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Form **990-PF**

Department of the Treasury

Return of Private Foundation

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

OMB No 1545-0052

_		venue Service Note. The loundation may	oc abic to use a copy of this	Total in to satisfy state repo	tang requirements.	
For	cale	ndar year 2010, or tax year beginning		, and ending		
G	Checl	call that apply: Initial return		ormer public charity	Final retur	n
		Amended return	Address chan	ge	Name change	
Na	me o	f foundation			A Employer identification	n number
		GARDNER FAMILY CHARIT			20-2003567	<u> </u>
Nu	nber a	and street (or P.O. box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
		354 MERRIMACK STREET			978-687-23	321
Cıt	y or t	own, state, and ZIP code			C If exemption application is a	
		LAWRENCE, MA 01843			D 1 Foreign organization	s, check here
H_ (_	type of organization: X Section 501(c)(3) ex			Foreign organizations m check here and attach c	eeting the 85% test, omputation
	_] <u>S</u> €	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ation	E If private foundation sta	itus was terminated
1 Fa	air ma	arket value of all assets at end of year J Accounti	ng method: X Cash	Accrual	under section 507(b)(1	
(f	rom i		her (specify)		F If the foundation is in a	60-month termination
	\$_	411637 . (Part I, colu	mn (d) must be on cash i	basis.)	under section 507(b)(1)(B), check here
Pa	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
		necessarily equal the amounts in column (a)	expenses per books	income	income	(cash basis only)
	1	Contributions, gifts, grants, etc., received	250000.		N/A	
	2	Check In the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments	159.	159.		STATEMENT 1
	4	Dividends and interest from securities	34307.	34307.		STATEMENT 2
	5a	Gross rents				
	b	Net rental income or (loss)		ED.		
ø)	6a	Net gain or (loss) from sale of assets not on line 10	Q12044\	101		
Revenue	b	Gross sales price for all assets on line 6a 174321.		101		
eve	7	Capital gain net income (from Part IV, line 2)		2011 101 0.		
ď	8	Net short-term capital gain	161 JAF 2	, JRI		
	9	Income modifications	(0)	111		
	10a	Gross sales less returns and allowances	OGD			
	Ь	Less Cost of goods sold				
	С	Gross profit or (loss)			· •	
	11	Other income	20320.	20320.		STATEMENT 3
2011	12	Total. Add lines 1 through 11	292742.	54786.		
2	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
N	14	Other employee salaries and wages				
<u>_</u> _	15	Pension plans, employee benefits				
Ties Ses	16a	Legal fees				
Ę		Accounting fees				
TX.	c	Other professional fees				
Z 9	17	Interest				
Operating and Administative Expen	18	Taxes STMT 4	797.	0.		0.
Si	19	Depreciation and depletion				
Ę	20	Оссирапсу				
Ad	21	Travel, conferences, and meetings				
Pu	22	Printing and publications				
ig a	23	Other expenses STMT 5	10195.	0.		0.
atir	1	Total operating and administrative				
per		expenses. Add lines 13 through 23	10992.	0.		0.
ō	25	Contributions, gifts, grants paid	111443.			111443.
		Total expenses and disbursements.				
_	L	Add lines 24 and 25	122435.	0.		111443.
	27	Subtract line 26 from line 12:				
	ł	Excess of revenue over expenses and disbursements	170307.			
	l	Net investment income (if negative, enter -0-)		54786.		
_	C	Adjusted net income (if negative, enter -0-)			N/A	
0235	01	LUA For Pagaruary Paduation Ast Nation and	h - !			Form 990-PF (2010)

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30	1 1	
	(must agree with end-of-year figure reported on prior year's return)	1	1856625.
2	Enter amount from Part I, line 27a	2	170307.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	2026932.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	2026932.

