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Form 990-PF

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust

Department of the Treasury Internal Revenue Service

Treated as a Private Foundation

2010

OMB No 1545-0052

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements. For calendar year 2010, 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 BELL FAMILY FOUNDATION 04-6771029 Number and street (or P O box number if mail is not delivered to street address) Room/suite Telephone number 611 WASHINGTON STREET 2505 978-296-3318 City or town, state, and ZIP code C If exemption application is pending, check here SAN FRANCISCO, CA D 1. Foreign organizations, check here 2. Foreign organizations meeting the 85% test, check here and attach computation X Section 501(c)(3) exempt private foundation H Check type of organization: Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated Fair market value of all assets at end of year | J | Accounting method: under section 507(b)(1)(A), check here (from Part II, col. (c), line 16) Other (specify) If the foundation is in a 60-month termination 5,829,415. (Part I, column (d) must be on cash basis) ▶\$ under section 507(b)(1)(B), check here Part | Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) charitable purposes (cash basis only) expenses per books income ıncome N/A Contributions, gifts, grants, etc., received Check If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 128,155 128,155. STATEMENT Dividends and interest from securities 5a Gross rents h Net rental income or (loss) 153,319 6a Net gain or (loss) from sale of assets not on line 10 JUN 2 a 7,536,482. 153,319 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 1,251 1,251 STATEMENT 11 Other income 282,725 282,725 Total. Add lines 1 through 11 0. 13 Compensation of officers, directors, trustees, etc 0 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees STMT 4,800. 0. 4,800. b Accounting fees c Other professional fees STMT 37,722 37,722 17 Interest 176. 176. 0. RECE LSTMT 2,059 359. 18 Taxes 19 Depreciation and depletion Š Occupancy 20 aiřcy JUN **23** 2011 Édnferences, and meetings 21 Printing and publications 22 23 Other expenses (180,910 0 0. 24 Total operating and administrative 225,667 38,257 4,800. expenses Add lines 13 through 23 Contributions, gifts, grants paid 168,100 168,100. 26 Total expenses and disbursements. 393,767 38,257 172,900. Add lines 24 and 25 27 Subtract line 26 from line 12:

c Adjusted net income (if negative, enter -0-) LHA For Paperwork Reduction Act Notice, see the instructions

a Excess of revenue over expenses and disbursements

b Net investment income (if negative, enter -0-)

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Form **990-PF** (2010)

BELL

244,468

N/A

<111,042.

Par	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	f year
	Column should be not end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
_ I _	Cash - non-interest-bearing			
	Savings and temporary cash investments	1,242,794.	734,016.	734,016.
3	Accounts receivable -			
	Less: allowance for doubtful accounts			
4	Pledges receivable ►			
	Less: allowance for doubtful accounts			
5	F			
6	,,			
	disqualified persons			
7	Other notes and loans receivable			
	Less; allowance for doubtful accounts ▶			
(a)	Inventories for sale or use			
Ass	Prepaid expenses and deferred charges	1 010 500	010 510	020 516
1 10	la Investments - U.S. and state government obligations STMT 7	1,018,588.	810,710.	838,716.
1	b Investments - corporate stock STMT 8	2,418,535.	2,539,706.	2,955,275.
	c Investments - corporate bonds STMT 9	745,803.	1,242,712.	1,301,408.
' '	Investments - land, buildings, and equipment basis	-		
1,0	Less accumulated depreciation ! Investments - mortgage loans			
12				
14		-		
' '	Less accumulated depreciation			
15	Other assets (describe STATEMENT 10)	12,466.	0.	0.
'	DIZITEDIA I	12,400.	0.	<u> </u>
16	Total assets (to be completed by all filers)	5,438,186.	5,327,144.	5,829,415.
17		3/100/1001	3702.71211	3/023/4131
18				
<u>د</u> 19	· · ·		· — ·	
Liabilities 20 21 21	Loans from officers, directors, trustees, and other disqualified persons			
ਦੂ ਵ 21	· · · · · · · · · · · · · · · · · · ·			
<u> </u>	Other liabilities (describe ▶)			
23	Total liabilities (add lines 17 through 22)	0.	0.	
	Foundations that follow SFAS 117, check here		:	
, l	and complete lines 24 through 26 and lines 30 and 31.			
ğ 24	Unrestricted			
25				
<u>8</u> 26				
Š	Foundations that do not follow SFAS 117, check here			
늅	and complete lines 27 through 31.	404 505		
ş 27	· · · · · · · · · · · · · · · · · · ·	401,507.	401,507.	
Net Assets or Fund Balances		0.	0.	
¥ 29		5,036,679.	4,925,637.	
≥ 30	Total net assets of fund balances	5,438,186.	5,327,144.	
31	Total liabilities and net assets/fund balances	5,438,186.	5,327,144.	
			J, 341, 144.	
Par	Analysis of Changes in Net Assets or Fund Ba	alances		
1 Tot	al net assets or fund balances at beginning of year - Part II, column (a), line 3	30		
(mı	ust agree with end-of-year figure reported on prior year's return)		1	5,438,186.
2 Ent	er amount from Part I, line 27a		2	<111,042.
	er increases not included in line 2 (itemize)		3	0.
	d lines 1, 2, and 3		4	5,327,144.
	creases not included in line 2 (itemize)		5	0.
6 Tot	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umn (b), line 30	6	5,327,144.
				Form 990-PF (2010)

