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Form 990-PF

Return of Private Foundation

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

Department of the Treasury

OMB No 1545-0052 2009

Note The foundation may be able to use a copy of this return to satisfy state reporting requirements Internal Revenue Service For calendar year 2009, or tax year beginning and ending G Check all that apply Initial return Initial return of a former public charity Final return Amended return Address change Name change Name of foundation A Employer identification number Use the IRS label. THE OWENS FAMILY FOUNDATION 31-6652818 Otherwise. Number and street (or P O box number if mail is not delivered to street address) print Room/suite B Telephone number or type. 637 MAIN STREET 781-659-7824 See Specific City or town, state, and ZIP code C If exemption application is pending, check here Instructions NORWELL, MA 02061 D 1 Foreign organizations, check here Foreign organizations meeting the 85% test, check here and attach computation H Check type of organization X Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt charitable trust Uther taxable private foundation E If private foundation status was terminated I Fair market value of all assets at end of year | J | Accounting method X Cash Accrual under section 507(b)(1)(A), check here Other (specify) (from Part II col (c) line 16) F If the foundation is in a 60-month termination 7,799,143. (Part I, column (d) must be on cash basis) ▶\$ under section 507(b)(1)(B), check here Analysis of Revenue and Expenses Part I (a) Revenue and (b) Net investment (c) Adjusted net (d) Disbursements (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) for chantable purposes expenses per books income income (cash basis only) 999,945 N/A Contributions, gifts, grants, etc., received 2 Check ▶ if the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments 3 51,401. 51,401 STATEMENT 4 Dividends and interest from securities 5a Gross rents D Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a RECEIVED 0. 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain O Income modifications 10a Gross sales less returns Ś OGDEN. b Less Cost of goods sold c Gross profit or (loss) 11 Other income 1,051,346. 51,401 12 Total Add lines 1 through 11 0. 0. 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees c Other professional fees 17 Interest STMT 2 750. 0. 18 0. Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications STMT 3 250 23 Other expenses 0. 250. Operating 24 Total operating and administrative 1,000 0. expenses. Add lines 13 through 23 250. 360,000 360,000. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 361,000 0. 360,250. Add lines 24 and 25 27 Subtract line 26 from line 12 690,346 3 Excess of revenue over expenses and disbursements 51,401. b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A

LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

Par	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	year
ran	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	3.	3.	3.
2	Savings and temporary cash investments	6,354,072.	7,044,473.	7,044,473.
3	Accounts receivable >			
	Less allowance for doubtful accounts			
4	Pledges receivable			
1	Less allowance for doubtful accounts			
5				
6	Receivables due from officers, directors, trustees, and other			
ľ	disqualified persons			
,	Other notes and loans receivable			
'				
	Less allowance for doubtful accounts ▶			
Assets				
ss a	Prepaid expenses and deferred charges			
10	a Investments - U S and state government obligations			
	b Investments - corporate stock $f STMT 4$	403,384.	403,329.	754,667.
	c Investments - corporate bonds			
11	Investments - land, buildings, and equipment basis			
	Less accumulated depreciation			
12	Investments - mortgage loans			
13	F			
14				
'	Less accumulated depreciation			
1=		0.	0.	0.
פו	Other assets (describe STATEMENT 5)	<u> </u>		<u> </u>
		6 757 450	7 447 005	5 5 00 1 40
16		6,757,459.	7,447,805.	7,799,143.
17				
18	Grants payable			
ន្ល 19	Deferred revenue			
20 21 21 21 21 21 21 21 21 21 21 21 21 21	Loans from officers, directors, trustees, and other disqualified persons			
<u>6</u> 21	Mongages and other notes payable			
- 22	Other liabilities (describe)			
-				
23	Total llabilities (add lines 17 through 22)	0.	0.	
	Foundations that follow SFAS 117, check here			
ŀ	and complete lines 24 through 26 and lines 30 and 31			
S 24	- · · · · · · · · · · · · · · · · · · ·			
<u>8</u> 25	Temporarily restricted			
20 20	real control of the c			
Net Assets or Fund Balan 95 22 22 25 26 27 27 27 27 27 27 27 27 27 27 27 27 27	Permanently restricted			
<u>ا</u> ج	Foundations that do not follow SFAS 117, check here			
<u>.</u>	and complete lines 27 through 31			
န္ဌ 27	Capital stock, trust principal, or current funds	0.	0.	
စ္တ 28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
볼 29	Retained earnings, accumulated income, endowment, or other funds	6,757,459.	7,447,805.	
30	Total net assets or fund balances	6,757,459.	7,447,805.	
31	Total liabilities and net assets/fund balances	6,757,459.	7,447,805.	
Part	·····			
	if net assets or fund balances at beginning of year - Part II, column (a), line 3	n		
	st agree with end-of-year figure reported on prior year's return)	•	1	6,757,459.
	er amount from Part I, line 27a		 -	690,346.
	er increases not included in line 2 (itemize)		2	
			3	7 447 905
	lines 1, 2, and 3		4	7,447,805.
	reases not included in line 2 (itemize)		5	0.
) lota	il net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umn (b), line 30	6	7,447,805.
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r	۵	u	t	

