		1	
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)	1	1	
	of each state as required by General Instruction G? If "No," attach explanation	86	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		X
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses	10		X

Pa	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the 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			
	August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► JON M. BAKER Telephone no. ► 781-23		331	
	Located at ▶ 62 WALNUT STREET, WELLESLEY, MA ZIP+4 ▶02	481		
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	N,	/A	
Pa	rt 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	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		ł	
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(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			
	for the benefit or use of a disqualified person)?			
	(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		i	
	termination of government service, if terminating within 90 days.)			
ь	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		ŀ	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? N/A	1b	ľ	
	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	1 1		
	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)):			
я	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2009?			
	If 'Yes,' list the years ▶ , , ,			
ь	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
_	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
c	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
Ī	•			
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
-	during the year?			
b	of "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after			
•	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2009.) N/A	36	İ	
A	to Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	\dashv	X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	┝ <u>╶</u>		
_	had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b		Х
		99A	DE /	

All other program-related investments. See instructions.

Total. Add lines 1 through 3 . ▶ 0 •

P	art X Minimum Investment Return (All domestic foundations must co	mplete this part. Foreign four	ndations, se	e instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., p	ourposes:		
а	Average monthly fair market value of securities		1a	0.
	Average of monthly cash balances		1b	3,072.
	Fair market value of all other assets	•	10	··
d	Total (add lines 1a, b, and c)		1d	3,072.
е	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation)	0.		
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	3,072.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see ins	tructions)	4	46.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V,	line 4	5	3,026.
6	Minimum investment return. Enter 5% of line 5	• -	6	151.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) foreign organizations check here and do not complete this part.)	private operating foundations ar	id certain	
1	Minimum investment return from Part X, line 6		1	151.
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.)	:		
	Add lines 2a and 2b		20	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	'	3	151.
4	Recoveries of amounts treated as qualifying distributions		4	0.
5	Add lines 3 and 4	- ,	5	151.
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	151.
P	art XII Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			22 440
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		1a	33,440.
	Program-related investments - total from Part IX-B		1b	0.
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:			
	Suitability test (prior IRS approval required)		3a	
	Cash distribution test (attach the required schedule)		3b	22 440
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part X	KIII, line 4	4	33,440.
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	33,440.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calc 4940(e) reduction of tax in those years.	culating whether the foundation o	qualifies for the	e section

Form **990-PF** (2009)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,				
line 7				151.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004 24,096.				
b From 2005 81,402.				
c From 2006 45,099.				
dFrom 2007 52,446.				
eFrom 2008 37,656.				
f Total of lines 3a through e	240,699.			
4 Qualifying distributions for 2009 from				
Part XII, line 4: ►\$ 33,440.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior		_		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			4
d Applied to 2009 distributable amount	33 636			151.
e Remaining amount distributed out of corpus	33,289.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	273,988.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line	······································			
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract	· · · · · · · · · · · · · · · · · · ·			
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	24,096.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	249,892.			
10 Analysis of line 9:				
a Excess from 2005 81,402.				
b Excess from 2006 45,099.				
c Excess from 2007 52,446.				
d Excess from 2008 37,656.				
e Excess from 2009 33, 289.				