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Ľ	art IV Capital Gallis	and Losses for Tax Off in	Meanineili	IIICOIIIE					
		ribe the kind(s) of property sold (e.garehouse; or common stock, 200 shs			(b) How P - Pi D - D	v acquired urchase onation	(c) Date a (mo., da		(d) Date sold (mo., day, yr.)
1a SHORT TERM - SEE STATE STREET STMTS					P	VARIO	OUS	VARIOUS	
_	b LONG TERM - SEE STATE STREET STMTS					P	VARI		VARIOUS
					P	VARI		VARIOUS	
_		PARTNERSHIPS K-1				P	VARIO		VARIOUS
	CAPITAL GAINS			-					
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis xpense of sale				in or (loss (f) minus	
- 8	6,477,214.			6,518,06	5.				<40,851.
	1,057,514.			864,95					192,555.
_(1,556.								1,556.
_(<u> </u>			13	9.				<139.
_6									198.
_	Complete only for assets shown	ng gain in column (h) and owned by	the foundation	on 12/31/69		(1) Gains (Co	ol. (h) gain	minus
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any		CO	. (k), but n Losses (of less that (from col.	
									<40,851.
_t	<u> </u>						·		192,555.
_	}								1,556.
_									<139.
_6	<u> </u>								198.
2	Capital gain net income or (net ca	apital loss) { If gain, also enter			} 2	2			153,319.
3	Net short-term capital gain or (lo	ss) as defined in sections 1222(5) ar	nd (6):			i			
	If gain, also enter in Part I, line 8,	column (c).	, ,		}				
_	If (loss), enter -0- in Part I, line 8 Part V Qualification U	Inder Section 4940(e) for	-		<u>3 لل</u>	3	•	N/A	<u> </u>
If W	section 4940(d)(2) applies, leave t as the foundation liable for the sec 'Yes," the foundation does not qua	tion 4942 tax on the distributable an	nount of any ye	ear in the base per rt.	nod?				Yes X No
1	''''	each column for each year; see instr	uctions before	making any entri					(4)
	(a) Base period years Calendar year (or tax year beginni			Net value of no				Dıstrı col. (b) dı	(d) bution ratio vided by col. (c))
	2009		0,391.			526,691			.048055
_	2008		9,476.			287,054			.034909
_	2007		0,302.			776,116			.050221
_	2006		9,289.			554,806			.042608
_	2005	27	4,435.		6,3	<u>333,967</u>	•		.043328
	Total of line 1, column (d)						2		.219121
3	Average distribution ratio for the the foundation has been in existe	5-year base period - divide the total ence if less than 5 years	on line 2 by 5,	or by the number	of years	•	3		.043824
4	Enter the net value of noncharital	ble-use assets for 2010 from Part X,	line 5				4		5,787,703.
5	Multiply line 4 by line 3						5		253,640.
6	Enter 1% of net investment incor	ne (1% of Part I, line 27b)					6		2,445.
7	Add lines 5 and 6						7		256,085.
8	Enter qualifying distributions from	m Part XII, line 4					8		172,900.
	If line 8 is equal to or greater that See the Part VI instructions.	n line 7, check the box in Part VI, line	e 1b, and comp	lete that part usin	g a 1% t	ax rate.			

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Pa	art VI Excise Tax Based on Investment Income (Section 494	0(a),	49	140(b),	<u>4940(e</u>	e), or 4	948	- see in:	stru	ictio	ns)
1a	a Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and ei	nter °N/	/A" (on line 1.)					
	Date of ruling or determination letter: (attach copy of letter if nec	essary	y-se	e instru	tions)	l					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	lacktriangle] an	nd enter 1	%	}	1			4,8	189.
	of Part I, line 27b										
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	of Par	rt I,	line 12,	ol. (b).	J					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Of	thers er	enter	r -0-)			2				0.
3	Add lines 1 and 2						3			4,8	89.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. O)thers e	ente	er -0-)			4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-						5			4,8	89.
6	Credits/Payments:										
а	a 2010 estimated tax payments and 2009 overpayment credited to 2010	6a			1,	906.					
b	Exempt foreign organizations - tax withheld at source	6b									
C	Tax paid with application for extension of time to file (Form 8868)	6c			6,	000.					
d	Backup withholding erroneously withheld	6d]	Ì			
7	Total credits and payments. Add lines 6a through 6d						7			7,9	06.
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is atta	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						10			3,0	17.
11	Enter the amount of line 10 to be: Credited to 2011 estimated tax		3	,017	Refun	ded ►	11_				0.
Pa	art VII-A Statements Regarding Activities										
1 a	f a During the tax year, did the foundation attempt to influence any national, state, or local legis	lation o	or d	lıd ıt part	cipate or	ntervene	ın			Yes	No
	any political campaign?								1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos	ses (se	e in	struction	is for defii	ntion)?			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	d соріє	es c	of any n	atenals _l	oublishe	d or			ĺ	
	distributed by the foundation in connection with the activities									ĺ	
C	Did the foundation file Form 1120-POL for this year?								1c		X
d	1 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the									ĺ	
	(1) On the foundation. ▶ \$ (2) On foundation managers	s. > \$	§			0.				ŀ	
е	e Enter the reimbursement (if any) paid by the foundation during the year for political expendi	iture tax	ıx ım	nposed o	n foundat	ion					
	managers. ► \$0.										
2	Has the foundation engaged in any activities that have not previously been reported to the If	RS?							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 i		nent	t, artıcles	of incorp	oration, c	r]			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change							<u> </u>	3		<u>X</u>
	a Did the foundation have unrelated business gross income of \$1,000 or more during the yea	ιs							4a	X	
b	o If "Yes," has it filed a tax return on Form 990-T for this year?							L	4b	X	<u> </u>
5	,,,,,,)						<u> </u>	5		X
_	If "Yes," attach the statement required by General Instruction T.									· i	
6		ther:								i	
	By language in the governing instrument, or									r	
	By state legislation that effectively amends the governing instrument so that no mandator	y direct	tion	is that co	nflict with	the state	law				
_	remain in the governing instrument?							<u> </u>	6	_X	<u> </u>
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.									Ī	
8a	a Enter the states to which the foundation reports or with which it is registered (see instruction	ns) 🕨	_							Ī	
	MA									ı	
b	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	πorney	y Ge	eneral (or	designate	?)					
^	of each state as required by General Instruction G? If "No," attach explanation	-4 · 44	10.40	26.2702	40.404.545	\ .		-	8b	<u> X</u>	
9	Is the foundation claiming status as a private operating foundation within the meaning of services 2010 or the tayable way beginning in 2010 (see protructions for Part VIVO). (# IVO) if a) for cale	noar			Ī	
40	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," c							\vdash	9		- A
ıU	Did any persons become substantial contributors during the tax year? If "Yes " attach a schedu	ile listing	g the	er names a	nd address	es			10 000	-PE	(2010)
								LOHU :	ンプリ		,ZU IU)