		(s) of property sold (common stock, 200			` P	- Purc - Dona			acquired lay, yr)	(d) Date sold (mo , day, yr)
a	-				ļ					
b NON	NE .									
<u>C</u>			 		╂-					
<u>d</u>				···	-					
<u>e</u>	/f) Der	oreciation allowed	(n) Co	st or other basis	1			(b) G	ain or (loss	.)
(e) Gross sales price		or allowable)		expense of sale					s (f) minus	
ab		· · -								
C										
1		-								
Complete only for assets showing	gain in col	lumn (h) and owned	by the foundation	on 12/31/69					ol (h) gair	
(i) F M V as of 12/31/69	***	Adjusted basis s of 12/31/69		cess of col (i)			CO		not less tha (from col	
. <u>.</u>			 	<u> </u>			·-····································			
										
										· · · · · · · · · · · · · · · · · · ·
								-		
										. = .
		C It gain also as	nter in Part I, line	7	7					
Capital gain net income or (net cap	ital loss)	If (loss) enter	-0- in Part I, line	7	 	2				
Net short-term capital gain or (loss	·	•		•						
If gain, also enter in Part I, line 8, c		u III 58000115 1222(5)	anu (o))					
If (loss), enter -0- in Part I, line 8	0.0 (0)				P 1	•				
r optional use by domestic private t	foundations		•				nent Ind	come		
or optional use by domestic private to section 4940(d)(2) applies, leave this as the foundation liable for the section	foundations s part blank on 4942 tax	s subject to the section on the distributable	on 4940(a) tax or	ear in the base pe	ncome		nent ind	come		Yes X N
or optional use by domestic private to section 4940(d)(2) applies, leave thi	foundations s part blank on 4942 tax ly under sec	s subject to the section on the distributable section 4940(e). Do not	on 4940(a) tax or amount of any you	net investment in ear in the base pe irt	riod?		nent ind	come		Yes X N
or optional use by domestic private to section 4940(d)(2) applies, leave this as the foundation liable for the section as the foundation does not qualify the foundation does not qualify the the appropriate amount in each	foundations s part blank on 4942 tax ly under sec	s subject to the section c on the distributable ction 4940(e) Do not for each year, see in	amount of any your complete this pastructions before	ear in the base pe ort making any entri	riod?	*)			Distri	(d)
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_	990-PF (2009) THE OWENS FAMILY FOUNDATION			1-665			Page 4
Pa	rt VI Excise Tax Based on Investment Income (Section 494)	0(a), 4940(b), 4940(e),	or 494	18 - sec	instrı	uctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and er	nter "N/A" on line 1					
	Date of ruling or determination letter (attach copy of letter if nec	essary-see instructions)					
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒	► X and enter 1%		1		5	14.
	of Part I, line 27b	İ					
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%	of Part I, line 12, col(b) 丿					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Ot	thers enter -0-)	<u> </u>	2			0.
3	Add lines 1 and 2			3		5	14.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only O	thers enter -0-)	L	4			0.
5	Tax based on investment income. Subtract line 4 from line 3-1f zero or less, enter -0-		L	5		5	14.
6	Credits/Payments						
а	2009 estimated tax payments and 2008 overpayment credited to 2009	6a 2,02	21.				
b	Exempt foreign organizations - tax withheld at source	_6b					
C	Tax paid with application for extension of time to file (Form 8868)	_6c					
d	Backup withholding erroneously withheld	6d					
7	Total credits and payments Add lines 6a through 6d			7		2,0	21.
ô	Enter any penalty for uniderpayment of estimated tex. Check here 🔙 if Form 2220 is attac	ched		8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		▶ 1	10		1,5	07.
11	Enter the amount of line 10 to be Credited to 2010 estimated tax	1,507.Refunded	i ▶ 1	11			0.
Pa	t VII-A Statements Regarding Activities						