Form 990-PF (2010) GAR	DNER FAMILY (CHARITABLE	FOUNDAT	ION		2	0-200	3567_	Page 3
<u> </u>	and Losses for Tax		t income	(h) How a	acquired	() D-1-		(4) Da	45.5514
	ribe the kind(s) of property s arehouse; or common stock,			(b) How a P - Pur D - Do	chase	(c) Date (mo., c	acquired lay, yr.)		te sold lay, yr.)
	HED SCHEDULE	<u> </u>		D - D0i		VARI	OUS	VARI	OIIS
	HED SCHEDULE					VARI		VARI	
C C		<i></i>			-	<u> </u>		, , , , , , , , , , , , , , , , , , ,	<u> </u>
d									
<u>e</u>									
(e) Gross sales price	(f) Depreciation allows (or allowable)		st or other basis expense of sale				lain or (loss s (f) minus		
<u>a</u> 24873.			3303					<	<u>8157.</u>
b 149448.		· ·	15333	5.				<	3887.
C									
<u>d</u>									
e Complete only for assets shown	as ann is column (h) and ou	and by the foundation	2 02 12/21/60	 		0 /5)- (b)		
Complete only for assets snown					(I) col.	Gains (C k), but i	Col. (h) gain not less tha	minus n -0-) or	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any			Losses	(from col. ((h))	
a									8157.
b				<u> </u>					3887.
C			- 						<u> </u>
d									
e									
	∫ If gain, al	so enter in Part I, line	7) [
2 Capital gain net income or (net ca	pital loss) { If (loss),	enter -0- ın Part Í, lıne	7	<u>} 2</u>	<u> </u>			<1	<u> 2044.</u>
3 Net short-term capital gain or (los	ss) as defined in sections 122	22(5) and (6):							
If gain, also enter in Part I, line 8,	column (c).			}]	j		/-		
If (loss), enter -0- in Part I, line 8 Part V Qualification U	nder Section 4940(a) for Doduced	LToy on Not	<u> </u>	nont Inc		N/A		
——————————————————————————————————————			-			Oille			
(For optional use by domestic private	roungations subject to the s	section 4940(a) tax on	i net investment inc	ome.)					
If section 4940(d)(2) applies, leave th	ns part blank.								
Was the foundation liable for the sect	tion 4942 tay on the distribut	table amount of any w	ear in the hace neri	od?				Vec	X No
If "Yes," the foundation does not qual			•	ou					140
1 Enter the appropriate amount in e				 S.					
(a) Base period years		(b)		(c)			Distrib	(d) oution ratio	
Calendar year (or tax year beginning	ng in) Adjusted qualif	ying distributions	Net value of non	charitable	-use assets		(col. (b) div	ided by col.	(c))
2009		101210.			44051				<u>65548</u>
2008		99410.			<u> 38194</u>				<u> 57192</u>
2007		81860.			05632				<u>45336</u>
2006		48079.			32204				<u>42465</u>
2005		40218.		5	65165	•		. 0	<u>71162</u>
9. Total of line 4. adum - /-/								2	01702
2 Total of line 1, column (d)3 Average distribution ratio for the 5	Sugar back pariod doud- 4	no total on line 0 hu f	or by the symbol	of voore		2		• 4	<u>81703</u>
the foundation has been in exister		ie total on line 2 by 3,	or by the number of	n years		3		. 0	56341
the roundation has been in exister	ico ii icos tilan o years								<u> </u>
4 Enter the net value of noncharitab	le-use assets for 2010 from	Part X. line 5				4		210	7065.
		,	•			- ·			
5 Multiply line 4 by line 3						5		11	<u>8714.</u>
6 Enter 1% of net investment incom	ie (1% of Part I, line 27b)					6			548.
7 Add lines 5 and 6						7		11	<u>9262.</u>
8 Enter qualifying distributions from	·					8		11	<u>1443.</u>
If line 8 is equal to or greater than	line 7, check the box in Part	VI, line 1b, and comp	lete that part using	a 1% tax	rate.				
See the Part VI instructions.								orm 990-F	DE (2010)
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	n 990-PF (2010) GARDNER FAMILY CHARITABLE FOUNDATION 20-200	<u> 3567</u>		Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instr	uctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1%		10	<u>96.</u>
	of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
3	Add lines 1 and 2		10	96.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		<u> 1</u> 0	96.
6	Credits/Payments:			
а	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 712.			
b	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld 6d 6d			
7	Total credits and payments. Add lines 6a through 6d			<u> 12.</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8	<u>.</u>		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		3	84.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be: Credited to 2011 estimated tax ▶ Refunded ▶ 11			
Pa	rt VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	1		
	distributed by the foundation in connection with the activities.			
C	Did the foundation file Form 1120-POL for this year?	1c		X_
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ► \$ (2) On foundation managers. ► \$ 0.			Ì
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers. ► \$0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	<u> </u>	X
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or] .	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	 -	X
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	<u> </u>	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	_5_		X
_	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either;			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in the governing instrument?	6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year?	7	X	
	If "Yes," complete Part II, col. (c), and Part XV.			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
Ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
-	of each state as required by General Instruction G? If "No," attach explanation	8b	x	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	<u></u>		
	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV	_ 9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses STMT 8	10	Х	
		m gar		00101