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Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	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 (sectio	n 4945(e))?	Y6	es X No				
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,							
any voter registration drive?		Y6	es X No				
(3) Provide a grant to an individual for travel, study, or other similar purposes	37		es X No				
(4) Provide a grant to an organization other than a charitable, etc., organization							
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 f						
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 un	der the exceptions described i						
section 53.4945 or in a current notice regarding disaster assistance (see instru	·		N/A	5 b			
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		ined					
expenditure responsibility for the grant?		I/A □ Y€	es 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							
a personal benefit contract?	E-2 b. e		es X No	,			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		i i	Sb X			
If "Yes" to 6b, file Form 8870	Jordonal Denent Contract		<u> </u>	/W / Zh			
7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?		es X No				
b If "Yes," did the foundation receive any proceeds or have any net income attrib		TE		7b			
Information About Officers Directors Truck		nagers Highly					
Part VIII Paid Employees, and Contractors	, i varidativii Ma	agoro, mymi	,				
List all officers, directors, trustees, foundation managers and their	compensation.			•			
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense			
(a) Name and address	hours per week devoted to position	(If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other allowances			
G. GORDON BELL	TRUSTEE	enter -0-)	compensation	anowanics			
511 WASHINGTON ST. #2505	ITTOSIEE						
SAN FRANCISCO, CA 94111	0.25	0.	0.	0.			
GWENDOLYN K. BELL	TRUSTEE	0.	0.	<u> </u>			
	TYOSIEE						
	0.25		, ,	^			
	· • · · · · · · · · · · · · · · · · · ·	0.	0.	0.			
BRIGHAM R. BELL	TRUSTEE						
1215 LINCOLN AVENUE	1 0 05			^			
LOUISVILLE, CO 80027	0.25	0.	0.	0.			
LAURA R. BELL	TRUSTEE						
269 ROUTE 206	1 0 05			•			
HILLSBOROUGH, NJ 08844	0.25	O.	0.	0.			
2 Compensation of five highest-paid employees (other than those inc	1	enter "NONE."	(d) Contributions to	(a) Evnanca			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other			
	devoted to position	, , ,	compensation	allowances			
NONE	-						
		 					
	4						
		-					
	4						
Total number of other employees paid over \$50,000			>	0			
		· · · · · · · · · · · · · · · · · · ·	Eorm C	90-PF (2010)			

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
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	(-)	
		-
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities	•	0
	-	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expe	nses
1 N/A	+	
Ι Α/Α	4	
	4	
0	+	
2	4	
	4	
	+	
3	4	
	4	
4	4	
	4	
	<u> </u>	
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.	Amo	unt
1 N/A	_	
	_}	
2		
	1	
	1	
All other program-related investments. See instructions.	1	
3		
	1	
	1	
Total. Add lines 1 through 3		0.
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P	art X Minimum Investment Return (All domestic foundations m	nust c	omplete this p	art Foreign foui	ndations, s	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable	e. etc	Durposes:			
a	Average monthly fair market value of securities	o, o.o.,	pa. passa.		1a	5,364,674.
b	Average of monthly cash balances				1b	511,167.
C	Fair market value of all other assets				1c	0.
d	Total (add lines 1a, b, and c)				1d	5,875,841.
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	5,875,841.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount,	see in	structions)		4	88,138.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on	Part \	/, line 4		5	5,787,703.
6	Minimum investment return. Enter 5% of line 5				6	289,385.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and foreign organizations check here and do not complete this part.)		i) private operat	ing foundations ar	id certain	
1	Minimum investment return from Part X, line 6				1	289,385.
2a	Tax on investment income for 2010 from Part VI, line 5	2a		4,889.		
b	Income tax for 2010. (This does not include the tax from Part VI.)	2b				
C	Add lines 2a and 2b				2c	4,889.
3	Distributable amount before adjustments. Subtract line 2c from line 1				3	284,496.
4	Recoveries of amounts treated as qualifying distributions				4	0.
5	Add lines 3 and 4				5	284,496.
6	Deduction from distributable amount (see instructions)				6	0.
<u>7</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part	XIII, lır	ne 1	<u> </u>	7	284,496.
P	art XII Qualifying Distributions (see instructions)					
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purp	oses:			_	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26				1a	172,900.
b	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 charitab	le, etc	., purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the:					
a	Suitability test (prior IRS approval required)				3a	
b	Cash distribution test (attach the required schedule)				3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, an	nd Part	XIII, line 4		4	172,900.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investigations.	stment	t			
	income. Enter 1% of Part I, line 27b				5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4				6	172,900.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years w		طف طبید مصنفمانیمان	, 	undifica for i	