1a	During the tax year, did the foundation attempt to influence any national, state, or local legisl	lation or did it participate or inte	rvene in			Yes	No
	any political campaign?				1a		X
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos	ses (see instructions for definition	n)?		1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	d copies of any materials pub	lished o	or			
	distributed by the foundation in connection with the activities.						
C	Did the foundation file Form 1120-POL for this year?				10		Х
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	year					
	(1) On the foundation \blacktriangleright \$ (2) On foundation managers	> \$	0.				
e	Enter the reimbursement (if any) paid by the foundation during the year for political expendit	ture tax imposed on foundation					
	managers ▶ \$ 0 .						
2	Has the foundation engaged in any activities that have not previously been reported to the IR	RS7			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 in	nstrument, articles of incorporal	ion, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	es			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year	ر5			4a		X
þ	If "Yes," has it filed a tax return on Form 990-T for this year?			N/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 eit	ther					
	■ By language in the governing instrument, or						
	ullet By state legislation that effectively amends the governing instrument so that no mandatory	directions that conflict with the	state lav	V			
	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	
	f "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 instruction	ns) ▶			.		
	MA				.		
	if the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the At	torney General (or designate)			-		
	of each state as required by General Instruction G? If "No," attach explanation				8b	X	
	s the foundation claiming status as a private operating foundation within the meaning of sec		r calenda	ır			
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," ca				9		_X_
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedul	le listing their names and addresses			10		X

	Security (2009) THE OWENS FAMILY FOUNDATION S1-005	2010		- ago o
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 ► EDWARD P. & LINDA B. OWENS Telephone no ► 781-6	59-7	824	
	Located at ▶637 MAIN STREET, NORWELL, MA, MA ZIP+4 ▶0	2061		
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	ert VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	ł		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(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"	ľ		
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)			
h	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
-	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here	1		
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			
٠	before the first day of the tax year beginning in 2009?	10		Х
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))			
а	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			
ŭ	before 2009?			
	If "Yes," list the years ▶ , , , ,			
h	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
Ü	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		
r	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
·	The provisions of social 1542(a)(2) are being applied to any of the years listed in 2a, list the years note			
32	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	ŀ		
04	during the year?	1		
h	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after			
J	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	3b		
42	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	70		-
U	had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b	;	х
	was not occurrented notification priority may may any time tay hear nedimining in 5002.	<u> </u>		