Part XIV Private Operating For	EK FAMILY 1		A guestion Q	N/A	28//2 Page 10
_ 	<u> </u>		-A, question 9)	N/A	
1 a If the foundation has received a ruling of foundation, and the ruling is effective for					
•	•	•	. • • —	140.42(1)(2) or 1 14(040(1)(5)
b Check box to indicate whether the found		ng roundation described i	Prior 3 years	4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
income from Part I or the minimum	(4)2003	(5)2000	(0)2001	(4)2000	(0) (00)
investment return from Part X for					
each year listed					
b 85% of line 2a					<u> </u>
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					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract kne 2d from line 2c 3 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(j)(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	rmation (Comple	te this part only	if the foundation	on had \$5,000 or m	ore in assets
at any time during t	ne year-see the	instructions.)			
1 Information Regarding Foundatio	•				
a List any managers of the foundation who			ributions received by ti	ne foundation before the clo	se of any tax
year (but only if they have contributed in	ore man \$5,000). (See s	section 507 (u)(2).)			
SEE STATEMENT 3					
b List any managers of the foundation who other entity) of which the foundation has			or an equally large por	tion of the ownership of a p	artnership or
NONE	· · · · · ·		·		
2 Information Regarding Contributi					
Check here ► X if the foundation o					
the foundation makes gifts, grants, etc. (complete items 2a, b, c, and	1 0.
a The name, address, and telephone number	er of the person to who	m applications should be	addressed:		
b The form in which applications should b	e submitted and informa	tion and materials they sh	only include.		
	o capitation and another	and materials they di			
c Any submission deadlines:					
d Any restrictions or limitations on awards	, such as by geographic	al areas, charitable fields,	kınds of institutions, o	r other factors:	

3 Grants and Contributions Paid During the Year or Approved for Future Payment						
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount		
Name and address (home or business)	or substantial contributor	recipient	55.72.155.15			
a Paid during the year						
			,			
		:				
SEE STATEMENT 4						
Total .		l .	▶ 3a	33,440.		
b Approved for future payment						
NONE						
Tatal	L	i	▶ 3h	0.		

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelat	ed business income		ided by section 512, 513, or 514	(e)
·	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	Code	Amount	sion	Amount	function income
a N/A					
			-		ļ
b					
C			L		
d					
e					
f					
g Fees and contracts from government agencies		<u> </u>		·	
2 Membership dues and assessments			 	· · · · · · · · · · · · · · · · · · ·	<u> </u>
			├		
3 Interest on savings and temporary cash					
investments		<u> </u>			
4 Dividends and interest from securities			ļ		
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property	·				
6 Net rental income or (loss) from personal					
property					
7 Other investment income			ļ		
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:	 				
a	ļ				
	<u> </u>			<u> </u>	
b					
c					
d	i]			
·	1				
e					
		0.		0.	0.
12 Subtotal. Add columns (b), (d), and (e)		0.			0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)		0.		0.	
12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)			,	13	
12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)	o the Acc		,	13	
12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to		omplishment of Ex	æmp	ot Purposes	0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported	omplishment of Ex	æmp	ot Purposes	0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to	ne is reported	omplishment of Ex	æmp	ot Purposes	0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported	omplishment of Ex	æmp	ot Purposes	0.
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12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported	omplishment of Ex	æmp	ot Purposes	0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported	omplishment of Ex	æmp	ot Purposes	0.
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12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported	omplishment of Ex	æmp	ot Purposes	0.
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12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported	omplishment of Ex	æmp	ot Purposes	0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported	omplishment of Ex	æmp	ot Purposes	0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported	omplishment of Ex	æmp	ot Purposes	0.
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12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported	omplishment of Ex	æmp	ot Purposes	0.