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Part VII-B Statements Regarding Activities for Which	Form 4720 May Be	Required (contin	nued)	
. 5a During the year did the foundation pay or incur any amount to				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	. 🔲 Y	es X No	
• (2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indi	rectly,		
any voter registration drive?		Y	es X No	1 1
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y	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)?		Y	es 🗶 No	1 1
(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	1 1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described			
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 fi		aned		
expenditure responsibility for the grant?			es 🔲 No	
If "Yes," attach the statement required by Regulations section 53 494		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1 1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	• •			
a personal benefit contract?	pay premiums on		es X No))
·	organal hanafit contract?	, I	- 1	6b X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	iersonai beneni comiaci?		<u> </u>	6b X
If "Yes" to 6b, file Form 8870.	h - ll d		es X No	1 1
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y(76
b If Yes, did the foundation receive any proceeds or have any net income attributions.		annana Hiabb		7b_
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, roungation ivid	anagers, migni	y	
List all officers, directors, trustees, foundation managers and their	compensation.			
Elot dil officero, directoro, d'asteco, fouridation managero una treil	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	account, other
	to position	enter -0-)	compensation	allowances
		1	1	
				•
SEE STATEMENT 9		0.	0.	0.
		 	<u> </u>	
	<u> </u>	 		
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contabulance to	<u> </u>
(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	(c) compensation	compensation	allowances
NONE				
		<u> </u>		
				
		1	}	
Total number of other employees paid over \$50,000			D	0
			Form S	990-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	
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.	Expenses
1 N/A	
2	
3	_
4	
Part IX-B Summary of Program-Related Investments	
Describe the two largest program-related investments made by the foundation during the tax year on 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	O . Form 990-PF (2010)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, s	see instructions)
1,	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	_	
	Average monthly fair market value of securities	1a	1900532.
	Average of monthly cash balances	1b	238620.
	Fair market value of all other assets	1c	
	Total (add lines 1a, b, and c)	1d	2139152.
	Reduction claimed for blockage or other factors reported on lines 1a and		
٠	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	2139152.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	32087.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2107065.
6	Minimum investment return Enter 5% of line 5	6	105353.
=	Distributable Amount () And Amount () (Contract 0.00/1/2) and (1/5) are stored and additional and		1000001
LP	foreign organizations check here and do not complete this part.)	0 00/12/11	
1	Minimum investment return from Part X, line 6	1	105353.
2a			
b	Income tax for 2010. (This does not include the tax from Part VI.)	i	
C	Add lines 2a and 2b	2c	1096.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	104257.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	104257.
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	104257.
_			
	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	111443.
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:		
а		3a	
b		3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	111443.
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 _	O.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	111443.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q	ualifies for	
	4040(a) reduction of the in those veges		

'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,	00,500			
line 7			·	104257.
2 Undistributed income, if any, as of the end of 2010			•	
a Enter amount for 2009 only			0.	
b Total for prior years:				
3 Excess distributions carryover, if any, to 2010:		0.		
a From 2005				
b From 2006				
c From 2007				
d From 2008 13402.				
e From 2009 25033.				
f Total of lines 3a through e	38435.			
4 Qualifying distributions for 2010 from				
Part XII, line 4: ► \$ 111443.				
a Applied to 2009, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.		 .	
d Applied to 2010 distributable amount				104257.
e Remaining amount distributed out of corpus	7186.			
5 Excess distributions carryover applied to 2010 (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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	45621.			
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 2009. Subtract line		-		
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010. Subtract		j		
lines 4d and 5 from line 1. This amount must				_
be distributed in 2011				0.
7 Amounts treated as distributions out of		}		
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005	0			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	45621.	1		
10 Analysis of line 9:	#7071.			_
a Excess from 2006				
b Excess from 2007				
c Excess from 2008 13402.				
d Excess from 2009 25033.				
e Excess from 2010 7186.				
•				

		RITABLE FOU			003567 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part VI	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 2010, enter the date of	the ruling	▶		
b Check box to indicate whether the found	lation is a private operati	ng foundation described	in section	4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years]
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					
b 85% of line 2a			-		
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					
alternative test relied upon:					
a "Assets" alternative test - enter:(1) Value of all assets					
()					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year					
listed				-	
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest, dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)				<u> </u>	
(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			7.11 7	 	
Part XV Supplementary Info	rmation (Comple	ete this part only	if the foundation	nad \$5,000 or m	ore in assets
at any time during t	ne year-see the	instructions.)	· <u>-</u> ·		
1 Information Regarding Foundation					
a List any managers of the foundation wh	o have contributed more	than 2% of the total con	tributions received by the	foundation before the clo	ose of any tax
year (but only if they have contributed n	iore than \$5,000). (See s	section 507(a)(2).)			
SEE STATEMENT 10					
b List any managers of the foundation wh			(or an equally large portion	on of the ownership of a p	partnership or
other entity) of which the foundation has	a 10% or greater intere	SI.			
NONE	· · · · · · · · · · · · · · · · · · ·			 -	
2 Information Regarding Contributi	on, Grant, Gift, Loan	, Scholarship, etc., P	rograms:		
Check here ► X if the foundation o					
the foundation makes gifts, grants, etc.	<u>`</u>	· · · · · · · · · · · · · · · · · · ·		implete items 2a, b, c, an	a a.
a The name, address, and telephone num	ber of the person to who	m applications should be	addressed:		
b The form in which applications should b	e submitted and informa	ition and materials they s	hould include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields	, kınds of institutions, or o	ther factors:	
•					