orm 990-PF (2009) THE OWENS FAMILY FOUNDAT			31-66528	18 Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Required (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 (section			es X No	
(2) Influence the outcome of any specific public election (see section 4955), or	or to carry on, directly or indir			
any voter registration drive?	_		es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		[32]	
509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	, or educational purposes, or			
the prevention of cruelty to children or animals?			es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	·	in Regulations	27 / 2	_
section 53 4945 or in a current notice regarding disaster assistance (see instru	•		N/A	5b
Organizations relying on a current notice regarding disaster assistance check h				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		- / -		
expenditure responsibility for the grant?		1/A Ye	es L No	
If "Yes," attach the statement required by Regulations section 53.494				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?		Ye	es X No	_
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		ļ	6b X
If "Yes" to 6b, file Form 8870			₩	
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y6	es X No	
b If yes, did the foundation receive any proceeds or have any net income attribut				7b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, roundation wa	inagers, n igni	/	
List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
EDWARD P. OWENS	TRUSTEE	3,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	- Componitation	
37 MAIN STREET				
NORWELL, MA 02061	0.00	0.	0.	0.
LINDA B. OWENS	TRUSTEE			
37 MAIN STREET				
NORWELL, MA 02061	0.00	0.	0.	0.
			-	
		<u> </u>		
Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	(1) 5
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit plans and deferred	(e) Expense account, other
NONE	devoted to position	 	compensation	allowances
NONE				
		 		
	,	 		
]		
otal number of other employees paid over \$50,000			>	0

3 Five highest-paid independent contractors for professional services. If none, ente	r "NONE."	· · · · · · · · · · · · · · · · · · ·
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(b) Type of Service	(c) compensation
NONE		
		
		
		
Total number of others recovers over \$50,000 for professional convices		D
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tay year. Inclinde relevant statis number of organizations and other beneficiaries served, conferences convened, research papers pro-		Eypaneas
37/3	succa, etc	
1 N/A		
2		
3		
1		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on	lines 1 and 2	Amount
1 <u>N/A</u>		
2		
All other program-related investments See instructions		
3		
Total Add lines 1 through 3		0

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations,	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	679,319.
	Average of monthly cash balances	1b	679,319. 6,244,404.
	Fair market value of all other assets	10	<u> </u>
d	Total (add lines 1a, b, and c)	10	6,923,723.
е	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	6,923,723.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	103,856.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	6,819,867.
6_	Minimum investment return Enter 5% of line 5	6	340,993.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum invostment return from Part X, line 6	1	340,993.
2a	Tax on investment income for 2009 from Part VI, line 5		•
þ	Income tax for 2009 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	20	514.
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	340,479.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	340,479.
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	340,479.
_	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		260 250
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	360,250.
þ	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	
b 4	Cash distribution test (attach the required schedule)	3b	360,250.
-	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	300,230.
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 1 <i>A</i>
6	Adjusted qualifying distributions. Subtract line 5 from line 4	5	514. 359,736.
U		6	
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years	quaiiiles 10	Time section

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,	Corpus		2000	2003
line 7				340,479.
2 Undistributed income, if any, as of the end of 2009		1111 - 1		340,413.
a Enter amount for 2008 only			0.	
b Total for prior years			· · · · · · · · · · · · · · · · · · ·	<u> </u>
g rotation prior years		0.		
3 Excess distributions carryover, if any, to 2009	·····			
a From 2004				
b From 2005				
c From 2006				
d From 2007 31, 154.				
e From 2008 90, 407.				
	121.561.			
i Tuial of lines 3a through 6	121,301.	······································	***************************************	1
4 Qualifying distributions for 2009 from Part XII, line 4 ▶\$ 360, 250.				
			0.	
a Applied to 2008, but not more than line 2a			<u> </u>	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)			, 111	
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	U •		·	240 470
d Applied to 2009 distributable amount	10 771	***************************************		340,479.
e Remaining amount distributed out of corpus	19,771.			
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:	***************************************			
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	141,332.			
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			. ,	<u> </u>
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	0.			
9 Excess distributions carryover to 2010.			***************************************	
Subtract lines 7 and 8 from line 6a	141,332.			
10 Analysis of line 9		***************************************		
a Excess from 2005				
b Excess from 2006				
c Excess from 2007 31, 154.				
d Excess from 2008 90, 407.		}		
e Excess from 2009 19,771.				
				5 000 DE (0000)