Form 990-PF (2009) Part XVII Ir Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1	Did th	e organization directly or indir	rectly engage in any of the followin	g with any other organizatio	n described in section 501(c) of		Yes	No
)(3) organizations) or in section 52					
a	Trans	fers from the reporting founda	ation to a noncharitable exempt or	ganization of:				
	(1) 0	ash			_	1a(1)		X
	(2) 0	ther assets				1a(2)		X
b	Other	transactions:						
	(1) S	ales of assets to a noncharital	ble exempt organization			15(1)		X
	(2) P	urchases of assets from a noi	ncharitable exempt organization			1b(2)		X
	(3) F	ental of facilities, equipment,	or other assets			1b(3)		X
	(4) F	eimbursement arrangements	•			1b(4)		X
	(5) L	oans or loan guarantees				1b(5)		X
	(6) P	erformance of services or me	mbership or fundraising solicitatio	ons .		1b(6)		X
C	Sharii	ng of facilities, equipment, ma	iling lists, other assets, or paid em	ployees	_	10		X
d	If the	answer to any of the above is	"Yes," complete the following sche	edule. Column (b) should alv	vays show the fair market value of the goods,	other ass	ets,	
	or ser	vices given by the reporting fo	oundation. If the foundation receive	ed less than fair market valu	e in any transaction or sharing arrangement, s	how in		
	colun	nn (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	sharing ar	rangeme	ints
			N/A					
								_
							•	
28	ls the	foundation directly or indirect	tly affiliated with, or related to, one	or more tax-exempt organiz	zations described			_
	in sec	tion 501(c) of the Code (other	r than section 501(c)(3)) or in sect	tion 527?	L	Yes	X] No
b	If "Ye:	s," complete the following sch						
		(a) Name of org	janization	(b) Type of organization	(c) Description of relations	nip		
		N/A			***************************************			
				,				
,		\frown						
			than (expayer or fiduciary) is based on		ents, and to the best of my knowledge and belief, it is has any knowledge	true, corre	ect,	
١	ſ	X	d Belia	A / 1				
,	7		700	1/17/12/10	TRUSTEE			
2	Si	gnature of officer or trustee		Date	Title		.d	
	ω -	Preparer's	APM-	D	Check if self-	r's identif	ying nun	IUer
รีไ	Paid Preparer's Use Only	signature	~ 600		ciripioyed Land			
١	Paid Spare Se On		CCO, GULMAN & C		EIN >			
-	కైవ		PRESIDENTIAL WA	Y, SUITE 510		0 2 5	r	^
╝		address, and ZIP code WOBU	RN, MA 01801		Phone no. 781-			
					Fo	rm 99 0)-PF (2009)

Schedule B (Form 990, 990-EZ,

Department of the Treasury Internal Revenue Service

or 990-PF) Attach to Form 990, 990-EZ, or 990-PF.

Schedule of Contributors

OMB No 1545-0047

2009

Name of the organization **Employer identification number** 04-6628772 THE BAKER FAMILY TRUST Organization type (check one): Filers of: Section: ___ 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II. 🔟 For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify

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

that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Employer identification number

THE BAKER FAMILY TRUST

04-6628772

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	JON M. BAKER 70 BEACON STREET BOSTON, MA 02151	sss	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
· · · · · · · · · · · · · · · · · · ·		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
123452 02-0		\$Schodula R /Form	Person Payroll Noncash (Complete Part II if there is a noncash contribution.) 990, 990-EZ, or 990-PF) (2009)

FORM 990-PF	TAX	ES	STATEMENT 1			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
STATE FILING FEES	35.	35.		0.		
TO FORM 990-PF, PG 1, LN 18	35.	35.		0.		
=	FOOTN	OTES	S'	ratement 2		

SCHEDULE B: PER IRC SEC 170(F)(8)(D)

THE BAKER FAMILY TRUST DID NOT PROVIDE ANY GOODS OR SERVICES IN CONSIDERATION, IN WHOLE OR IN PART, FOR ANY CONTRIBUTIONS RECEIVED FROM JON M. BAKER, REPORTED ON SCHEDULE B

			
FORM 990-PF	PART XV - LINE 1A	STATEMENT	3
	LIST OF FOUNDATION MANAGERS		

NAME OF MANAGER

JON M. BAKER PATRICIA C. BAKER

FORM 990-PF		AND CONTRIBUTIONS DURING THE YEAR	STATEMENT 4		
RECIPIENT NAME AND ADDRESS		RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT	
BEACON HILL CIVIC ASSOCIAT	ION	NONE UNRESTRICTED GIFT	501(C)(3)	500.	
BOSTON ATHENAEUM		NONE UNRESTRICTED GIFT	501(C)(3)	1,290.	
CAPE COD HEALTHCARE FOUNDA	TION	NONE UNRESTRICTED GIFT	501(C)(3)	5,000.	
CARITAS GOOD SAMARITAN HOS	PICE	NONE UNRESTRICTED GIFT	501(C)(3)	1,000.	
EMERALD NECKLACE CONSERVAN	CY	NONE UNRESTRICTED GIFT	501(C)(3)	250.	
FRIENDS OF THE PUBLIC GARD	EN	NONE UNRESTRICTED GIFT	501(C)(3)	2,000.	