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,		-		
line 7				284,496.
2 Undistributed income, if any, as of the end of 2010	-			
a Enter amount for 2009 only			86,400.	
b Total for prior years:				_
,,		0.		
3 Excess distributions carryover, if any, to 2010:				
a From 2005				
b From 2006				
c From 2007				
d From 2008				
e From 2009				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2010 from				
Part XII, line 4: ► \$ 172,900.			06 400	
a Applied to 2009, but not more than line 2a			86,400.	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)		U•		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2010 distributable amount				96 500
e Remaining amount distributed out of corpus	0.	~		86,500.
5 Excess distributions carryover applied to 2010	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))	0.			· ·
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
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			<u> </u>	, ,,,
amount - see instructions		0.		
e Undistributed income for 2009. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				<u> 197,996.</u>
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 2005				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2011 Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9: a Excess from 2006				
b Excess from 2007				
c Excess from 2008				
d Excess from 2009				
e Excess from 2010				
\$ 25555				F 000 DE (0040)

Form 990-PF (2010) BELL FA	MILY FOUNDA	TION	 		71029 Page 10
Part XIV Private Operating F			II-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective fo	•	•	▶ ∟		
b Check box to indicate whether the found		ng foundation described		4942(j)(3) or49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(1) 0000	Prior 3 years	1 (0.0007	
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for					
each year listed				ļ	
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 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:					7
 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	n had \$5,000 or me	ore in assets
at any time during t	he year-see the i	nstructions.)			
1 Information Regarding Foundation a List any managers of the foundation wh	•	than 2% of the total con	tributions received by the	e foundation before the clo	se of any tax
year (but only if they have contributed n	nore than \$5,000). (See s	ection 507(d)(2).)			,
C. GORDON BELL					
b List any managers of the foundation wh other entity) of which the foundation has	o own 10% or more of th s a 10% or greater interes	e stock of a corporation st.	(or an equally large port	on of the ownership of a p	artnership or
NONE					
2 Information Regarding Contribution Check here ► X if the foundation of				not accent upsolicited regi	usets for funds. If
the foundation makes gifts, grants, etc.	(see instructions) to indiv	iduals or organizations i	inder other conditions, c	omplete items 2a. b. c. and	i d.
a The name, address, and telephone num					
b The form in which applications should b	e submitted and informat	ion and materials they s	hould include:		
· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	and materials tiley S	moute molecus.		
c Any submission deadlines:					·
d Any restrictions or limitations on awards	s, such as by geographica	il areas, charitable fields,	kinds of institutions, or	other factors:	

023601 12-07-10

Tare XV Supplementary information	(continued)			
3 Grants and Contributions Paid During the Ye	ear or Approved for Future	Payment		
Recipient	If recipient is an individual,		Durage of great or	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
	:			
SEE STATEMENT 11				160 100
Total b Approved for future payment			▶ 3a	168,100.
5 Approved for fatare payment				
NONE				
Total	<u> </u>		▶ 3b	0.

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

Enter gross amounts unless otherwise indicated.	Unrelated	business income		ded by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a					<u> </u>
b					<u>.</u>
C					
d	-		-		
e					
f	ļ				
g Fees and contracts from government agencies		·	-		
2 Membership dues and assessments					-
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	128,155.	
5 Net rental income or (loss) from real estate:					···
a Debt-financed property		1 11 11 11 11 11			
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income			14	1,251.	
8 Gain or (loss) from sales of assets other than inventory			18	153,319.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a UBTI INCOME	900099	3,496.			
b UBTI LOSSES	900099	3,496. <3,496.	>	-	
C					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		282,725.	0
13 Total Add line 12, columns (b), (d), and (e)				13	282,725
(See worksheet in line 13 instructions to verify calculations.)					

Part XVI-B	Relationship of Activities to	the Accomplishment of	Exempt Purposes
------------	-------------------------------	-----------------------	------------------------

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).
-	
000804	

		FAMILY FOUNDATI			04-6//1			ige 13
Part >		egarding Transfers To a	and Transactions a	ind Relations	nips With Nonchar	itable	•	
4 0.4	Exempt Organ				5044.5.7		V	NI-
		rectly engage in any of the following			on 501(c) of		Yes	NO
)(3) organizations) or in section 52 ation to a noncharitable exempt or		izations?				
	, ,	ation to a noncharitable exempt of	ganization of.			1		v
	Cash Other assets					1a(1)		X
	er transactions:					1a(2)		
_	Sales of assets to a noncharital	hle evernt organization				1b(1)		Х
٠.,		ncharitable exempt organization				1b(2)		X
	Rental of facilities, equipment,					1b(3)		X
٠,	Reimbursement arrangements					1b(4)		X
	Loans or loan guarantees					1b(5)		X
		mbership or fundraising solicitation	ons			1b(6)		X
		iling lists, other assets, or paid em				1c		X
		"Yes," complete the following sche		vavs show the fair m	arket value of the goods, of	-	ets.	
		oundation. If the foundation receiv					,	
		other assets, or services received.		•	,			
a) Line no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description	of transfers, transactions, and sl	naring arr	angeme	nts
		N/A						
_								
							•	
					· · ·			
	1							
2a Is th	e foundation directly or indirect	tly affiliated with, or related to, one	or more tax-exempt organi	zations described		_		_
		r than section 501(c)(3)) or in sec	tion 527?			Yes	LX	No
b If "Y	es," complete the following scho		1					
	(a) Name of org	anization	(b) Type of organization	(c) Description of relationsh	<u>p</u>		
	N/A							
	Under penalties of person, I declare	e that I have examined this return, includ	ing accompanying schedules and	d etatemente, and to the	heet of my knowledge and helic	of it is to	10. 00770	
Sign		rer (other than taxpayer or fiduciary) is b				n, n 15 u u	ie, come	UI,
Here	. (()	0 (2,80	16/15	111	Trustee			
	Signature of officer or tru	Istee	Date		tle			
	Print/Type preparer's na				Check X If PTIN			
	1 mo typo properor 3 no				self- employed			
Paid	CAROLYN R.	STATITE COLO	Kink & tall	5/10/11				
Prepa		LL ADVISORS LLC	0	· · ·	Firm's EIN ▶			
Use C		NAGOG PARK SUI			THIN SERVE			
		TON, MA 01720			Phone no. 978-2	96-	331	8
	- 110	,			1			_