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	NS FAMILY F				652818 Page 10
Part XIV Private Operating F			II-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter tha	t it is a private operating			
foundation, and the ruling is effective fo	r 2009, enter the date of	the ruling	>		
b Check box to indicate whether the found	lation is a private operati	ng foundation described	ın section	4942(j)(3) or4	1942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
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					
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 line 2d from line 2c					
3 Complete 3a, b, or c for the		<u> </u>			1
alternative test relied upon a "Assets" alternative test - enter					
(1) Value of all assets					
(2) Value of assets qualifying		1			
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return	I				
shown in Part X, line 6 for each year listed		_			
c "Support" alternative test - enter			İ		
(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		ļ			ļ
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	n had \$5,000 or m	ore in assets
at any time during t	he year-see the i	instructions.)			
1 Information Regarding Foundatio	-				
a List any managers of the foundation who	have contributed more	than 2% of the total con-	tributions received by the	foundation before the cl	ose of any tax
year (but only if they have contributed m	iore than \$5,000) (See s	ection 507(d)(2))			
SEE STATEMENT 6					· · · · · · · · · · · · · · · · · · ·
b List any managers of the foundation who	o own 10% or more of th	e stock of a corporation	(or an equally large porti	on of the ownership of a	partnership or
other entity) of which the foundation has	s a 10% or greater interes	St			
NONE				·····	
2 Information Regarding Contributi					
Check here ► X if the foundation o the foundation makes gifts, grants, etc.	nly makes contributions i	to preselected charitable	organizations and does i	not accept unsolicited req	uests for funds If
				omplete items 2a, b, c, ai	
a The name, address, and telephone number	per 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 s	hould include		
a Annauhance de die				······································	
c Any submission deadlines					
d Any restrictions or limitations on awards	, such as by geographic	al areas, charitable fields	, kinds of institutions, or	other factors	
923601 02-02-10					5 000 DE (0000)

3 Grants and Contributions Paid During th		Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
a Paid during the year COLLEGE FOUNDATION OF UNIVERSITY OF VIRGINIA CHARLOTTESVILLE, VA	NONE	PUBLIC CHARITY	UNRESTRICTED CONTRIBUTION	230,000
WELLINGTON MANAGEMENT CHARITABLE FUND BOSTON, MA	NONE	PUBLIC CHARITY	UNRESTRICTED CONTRIBUTION	100,000
WHEELOCK COLLEGE BOSTON, MA	NONE	PUBLIC CHARITY	UNRESTRICTED CONTRIBUTION	30,000
Total		<u> </u>	▶ 3a	360,000
b Approved for future payment				
NONE				
		<u> </u>		
Total			▶ 3b	0

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Enter gross amounts unless otherwise indicated	Unrelated b	usiness income	Excluded to	by section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exemple function income
1 Program service revenue	code		code	Amount	- Idiliction income
a				<u>-</u> -	
b	-				
<u> </u>					-
d	_		 		
e	_				
f			 		
2 Membership dues and assessments			- - - -		
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			14	51,401.	
5 Net rental income or (loss) from real estate					
a Debt-financed property			1		
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					· · · · · · · · · · · · · · · · · · ·
O Gross profit or (loss) from sales of inventory					
1 Other revenue					
a					
b	_				
<u> </u>	-			-	
d	-				
Cubtotal Add columns (b) (d) and (a)			5.	51 401	
2 Subtotal Add columns (b), (d), and (e)			/•!	51,401.	51,40
3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations	,			13	51,40

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes)
	