THE BAKER FAMILY TRUST			04-6628772
HOSPICE FOUNDATION OF PALM BEACH COUNTY	NONE UNRESTRICTED GIFT	501(C)(3)	7,500.
MASSACHUSETTS DOWN SYNDROME CONGRESS	NONE UNRESTRICTED GIFT	501(C)(3)	1,000.
MOTHER CAROLINE'S ACADEMY	NONE UNRESTRICTED GIFT	501(C)(3)	500.
NICHOLS HOUSE MUSEUM	NONE UNRESTRICTED GIFT	501(C)(3)	100.
REACH	NONE UNRESTRICTED GIFT	501(C)(3)	2,500.
SAVE VENICE BOSTON	NONE UNRESTRICTED GIFT	501(C)(3)	1,200.
OSTERVILLE HISOTRICAL SOCIETY AND MUSEUM	NONE UNRESTRICTED GIFT	501(C)(3)	100.
HOUSING ASSISTANCE CORP	NONE UNRESTRICTED GIFT	501(C)(3)	500.
CAMPAIGN FOR CATHOLIC SCHOOLS	NONE UNRESTRICTED GIFT	501(C)(3)	10,000.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A		33,440.
	UNRESTRICTED GIFT NONE UNRESTRICTED GIFT		10,000

Form **8868**

(Rev April 2009)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Internal Rever	nue Service	₽	 File a separate applic 	ation for each r	eturn		L	
● If you and Do not co	re filing for an Add	matic 3-Month Extensional (Not Automatic) 3 ess you have already bee	-Month Extension, co	mplete only Pa	rt II (on page 2 of this	•	m 8868	▶ [X]
Part I only	tion required to file	3-Month Extension Form 990 T and requesti	ng an automatic 6·mon	th extension c	heck this box and com		sion at time	▶ □
to file inco Electronic noted belo (not autom you must:	ome tax returns or Filing (e-file). Go ow (6 months for a natic) 3 month ext submit the fully co	ng 1120-C filers), partner merally, you can electronic corporation required to file sistence or (2) you file Form inpleted and signed page i.e-file for Charities & Non-	cally file Form 8868 if yo e Form 990-T) Howeve s 990 BL, 6069, or 8870 2 (Part II) of Form 8868	ou want a 3-moi ir, you cannot fi), group returns	nth automatic extensio le Form 8868 electroni , or a composite or cor	in of til cally if nsolida	me to file one of t (1) you want the ated Form 990 T	additional
Type or	Name of Exemp		-			Employer identification number		
print File by the		R FAMILY TRUS				04-6628772		
due date for filing your return. See	Number, street, 62 WALNU	nd room or suite no If a	PO box, see instruction	ons 				
instructions		City, town or post office, state, and ZIP code. For a foreign address, see instructions. WELLESLEY, MA 02481						
Form X Form The bootelepho	one No $ ightharpoons rac{781}{100}$ rganization does restor a Group Return	Form 990 T Form 1041 JON M. BA of ▶ 62 WALNUT	KER STREET WELD of business in the Unit s four digit Group Exem	LESLEY, FAX No. ▶ ed States, checonotion Number (k this box GEN) If thi	169 170 	the whole groupers the extension	
is fo	AUGUST 15 or the organization X calendar year tax year begin	return for 2009 or	the exempt organization	ending		bove	The extension Change in accou	nting period
	is application is fo	Form 990 BL, 990-PF, 99 See instructions	0-T, 4720, or 6069, ent	er the tentative	tax, less any	3a	\$	0.
b If the	is application is fo	Form 990 PF or 990-T, er clude any pnor year over	•		led	3b	\$	51.
c Bala	ance Due, Subtra	line 3b from line 3a Inclion or, if required, by using	ude your payment with	this form, or, if		3c	\$	0.
500								