3 Grants and Contributions Paid During th	e Year or Approved for Future F	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
SEE ATTACHED LISTING	•			
		1		
		Ì		
		}		
				· · · · · · · · · · · · · · · · · · ·
Total		__	▶ 3a	111443.
b Approved for future payment				
NONE				
Total 23611 12-07-10	 -		<u>▶</u> 3b	0 . rm 990-PF (2010)

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated	business income		oy section 512, 513, or 514	(e)
	(a)	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion	Amount	function income
a					
b					·
c					
d	-				
e					
f			- 		
g Fees and contracts from government agencies	_				
2 Membership dues and assessments					· · · · · · · · · · · · · · · · · · ·
3 Interest on savings and temporary cash			1-1-		
Investments	-		14	159.	
4 Dividends and interest from securities			14	34307.	
5 Net rental income or (loss) from real estate:	 -		 		
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal			<u> </u>		
property					
7 Other investment income	-		14	20320.	
8 Gain or (loss) from sales of assets other	-		 - - - - - - - - - -		
than inventory			18	<12044.>	
9 Net income or (loss) from special events			 - -		
Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a					
b	_				
c	l i				
d	1				
e			- 		
12 Subtotal. Add columns (b), (d), and (e)		0		42742.	(
3 Total. Add line 12, columns (b), (d), and (e)				13	
(See worksheet in line 13 instructions to verify calculations.)				13	427

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).							
	INCOME	PROVIDES	CASH	FOR	CONTINUED	CONTRIBUTIONS	TO	CHARITIES
5	INCOME	PROVIDES	CASH	FOR	CONTINUED	CONTRIBUTIONS	TO	CHARITIES
7	INCOME	PROVIDES	CASH	FOR	CONTINUED	CONTRIBUTIONS	TO	CHARITIES
8	INCOME	PROVIDES	CASH	FOR	CONTINUED	CONTRIBUTIONS	TO	CHARITIES
	<u></u>							
	ļ ———							
								
············								
	ļ —————							
	<u> </u>							
- · · - <u>- · · · · · · · · · · · · · · ·</u>	ļ							
					_			
								

023621 12-07-10

orm 990-PF (20	(I) GARDNER	FAMILY C	HARITABLE	FOUNDATION	20-2003	<u> </u>
Part XVII	Information Regar	ding Transfe	rs To and Tran	sactions and Relationship	s With Nonchari	table
	Exempt Organizati	ons				
4) D.d.th			a fallarina a mila a ann ai		504(0) 06	$\overline{}$

	the organization directly or ind						ction 501(c) of		Ye	s No
	Code (other than section 501(o				ganıza	ations?		ĺ	ĺ	
	sfers from the reporting found	lation to a noncharita	able exempt or	ganization of:				1.		,,
	Cash .		•					-	a(1)	<u> </u>
	Other assets					•	•	<u> </u>	a(2)	X_
	r transactions:									3,
٠,	Sales of assets to a noncharita	• =						<u> </u>	b(1)	X
	Purchases of assets from a no	="	organization						b(2)	X
	Rental of facilities, equipment,						•		b(3)	X
	Reimbursement arrangements	i					-		b(4)	X
٠.	Loans or loan guarantees	ambarahin or fundra	ioina nalioitatia			•	-	· -	b(5)	$\frac{\lambda}{x}$
	Performance of services or me ing of facilities, equipment, ma							-	b(6) 1c	X
	answer to any of the above is				t alwa	ve chow the fair	market value of th	L a goode othe		A_
	ervices given by the reporting f									
	mn (d) the value of the goods,			ou 1633 triair fair friance	value	in any transactio	n or snaring arran	gernent, and	•	
a) Line no	(b) Amount involved			exempt organization		(d) Description	on of transfers, transa	ctions, and shar	ing arrange	ments
,	(2)////	(0)	N/A			(0)				
		 								