	
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Pa	art X	Information Re Exempt Organ		and Transactions a	nd Relationships With Nonch	naritable	•	
_	Did th		rectly engage in any of the followi	ing with any other organization	n described in section 501/c) of		Yes	No
')(3) organizations) or in section 5				.03	110
2		•	ation to a noncharitable exempt o	- · · · · · · · · · · · · · · · · · · ·	20110113			
	(1) (agameation of		1a(1)	:	х
		Other assets				1a(2)		X
h	٠,,	transactions				10/27		
U		Gales of assets to a noncharita	ble exempt organization			1b(1)	·	х
			ncharitable exempt organization			1b(2)		X
		Rental of facilities, equipment,				1b(3)		X
		Reimbursement arrangements				1b(4)		X
		oans or loan guarantees				1b(5)		X
			mbership or fundraising solicitati	ons		1b(6)		Х
C			iling lists, other assets, or paid er			1c		Х
d					ays show the fair market value of the good		ets.	
					e in any transaction or sharing arrangemen		,	
			other assets, or services received					
(a) (ine no	(b) Amount involved	(c) Name of noncharitab	le exempt organization	(d) Description of transfers, transactions, a	nd sharing an	rangeme	nts
			N/A					
				· · · · · · · · · · · · · · · · · · ·				

			<u> </u>					
					· · · · · · · · · · · · · · · · · · ·			
_					<u></u>			
2a			tly affiliated with, or related to, on		ations described			_
			r than section 501(c)(3)) or in sec	ction 527?		Yes	LX.] No
<u> </u>	If "Yes	s," complete the following sche		(b) 7 4 4				
		(a) Name of org	anization	(b) Type of organization	(c) Description of relation	nsnip		
		N/A						
								
\neg	Under p	enalties of perjury, I declare that I h	ave examined this return, including acc	companying schedules and stateme	ents, and to the best of my knowledge and belief, if	t is true, corre	ct.	
			r than taxpayer or fiduciary) is based or		as any knowledge			
		Elevan IC	ups	15 May 2010	tuestea			
a l	SI	gnature of officer or trustee	<u></u>	Date 0	Title			
Ĭ		Preparer's			ite Check if Pres	parer's identify	/ing num	ber
Sign Here	ئے ج	signature	u. Magnire	5	Check if Self-employed Pres			
"	pare se On	Firm's name (or yours MARC	UM LLP		EIN ►			
ľ	Preparer's Use Only		TATE STREET, FI	LOOR 38				
	ц-		ON, MA 02109		Phone no (61	7)742	-96	66
						Form 990		

923622 02-02-10

Schedule B (Form 990, 990-EZ, or 990-PE)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

2009

Employer identification number

THE OWENS FAMILY FOUNDATION 31-6652818 Organization type (check one) Filers of: Section: Form 990 or 990-EZ ____ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Funn 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$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 that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF) LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

923451 02-01-10

for Form 990, 990-EZ, or 990-PF.

Employer identification number

THE OWENS FAMILY FOUNDATION

31-6652818

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	EDWARD P. AND LINDA B. OWENS 637 MAIN STREET NORWELL, MA 02061	\$ 999,945.	Person X Payroll
(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
		\$	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)

2009 DEPRECIATION AND AMORTIZATION REPORT FORM $990-\mathrm{PF}\ \mathrm{PAGE}\ 1$

990-PF

Current Year Deduction	0	0	
Current Sec 179		0	
Accumulated Depreciation	3,000.	3,000.	
Basi', For Depreixation	3,000.	3.000.	
Reduction in Basis		0	
Bus % Excl			
Unadjusted Cosl Or Basis	3,000.	3,000.	
No No	43		
Lufe	W09		
Method			
Date Acquired	122000		
Description	OKGANIZATIONAL 1COSTS * momat 000 pr pc 1		
Asset No			