Department of the Treasury

Passive Activity Loss Limitations

► See separate instructions. ▶ Attach to Form 1040 or Form 1041. OMB No 1545-1008

2010

Attachment Sequence No 88

Internal Revenue Service (99) Identifying number Name(s) shown on return **BELL FAMILY FOUNDATION** 04-6771029 2010 Passive Activity Loss Caution: Complete Worksheets 1, 2, and 3 on page 2 before completing Part I. Rental Real Estate Activities With Active Participation (For the definition of active participation, see Special Allowance for Rental Real Estate Activities on page 3 of the instructions.) 1a Activities with net income (enter the amount from Worksheet 1, **b** Activities with net loss (enter the amount from Worksheet 1, column 1b Prior years unallowed losses (enter the amount from Worksheet 1. 1c d Combine lines 1a, 1b, and 1c . 1d Commercial Revitalization Deductions From Rental Real Estate Activities 2a Commercial revitalization deductions from Worksheet 2, column (a) . 2a | b Prior year unallowed commercial revitalization deductions from 2b c Add lines 2a and 2b 2c **All Other Passive Activities** 3a Activities with net income (enter the amount from Worksheet 3, 3,496 column (a)) За **b** Activities with net loss (enter the amount from Worksheet 3, column 3b 35,787 14. c Prior years unallowed losses (enter the amount from Worksheet 3, d Combine lines 3a, 3b, and 3c **3d** (32, 291)Combine lines 1d, 2c, and 3d, if the result is net income or zero, all losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c. Do not complete Form 8582. (32.291)If line 4 is a loss and: Line 1d is a loss, go to Part II. • Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III. • Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15. Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II or Part III. Instead, go to line 15 Special Allowance for Rental Real Estate Activities With Active Participation Part II Note: Enter all numbers in Part II as positive amounts. See page 9 of the instructions for an example. 5 Enter the **smaller** of the loss on line 1d or the loss on line 4 Enter \$150,000. If married filing separately, see page 9 6 6 Enter modified adjusted gross income, but not less than zero (see page 9) 7 Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8. 8 8 Multiply line 8 by 50% (5) Do not enter more than \$25,000. If married filing separately, see page 9 9 10 If line 2c is a loss, go to Part III. Otherwise, go to line 15. Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities Note: Enter all numbers in Part III as positive amounts. See the example for Part II on page 9 of the instructions. 11 Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions 12 12 13 13 14 Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13 14

Add the income, if any, on lines 1a and 3a and enter the total

the instructions to find out how to report the losses on your tax return

Total losses allowed from all passive activities for 2010. Add lines 10, 14, and 15 See page 11 of

Total Losses Allowed

Part IV

15

16

3,496

Form **8582** (2010)

Caution: The worksheets must be filed v	with your tax retu	rn. K	eep a	copy	for your	record	S.			
Worksheet 1-For Form 8582, Lines 1										
Name of activity	Currei				Prior years		s Overall gain or lo		in or loss	
Name of activity	(a) Net income (line 1a)			(c) Unallowed loss (line 1c)		(d) Gain			(e) Loss	
							ļ			
							ļ			
							ļ			
							ļ			
Total. Enter on Form 8582, lines 1a, 1b, and 1c ▶										" "
Worksheet 2-For Form 8582, Lines 2				ınstı						
Name of activity	(a) Current deductions (t year (line 2	r 2a)	unall	(b) Pri owed ded	or year uctions	(line 2b)	((c) C	Overall loss
		•								
Total. Enter on Form 8582, lines 2a and 2b ▶									т. Ф. 1	
Worksheet 3-For Form 8582, Lines 3	a, 3b, and 3c (S	ee pa	age 8 c	f the	ınstructı	ons.)				
Name of activity	Curre	nt yea	ar	-	Prior	years		Overa	ll ga	in or loss
wante of activity	(a) Net income (b) Net loss (line 3a) (line 3b)			(c) Unallowed loss (line 3c)		(d) Gain			(e) Loss	
MAGELLAN MIDSTREAM PARTNERS LP	3,496							3,	496	
ENERGY TRANSFER PARTNERS LP			(4	1,676)						(4,676)
ENTERPRISE PRODUCTS PARTNERS LP			(9	,628)						(9,628)
KINDER MORGAN ENERGY PARTNERS LP	ļ		(19	,433)						(19,433)
NUSTAR ENERGY LP			(2	2,050)			<u> </u>			(2,050)
Total. Enter on Form 8582, lines 3a, 3b, and 3c ▶	3,496			5,787)						4
Worksheet 4—Use this worksheet if a	n amount is sho	wn c	n For	n 85	82, line 1	0 or 14	(See p	age 9	of t	he instructions.)
Name of activity	Form or schedule and line number to be reported on (see instructions)	((a) Los:	5	(b) Я	atio		Specia wance		(d) Subtract column (c) from column (a)
								· - · · - ·		
Total	<u> </u>				1.0	00				
Worksheet 5-Allocation of Unallowe	d Losses (See p	age 1	10 of th	ne ins	structions	s.)	1			
Name of activity	Form or sched and line numb	ule er		(a) Lo) Ratio		(c)	Unallowed loss
	to be reported (see instructio			-			-			
ENERGY TRANSFER PARTNERS LP	Form 990-T Line5		<u> </u>		(4,676)			.13		(4,222)
ENTERPRISE PRODUCTS PARTNERS LP	Form 990-T Line5				(9,628)			.27		(8,684)
KINDER MORGAN ENERGY PARTNERS LP	Form 990-T Line5		ļ		(19,433)	.54				(17,545)
NUSTAR ENERGY LP	Form 990-T Line5		ļ. <u></u> .		(2,050)			.06		(1,840)
Total	<u> </u>				(25 707)	.	1.00			(22 201)