		 		·						
										
				· · · · · · · · · · · · · · · · · · ·						
										
										·-,
	e foundation directly or indirec	-			anızat	tions described			_	_,
	ction 501(c) of the Code (othe	•)(3)) or in sect	ion 527?					Yes L	X No
b If "Ye	s," complete the following sch		 	(1) 7			(1)			
	(a) Name of org	janization		(b) Type of organization	on		(c) Description of	relationship		
	N/A									
										
								<u> </u>		
					+-					
	Under penalties of perjury, Leeclard	e that have examined t	his return includi	ng accompanying schedules	and st	tatements, and to t	he best of my knowler	dge and belief.	t is true, co	rrect.
Sign	and complete Declaration of meps			sed on all information of whi				- g , ·		,
Here			$\overline{}$	1/7/	ואניו	2011	TRUSTEE			
	Signature of officer or tru	ıstee		Date U	191	—	Title			
	Print/Type preparer's na		Preparer's su	onature .	a	ate	Check If	PTIN		
	- The property of the			//_/			self- employed			
Paid	Daniel F. Frie	.\	/ James	1///	0	6/07 <u>/</u> 11	, , , -			
Prepa		<u> </u>		PC	,,,	<u> </u>	Firm's EIN ▶			
Use O		5 WYMAN S		, - •						
	Firm's address ► WA		02451	-1218			Phone no.	(781)	890-	3150
						_		,		
			-					Form	990-PF	(2010)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

Name of the organization		Employer identification number
GA	ARDNER FAMILY CHARITABLE FOUNDATION	20-2003567
Organization type (check of	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	
Form 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	
Note. Only a section 501(c) General Rule	s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule in filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in molete Parts I and II.	
For a section 501(509(a)(1) and 170(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the reg b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II	
aggregate contribu	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, cruelty to children or animals. Complete Parts I, II, and III	
contributions for u If this box is check purpose. Do not co	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contribute exclusively for religious, charitable, etc., purposes, but these contributions did not agreed, enter here the total contributions that were received during the year for an exclusive complete any of the parts unless the General Rule applies to this organization because it e, etc., contributions of \$5,000 or more during the year	gregate to more than \$1,000 ly religious, charitable, etc.,
but it must answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Schedule E Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 ing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Name of organization

Employer identification number

GARDNER FAMILY CHARITABLE FOUNDATION

20-2003567

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	HOWARD M. GARDNER 354 MERRIMACK STREET LAWRENCE, MA 01843	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	NAOMI GARDNER 354 MERRIMACK STREET LAWRENCE, MA 01843	\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		- - - -	Person 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 Payroli Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Employer identification number

GARDNER FAMILY CHARITABLE FOUNDATION

20-2003567

Noncash Property (see instructions)		
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	_	
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	(b) Description of noncash property given (b) Description of noncash property given	(b) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) FMV (or estimate) (see instructions) (e) FMV (or estimate) (see instructions) (f) FMV (or estimate) (see instructions) (h) Description of noncash property given (c) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) FMV (or estimate) (see instructions) (e) FMV (or estimate) (see instructions) (f) Description of noncash property given (g) FMV (or estimate) (see instructions)

Schedule B (Forr	n 990, 990-EZ, or 990-PF) (2010)			Page of of Part III
Name of orga				Employer identification number
				00.000000
<u>GARDNE:</u> Part III	R FAMILY CHARITABLE FC Exclusively religious, charitable, etc., is more than \$1,000 for the year. Complet Part III, enter the total of exclusively religions \$1,000 or less for the year. (Enter this interpretation)	ndividual contributions to sec e columns (a) through (e) and the ous, charitable, etc., contribution	he following line entry For	20-2003567 organizations aggregating organizations completing
(a) No.				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
-				
-				-,
-		(e) Transfer of g	jift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	ansferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
- -				
		(e) Transfer of g	ift	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nnsferor to transferee
(a) No.				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
- -				
		(e) Transfer of g	ift	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	insferor to transferee
(a) No.				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
		(e) Transfer of g	ift	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nsferor to transferee
-				
			· · · · · · · · · · · · · · · · · · ·	