(D) - Asset disposed

928102 06-24-09

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

16

FORM 990-PF DIVIDENI	OS AND IN	TERI	EST FROM	SECUE	RITIES	STATEMENT	1
SOURCE	GR	oss	AMOUNT		TAL GAINS	COLUMN (A) AMOUNT	
FIDELITY BROKERAGE SERVICES I	LLC		51,401.		0.	51,40	1.
TOTAL TO FM 990-PF, PART I, I	LN 4		51,401.		0.	51,40	1.
FORM 990-PF		TAXI	ES			STATEMENT	2
DESCRIPTION	(A) EXPENSE PER BOO		(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
FEDERAL TAXES	7	50.		0.			0.
TO FORM 990-PF, PG 1, LN 18	7	50.		0.			0.
FORM 990-PF	ОТНЕ	R EX	(PENSES	<u></u>		STATEMENT	3
DESCRIPTION	(A) EXPENSE PER BOO		(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
DESCRIPTION STATE FILING FEE	EXPENSE PER BOO		NET INVE		ADJUSTED	CHARITAB	S
	PER BOO	KS ——	NET INVE	COME	ADJUSTED	CHARITAB E PURPOSE	s 0.
STATE FILING FEE	PER BOO	50.	NET INVE	0.	ADJUSTED	CHARITAB E PURPOSE 25	s 0.
STATE FILING FEE TO FORM 990-PF, PG 1, LN 23	PER BOO	50.	NET INVE	0. 0.	ADJUSTED	CHARITAB E PURPOSE 25	0. 0.
STATE FILING FEE TO FORM 990-PF, PG 1, LN 23 FORM 990-PF	PER BOO	50.	NET INVE	0. 0.	ADJUSTED NET INCOM	CHARITAB E PURPOSE 25 25 STATEMENT FAIR MARKET	0. 0.

BEGINNING OF END OF YEAR FAIR MARKET YR BOOK VALUE BOOK VALUE VALUE
COSTS 0. 0.
, PART II, LINE 15 0. 0. 0.
, PART II, LINE 15 0. 0.

NAME OF MANAGER

EDWARD P. OWENS LINDA B. OWENS



Investment Report

December 1, 2009 - December 31, 2009

Online Fidelity.com Fidelity.com FAST(sm)-Automated Telephone 800-544-5555 Private Client Group

Messages:

Envelope 135015270

OWENS FAMILY FOUNDATION

EDWARD P OWENS

NORWELL MA 02061-2102

637 MAIN ST

Take advantage of a discounted offer from McAfee. Find out more details at Fidelity.com/securityoffers.

OWENS FAMILY FOUNDATION U/A 12/07/00 EDWARD P OWENS AND LINDA B OWENS TRUSTEES Fidelity Accountsm Y04-095346

Holdings (Symbol) as of December 31, 2009	Performance December 31, 2009	Quantity December 31, 2009	Price per Unit December 31, 2009	Total Cost Basis	Total Value December 1, 2009	Total Value December 31, 2009
Stocks 10% of holdings						
EXELON CORP (EXC)		994.000	\$48.870	\$13,742.00c	\$47,890.92	\$48,576.78
HEALTH NET INC COM (HNT)		7,000.000	23.290	114,010.000	148,540.00	163,030.00
KELLOGG COMPANY (K)		1,600.000	53.200	2,351.00c	/ 84,128.00	85,120.00
MEDICINES CO (MDCO)		17,000.000	8.340	267,133.600	133,280.00	141,780.00
PEPSICO INC (PEP)		5,200.000	60.800	5,792.00cV	323,544.00	316,160.00
Core Account 90% of holdings FIDELITY CASH RESERVES (FDRXX)	7-day Yield: 0.09%	7044,473.830	1.000	not app icable	6,147,838.10	7,044,473.83

Total Market Value

All positions held in cash account unless indicated otherwise

c - Cost basis information (or proceeds from short sales) has been provided by you and has not been adjusted except as otherwise indicated When positions are transferred between accounts, in certain cases, cost basis information may be automatically transferred and deemed to be customer-provided.

\$7,799,140.61