Worksheet 6-Allowed Losses (See p	oage	10 of the ins	tructio	ns.)			. <u></u> -	9-
Name of activity		Form or sch and line num be reported of instruction	ber to on (see	(a) l	Loss	(b) Un	allowed loss	(c) Allowed loss
ENERGY TRANSFER PARTNERS LP		Form 990-T Lii	ne5		(4,676)		(4,222)	(454)
ENTERPRISE PRODUCTS PARTNERS LP		Form 990-T Lis	ne5		(9,628)		(8,684)	(944)
KINDER MORGAN ENERGY PARTNERS LP		Form 990-T Lis			(19,433)		(17,545)	(1,888)
NUSTAR ENERGY LP		Form 990-T Lis	ne5		(2,050)		(1,840)	(210)
Total				ore Forms	(35,787) s or Sched		(32,291) See page 10 o	(3,496) f the instructions.)
Name of activity:		(a)		(b)	(c) Ra	tio	(d) Unallowe loss	(e) Allowed loss
Form or schedule and line number to be reported on (see instructions): 1a Net loss plus prior year unallowed loss from form or schedule . b Net income from form or schedule . c Subtract line 1b from line 1a If zero compared to be reported on (see instructions): 1a Net loss plus prior year unallowed loss from form or schedule . b Net income from form or schedule . b Net income from form or schedule . c Subtract line 1b from line 1a If zero compared to be reported on (see instructions): 1a Net loss plus prior year unallowed loss from form or schedule . b Net income from form or schedule . c Subtract line 1b from line 1a If zero compared to the schedule . c Subtract line 1b from line 1a If zero compared to the schedule . c Subtract line 1b from line 1a If zero compared to the schedule . c Subtract line 1b from line 1a If zero compared to the schedule . c Subtract line 1b from line 1a If zero compared to the schedule . c Subtract line 1b from line 1a If zero compared to the schedule . c Subtract line 1b from line 1a If zero compared to the schedule . c Subtract line 1b from line 1a If zero compared to the schedule . c Subtract line 1b from line 1a If zero compared to the schedule . c Subtract line 1b from line 1a If zero compared to the schedule . c Subtract line 1b from line 1a If zero compared to the schedule . c Subtract line 1b from line 1a If zero compared to the schedule . c Subtract line 1b from line 1a If zero compared to the sched		s, enter -0- ▶	72				· •	**
c Subtract line 1b from line 1a. If zero of								
Form or schedule and line number to be reported on (see instructions): 1a Net loss plus prior year unallowed		*			, »\		,	*** \$
loss from form or schedule . b Net income from form or schedule b						·		
c Subtract line 1b from line 1a If zero c	or less	s, enter -0- ▶						
Total		•			1.00)		

Form **8582** (2010)

FORM 990-PF DIVIDENDS AND	INTEREST FROM S	SECURITIES	STATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
ENERGY TRANSFER LP - DIVIDENDS	23.	0.	23.
ENERGY TRANSFER LP - INTEREST ENTERPRISE PRODUCTS LP -	20.	0.	20.
INTEREST KINDER MORGAN ENERGY LP -	45.	0.	45.
DIVIDENDS KINDER MORGAN ENERGY LP -	128.	0.	128.
INTEREST MAGELLAN MIDSTREAM LP -	319.	0.	319.
DIVIDENDS	3.	0.	3.
MAGELLAN MIDSTREAM LP - INTEREST	1.	0.	1.
NUSTAR ENERGY LP - DIVIDENDS	49.	0.	49.
NUSTAR ENERGY LP - INTEREST STATE STREET BANK & TRUST -	48.	0.	48.
DIVIDENDS STATE STREET BANK & TRUST -	71,850.	198.	71,652.
INTEREST	55,867.	0.	55,867.
TOTAL TO FM 990-PF, PART I, LN 4	128,353.	198.	128,155.
FORM 990-PF O	THER INCOME		STATEMENT 2
DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	
OTHER INCOME RETURN OF CAPITAL		20. 120	•
UBTI INCOME UBTI LOSSES	3,49 <3,49		
TOTAL TO FORM 990-PF, PART I, LINE	11 1,25	51. 1,251	•

FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
ACCOUNTING FEES	4,800.	0.		4,800.		
TO FORM 990-PF, PG 1, LN 16B	4,800.	0.		4,800.		
FORM 990-PF C	THER PROFES	SIONAL FEES	S'	FATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
MANAGEMENT FEES - MOODY LYNN CUSTODY FEES - MOODY LYNN	36,166. 1,556.			0.		
TO FORM 990-PF, PG 1, LN 16C	37,722.	37,722.		0.		
FORM 990-PF	TAX	ES	S'	FATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
FOREIGN TAXES PAID FEDERAL TAXES	359. 1,700.	359.		0.		
TO FORM 990-PF, PG 1, LN 18	2,059.	359.		0.		