4 V 4

FORM 990-PF INTEREST ON SAVI	NGS AND TE	MPORARY CAS	SH :	INVESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
NORTHMARK BANK				-	1	59.
TOTAL TO FORM 990-PF, PART I,	LINE 3, C	OLUMN A		=	1!	59.
FORM 990-PF DIVIDEND	S AND INTE	REST FROM S	SECU	JRITIES	STATEMENT	2
SOURCE	GROS	s amount		PITAL GAINS DIVIDENDS	COLUMN (A AMOUNT)
UBS FINANCIAL SERVICES		34307.		0.	3430	07.
TOTAL TO FM 990-PF, PART I, LI	N 4	34307.		0.	3430	07.
FORM 990-PF	OTHER	INCOME			STATEMENT	3
DESCRIPTION		(A) REVENUE PER BOOKS		(B) NET INVEST- MENT INCOME		
K-1 INCOME		2032	20.	20320		
TOTAL TO FORM 990-PF, PART I,	LINE 11 =	2032	20.	20320	·	
FORM 990-PF	TA	KES			STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO			(D) CHARITAI PURPOSI	
MA PC FOREIGN TAX	125 672		0.			0.
TO FORM 990-PF, PG 1, LN 18	797		0.			0.

• . . .

FORM 990-PF	OTHER E	XPENSES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS		ST-		(D) CHARITA ME PURPOS	
BANK & INVESTMENT FEES	10195.		0.			0.
TO FORM 990-PF, PG 1, LN 23	10195.		0.			0.
						
FORM 990-PF	CORPORAT	E STOCK			STATEMENT	6
DESCRIPTION			вос	OK VALUE	FAIR MARKE VALUE	т
		-		1439021.		0.
TOTAL TO FORM 990-PF, PART II	, LINE 10B	=		1439021.		0.
FORM 990-PF	OTHER INV	ESTMENTS			STATEMENT	7
DESCRIPTION			7	ALUATION METHOD	BOOK VAL	UE
			cc)ST	1762	74.
TOTAL TO FORM 990-PF, PART II	, LINE 13				1762	74.

	UBSTANTIAL CONTRIE T VII-A, LINE 10	UTORS	STAT	EMENT
NAME OF CONTRIBUTOR	ADDRESS			
HOWARD M GARDNER	P O BOX 697 NORTH ANDOVER	, MA 01845		
NAOMI GARDNER	P O BOX 697 NORTH ANDOVER	A, MA 01845		
	IST OF OFFICERS, D		STAT	EMENT
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE
HOWARD MORSE GARDNER P O BOX 697 NORTH ANDOVER, MA 01845	TRUSTEE 0.00	0.	0.	(
NAOMI A GARDNER P O BOX 697 NORTH ANDOVER, MA 01845	TRUSTEE 0.00	0.	0.	(
MEREDITH GARDNER RUBENZAHL 222 WEST 83RD STREET, 9A NEW YORK, NY 10024	TRUSTEE 0.00	0.	0.	(
STEPHANIE GARDNER GINSBERG 35 STIRLING STREET ANDOVER, MA 01810	TRUSTEE 0.00	0.	0.	C
ALEXANDRA GARDNER FERN 31 SKYLARK ROAD GREENWICH, CT 06830	TRUSTEE 0.00	0.	0.	(
JULIANE GARDNER SPENCER 215 W 90TH STREET, 9F NEW YORK, NY 10024	TRUSTEE 0.00	0.	0.	(

0.

0.

TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII

0.

20-2003567

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT

. . . .

10

NAME OF MANAGER

HOWARD MORSE GARDNER NAOMI A GARDNER

GARDNER FAMILY CHARITABLE FOUNDATION

DONATIONS FOR THE YEAR ENDED DECEMBER 31, 2010

Asphalt Green	\$ 1,500.00
Temple Emanuel	25 00
Chabad Early Learning Center	1,000 00
Chabad Of Greenwich	3,600.00
8 Free Kick Cancer Celebration	100.00
Williams College Alumnı Fund	1,000.00
Temple Ahavath Achim	25 00
Tufts University	2,000.00
WFHa	1,000.00
The Pike School	10,000.00
Williams College	20,000.00
Brooks School	1,000 00
The Governer's Academy	1,000.00
Lawrence Academy	1,000.00
Merrimack Valley Jewish Federation	5,000 00
Family Service Inc	500.00
Barnard College	3,000.00
The Pike School	5,000.00
Phillps Academy	1,000.00
Merrimack College Ctr Jewish Christian	1,000.00
Notre Dame High School	1,000.00
WFHA	7,200.00
Temple Ahavath Achim	10,000 00
Adult Brain Tumor Research Fund	100.00
Temple Emanuel	25.00
Congregation B'nai Jeshurun	2,100.00
Cape Ann Museum	100 00
Rockport Art Association	100 00
Merrimack Valley Chabad	500 00
Immaculate Conception Church	1,000.00
WFHA	1,080.00
Temple Ahavath Achim	100.00
Barnard Class Of '62 Scholarship Fund	25.00
Donald & Ilona Quest Endowed Professorship	1,000.00
Congregation B'nai Jeshurun	4,770.00
Family Service Inc	50.00
Temple emanuel	6,620 00
B'nai B'rith	169.00
Sisterhood TAA	50.00
Alzheimer's Association	100.00
Congregation Rodeph Sholom	3,468 00
Jimmy Fund	25 00
Temple emanuel	 25.00

Sub Total \$ 98,357.00

GARDNER FAMILY CHARITABLE FOUNDATION

DONATIONS FOR THE YEAR ENDED DECEMBER 31, 2010

	Sub Total Forward	\$ 98,357 00
Temple Ahavath Achim Temple Ahavath Achim Sisterhood Of Temple Emanuel Mass Medical Benevolent Society Temple Emanuel U VA Medical School Foundation P M C Kids American Cancer Society UJA/Federation Of Greenwich Merrimack Valley Hospice Tufts Hillell LGH Auxiliary Kristen Kearns Memorial Scholarship Fund AJHS Fund Rita Mary Fitzgibbons RN Scholarship Fund Lowell General Hospital Chinmaya Mission Boston Gilda's Fund Westchester Jimmy Fund Rockport Art Association Temple Emanuel JCC Manahattan Eagle Tribune Santa Fund	Sub Total Forward	25.00 1,800.00 226 00 100.00 10.00 100.00 1,960.00 250.00 750 00 1,000.00 1,000.00 1,000.00 100.00 100.00 250.00 750.00 100.00 250.00 750.00 100.00 250.00
	TOTAL DONATIONS	\$ 111,443 00

Account Number JJ 76107 10 Page
Your Financial Advisor or Contact
LITTLE/MCLEOD/VALENTINE WEALTH
617-439-8000/800-225-2374

UBS Financial Services Inc.

7

10 of

2010 Consolidated Form 1099

P06L007624-X

2010 Realized Gain/Loss Summary (Includes sa

is Summary (Includes sale proceeds not reported on Form 1099-B)

This Realized Gain/Loss Summary is not a tax reporting document and has not been submitted to the IRS. If your sale amount matches the amount on Form 1099-B, which is reported to the IRS, it is marked as such Please rely on the confirmations previously provided to you as your official activity record

recognized on the sale or redemption of certain Structured Products may be ordinary, and not capital, gain or loss Please check with your tax advisor and/or read the tax-related disclosure materials associated with those Estimated 2010 Gain/Loss for transactions with trade dates through 12/31/10 has been incorporated Into this statement. Realized gain/loss is based on the sales amount less the cost basis. Please note that gain or loss products. Note that the Original Cost Basis column is only populated for transactions of securities that have had their basis reduced due to premium amortization or increased due to OID accretion

Gain/Loss may not have been adjusted for all capital changes. Gain/Loss values that may be subject to Wash Sale provisions are not indicated here. "Earnings" in the Purchase Date column indicates the position sold was The cost basis of the oldest security lot (first-in, first-out or FIFO method of accounting) is assigned to a sale to calculate Gain/Loss unless you identified a specific lot (a "versus purchase" or "VSP" order) when you placed your sell order. An asterisk (*) indicates a UBS Financial Services adjustment to cost basis. The number "1" indicates cost basis information has been provided by a source other than UBS Financial Services acquired on various dates through dividend reinvestment and that the Gain/Loss has been aggregated

Market Discount, Acquistion Premium, or Bond Premium. Therefore, the amortization and accretion adjustments used here may not be consistent with the Form 1099-OID amount because the reporting requirements are different. Cost basis for coupon tax-exempt municipal securities (including securities subject to AMT) has been adjusted for mandatory amortization of bond premium. The OID amount reported on your Form 1099-OID is not adjusted for

Gain/Loss from short sale closings are reported as short-term regardless of the holding period of property used to close the short position. Clients should consult their tax advisors as to whether exceptions may apply in their particular case to change this classification. The potential application of the "Constructive Sale" provisions (Sec 1259) for short-against-the box transactions is not considered. Clients should discuss the possible application of these provisions with their tax advisor

									Net
		Purchase		Sale		Gains		Losses	Gain/Loss
Short-term Gain/Loss:	e) \$	33,030.00	69	24,873.43	69		69	(8,156.57) \$	(8,156.57)
Long-term Gain/Loss:	¥	153,335.34		149,448.00		25,333.93		(29,221.27)	(3,887.34)
Sub Total:	\$ 18	186,365.34	65	174,321.43	55	25,333.93	55	(37,377.84) \$	(12,043.91)
Total:	\$ 2	186,365.34	s	174,321.43 \$	65	25,333.93	s	(37,377.84) \$	(12,043.91)

Short-Term Gain/Loss

This section includes securities held for less than one year, and option contracts that are not reported on Form 1099-B.