FORM 990-PF	OTHER E	XPENSES		STATEMENT	6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
NONDEDUCTIBLE EXPENSE - RECONCILING ITEMS CHARITABLE CONTRIBUTIONS - PARTNERSHIP K-1S	148,579.		0.			0.
SUSPENDED PASSIVE LOSSES	32,291.		0.			0.
TO FORM 990-PF, PG 1, LN 23	180,910.		0.			0.
DESCRIPTION	U.S GOV'		вос	OK VALUE	FAIR MARKET	
US GOVT OBLIGATIONS	x			810,710.	838,7	
TOTAL U.S. GOVERNMENT OBLIGAT	TIONS			810,710.	838,7	16.
TOTAL STATE AND MUNICIPAL GOV	FRNMENT OBL	IGATIONS				
TOTAL TO FORM 990-PF, PART II	, LINE 10A	:		810,710.	838,7	16.
FORM 990-PF	CORPORATI	E STOCK			STATEMENT	8
DESCRIPTION			вос	K VALUE	FAIR MARKE	T
EQUITY INVESTMENTS		•	2	,539,706.	2,955,2	75.
TOTAL TO FORM 990-PF, PART II	I. LINE 10B	•		2,539,706.	2,955,2	—— 75

FORM 990-PF C	CORPORATE BONDS		STATEMENT	9
DESCRIPTION		BOOK VALUE	FAIR MARKE VALUE	т
CORPORATE BONDS		1,242,712.	1,301,4	08.
TOTAL TO FORM 990-PF, PART II, LI	NE 10C	1,242,712.	1,301,4	.80
FORM 990-PF	OTHER ASSETS		STATEMENT	10
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKE VALUE	T
OID INTEREST RECEIVABLE	12,466.	0.		0.
TO FORM 990-PF, PART II, LINE 15	12,466.	0.		0.

FORM 990-PF

STATEMENT 11

	DURING THE YEAR	STAT	EWENT. 11
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT
ALEXANDER DAWSON SCHOOL 10455 DAWSON DRIVE CAMBRIDGE, MA 02140		PUBLIC CHARITY	3,000.
AMERICAN ACADEMY OF ARTS & SCIENCES 136 IRVING STREET CAMBRIDGE, MA 02138	UNRESTRICTED	PUBLIC CHARITY	1,000.
ARIZONA STATE MUSEUM P.O. BOX 210026 TUCSON, AZ 857210026	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	500.
ARTHRITIS FOUNDATION 2280 S. ALBION DENVER, CO 80222	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	500.
BELMONT HILL SCHOOL 350 PROSPECT STREET BELMONT, MA 02478		PUBLIC CHARITY	250.
BOY SCOUTS OF AMERICA 222 COLUMBIA TURNPIKE FLORHAM PARK, NJ 07932	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	500.
CALGARY ARTS SUMMER SCHOOL 228 PARKSIDEWAY SE CALGARY, ALBERTA, CANADA T2J3Z4	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	750.

NONE

UNRESTRICTED

CONTRIBUTION

GRANTS AND CONTRIBUTIONS

PUBLIC

CHARITY

CAMBRIDGE SCHOOL OF WESTON

45 GEORGIAN ROAD WESTON, MA

02493

500.

BELL FAMILY FOUNDATION			04-6771029
CAPE MAY JAZZ FESTIVAL P.O. BOX 2065 CAPE MAY, NJ 08204	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	500.
CENTRAL JERSEY SYMPHONY ORCHESTRA P.O. BOX 3300 NORTH BRANCH, NJ 08876	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	750.
CLARK FUND FOR SCHOOL OF GEOGRAPHY 950 MAIN STREET WORCESTER, MA 01610	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	500.
COLLEGE AVENUE GYMNASIUM 130 COLLEGE AVE NEW BRUNSWICK, NJ 08903	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	250.
COMPUTER HISTORY MUSEUM 1401 N. SHORELINE BLVD. MOUNTAIN VIEW, CA 94041	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	64,000.
CRAWFORD HOUSE P.O. BOX 255 SKILLMAN, NJ 08858	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	500.
DELANCEY STREET FOUNDATION 600 EMBARCADERO SAN FRANCISCO, CA 94107	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	3,500.
DENVER CENTER FOR PERFORMING ARTS 1101 13TH ST, DENVER, CO 80204	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	250.
FULBRIGHT ACADEMY P.O. BOX CC-284 CAPE ELIZABETH, ME 04107	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	1,500.
HILLSBOROUGH HIGH SCHOOL 466 RAIDER BOULEVARD	NONE UNRESTRICTED	PUBLIC CHARITY	500.

CONTRIBUTION

HILLSBOROUGH, NJ 08844

BELL FAMILY FOUNDATION			04-6771029
HMA HSA 260 TRIANGLE ROAD HILLSBOROUGH, NJ 08844	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	500.
KUVO P.O. BOX 2040 DENVER, CO 80211	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	250.
L&C BELL SCHOLARSHIP FUND 2201 SOMERSET KIRKSVILLE, MO 63501	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	12,000.
MADD 511 JOHN CARPENTER FRWY, SUITE 700 IRVING, TX 750628187	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	250.
MASON GROSS SCHOOL OF ARTS 33 LIVINGSTON AVE. NEW BRUNSWICK, NJ 08901	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	750.
MASSACHUSETTS INSTITUTE OF TECHNOLOGY 77 MASSACHUSETTS AVENUE CAMBRIDGE, MA 02139	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	2,500.
MEALS ON WHEELS 1375 FAIRFAX AVE. SAN FRANCISCO, CA 94124	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	500.
MONTGOMERY UNITED METHODIST CHURCH - GENERAL FUND 117 SUNSET ROAD BELLE MEAD, NJ 08502	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	6,750.
NATIONAL ACADEMY OF SCIENCE 500 FIFTH STREET NW, LOCKBOX 285 WASHINGTON, DC 20001	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	2,500.
NATIONAL ACADEMY OF ENGINEERING FUND 500 FIFTH STREET NW, LOCKBOX 285 WASHINGTON, DC 20001	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	2,500.

BELL FAMILY FOUNDATION			04-6771029
NATIONAL SCIENCE & TECH. MEDALS FDN 1818 N STREET NW, SUITE 600 WASHINGTON, DC 20036	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	2,000.
NEW ENGLAND CONSERVATORY OF MUSIC ANNUAL FUND 290 HUNTINGTON AVENUE BOSTON, MA 02115	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	750.
OPERA COLORADO 695 SOUTH COLORADO BLVD, SUITE 20 DENVER, CO 80246	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	250.
ROCKY MOUNTAIN PBS 1089 BANNOCK STREET DENVER, CO 80204	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	250.
SAN FRANCISCO FOOD BANK 900 PENNSYLVANIA AVE SAN FRANCISCO, CA 94107	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	2,000.
STANFORD MEDICAL CENTER SUITE H1401300 PASTEUR DRIVE STANFORD, CA 943055625	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	15,000.
STARLIGHT CHORALE 115 SUNSET ROAD BELLE MEAD, NJ 08502	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	750.
THE JIM GRAY CHAIR, UNIVERSITY OF CA BERKELEY COLLEGE OF ENGINEERING, UC BERKELEY BERKELEY, CA 94720	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	33,000.
UNIVERSITY OF COLORADO CAMPUS BOX 422 BOULDER, CO 80309	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	1,500.
UNIVERSITY OF COLORADO FOUNDATION FOR CS DEPT CAMPUS BOX 422 BOULDER, CA	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	3,000.

80309

BELL FAMILY FOUNDATION			04-6771029
WIKIMEDIA FOUNDATION INC. P.O.BOX 78350 SAN FRANCISCO, CA 94107	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	200.
WNYC ONE CENTER STREET, 24TH FLOOR NEW YORK, NY 10007	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	250.
ALZHEIMER'S ASSOCIATION 789 SHERMAN STREET, SUITE 500 DENVER, CO 80203-3532	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	500.
SOCIETY OF PRESERVATION OF GREEK BETA CHAPTER OF THETA CHI CAMBRIDGE, MA 02142-0009	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	400.
STORM SOFTBALL 601 MONSON BETHANY, MO 64424	NONE UNRESTRICTED CONTRIBUTION	PUBLIC CHARITY	500.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A		168,100.

Form **8868**

(Rev. January 2011)

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

• If you a	are filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box					
• If you a	are filing for an Additional (Not Automatic) 3-Month Ex	tension,	complete only Part II (on page 2 of this	form)	ı			
Do not c	omplete Part II unless you have already been granted a	an automa	atic 3-month extension on a previously fi	led Fo	rm 8868.			
Electroni	ic filing (e-file). You can electronically file Form 8868 if	you need	a 3-month automatic extension of time t	o file (6 months for a corp	oration		
required t	to file Form 990-T), or an additional (not automatic) 3-mo	nth exten	sion of time. You can electronically file F	orm 8	868 to request an e	xtension		
of time to	file any of the forms listed in Part I or Part II with the ex	ception of	f Form 8870, Information Return for Trar	sfers.	Associated With Ce	ertain		
Personal	Benefit Contracts, which must be sent to the IRS in page	er format	(see instructions). For more details on t	he ele	ctronic filing of this	form,		
visit www irs gov/efile and click on e-file for Charities & Nonprofits								
Part I	Automatic 3-Month Extension of Time	Only su	ubmit original (no copies needed)					
A corpora	ation required to file Form 990-T and requesting an autor			nplete				
Part I only	y	_				. 🗀		
	corporations (including 1120-C filers), partnerships, REMome tax returns	ICs, and t	trusts must use Form 7004 to request ar	exter	nsion of time			
Type or	Type or Name of exempt organization Em					mployer identification number		
print	BELL FAMILY FOUNDATION				04-6771029			
File by the due date for	Number, street, and room or suite no. If a P.O. box, s	ee instruc	ctions					
filing your	611 WASHINGTON STREET, NO.	2505						
return See instructions	City, town or post office, state, and ZIP code. For a fo			-				
	SAN FRANCISCO, CA 94111	-						
Enter the	Return code for the return that this application is for (file	e a separa	ate application for each return)			0 4		
Applicati	on	Return	Application			Return		
Is For		Code	Is For			Code		
Form 990		01	Form 990-T (corporation)			07		
Form 990		02	Form 1041-A			08		
Form 990		03	Form 4720			09		
Form 990		04	Form 5227			10		
	-T (sec 401(a) or 408(a) trust)	05	Form 6069			11		
	-T (trust other than above)	06	Form 8870			12		
STALL ADVISORS LLC								
• The bo	ooks are in the care of > 30 NAGOG PARK,		E 220 - ACTON, MA 01	720	J			
	none No ▶ 978-296-3318		FAX No ▶ 978-296-3318					
	organization does not have an office or place of business	s in the Ur				. 🔲		
	s for a Group Return, enter the organization's four digit			s is fo	r the whole group, c	check this		
box ▶ [If it is for part of the group, check this box	1	ach a list with the names and EINs of all					
1 I re	quest an automatic 3-month (6 months for a corporation							
	AUGUST 15, 2011 , to file the exemp	t organiza	ation return for the organization named a	bove	The extension			
ıs fo	or the organization's return for	_	-					
► X calendar year 2010 or								
▶[tax year beginning , and ending							
			 -		_			
2 If th	ne tax year entered in line 1 is for less than 12 months, c Change in accounting period	heck reas	on Initial return Fina	ıl retur	'n			
3a If th	nis application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069 e	enter the tentative tax less any					
						7,906.		
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and						,,,,,,,,		
	• • • • • • • • • • • • • • • • • • • •	,		3b	s 1	.,906.		
	using EFTPS (Electronic Federal Tax Payment System)	•	· ·	3c	s 6	5,000.		
	If you are going to make an electronic fund withdrawal v							
	, and the same and							