		Quantity	Quantity/ Original Cost	rurchase date	Date		Cost or Other			Matches
Security Description	Activity Type	Face value	Basis	Basis Date Acquired	Sold	Sale Amount	Basis	Gain/Loss Remarks	Remarks	1099-8
KINROSS GOLD CORP NEW	Trade	1,500.000		09/03/09	02/05/10	24,873.43	33,030.00	(8,156.57)		٨
CAD								•		
Total Short-Term Gain/Loss						24,873.43	24,873.43 33,030.00	(8,156.57)		

Long-Term Gain/Loss

This section includes secunties held for more than one year, and option contracts that are not reported on Form 1099-B

		Quantity/	Quantity/ Original Cost	Purchase date	Date	•	Cost or Other			Matches
Security Description	Activity Type	Face value	Basis	Date Acquired	Sold	Sale Amount	Basis	Gain/Loss	Remarks	1099-B
BHP BILLITON LTD SPON	Trade	150.000		12/12/05	02/06/10		4,995.00	5,075.83		>
ADR	Trade	350.000		01/11/06	05/06/10	23,498.60	12,595.33	10,903.27		>
	Sub-Total:	500.000				33,569.43	17,590.33	15,979.10		



LITTLE/MCLEOD/VALENTINE WEALTH Your Financial Advisor or Contact Account Number JJ 76107 10 617-439-8000/800-225-2374

Page 11 of 11

2010 Consolidated Form 1099 **UBS Financial Services Inc.**

P06L007625-X

Long-Term Gain/Loss - continued

This section includes securities held for more than one year, and option contracts that are not reported on Form 1099-B.

Security Description	Activities Trees	Quantity/	Origin	Purchase date	Date		Cost or Other			Matches
	activity type	race value	Basis	Date Acquired	Sold	Sale Amount	Basis	Gain/Loss	Remarks	1099-8
BP PLC SPON ADR	Trade	750.000		03/24/09	05/03/10	36,053.09	30,829.48	5,223.61		>
PETROLEO BRASILEIRO SA SPON ADR	Trade	500.000		03/25/08	02/10/10	20,036.24	25,757.13	(5,720.89)		` >
SCHLUMBERGER LTD NETHERLANDS ANTILLES	Trade Trade	500.000		06/23/08 11/04/08	02/22/10 02/22/10	29,894.62	53,395.00 25.763.40	(23,500.38)		> :
	Sub-Total:	1,000.000				59,789.24	79,158.40	(19,369.16)		>-
Total Long-Term Gain/Loss						149,448.00	153,335.34	(3,887.34)		

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

Form 8868 (Rev 1-2011)

***************************************	T iid d dept	arate app	House of the Caloni Caloni						
• If you a	are filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box		•	X			
• If you a	are filing for an Additional (Not Automatic) 3-Month Ex	tension, e	complete only Part II (on page 2 of this	form)					
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.				
Electron	ic filing (e-file). You can electronically file Form 8868 if y	you need	a 3-month automatic extension of time t	o file (6 months for a corp	oration			
required i	to file Form 990-T), or an additional (not automatic) 3-mo	nth extens	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	Form 8870, Information Return for Tran	sfers.	Associated With Ce	rtaın			
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 f	orm,			
visit www	urs gov/efile and click on e-file for Charities & Nonprofits	<u></u>			<u></u> -				
Part I	Automatic 3-Month Extension of Time	∋. Only su	ibmit original (no copies needed).						
A corpora	ation required to file Form 990-T and requesting an autor	natic 6-mo	onth extension - check this box and com	plete					
Part I only	у								
	corporations (including 1120-C filers), partnerships, REM ome tax returns.	IICs, and t	rusts must use Form 7004 to request an	exter	asion of time				
Type or	Name of exempt organization			Emp	loyer identification	number			
print	GARDNER FAMILY CHARITABLE	FOUND	ATION	2	0-2003567				
File by the due date for	Number, street, and room or suite no. If a P.O box, s								
filing your 354 MERRIMACK STREET									
return See instructions	City, town or post office, state, and ZIP code For a foreign address, see instructions								
LAWRENCE, MA 01843									
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 4			
Applicati	on	Return	Application		*	Return			
ls For		Code	Is For			Code			
Form 990		_01	Form 990-T (corporation)			07			
Form 990	-BL	02	Form 1041-A			08			
Form 990	·EZ	03	Form 4720			09			
Form 990	PF	04	Form 5227			10			
Form 990-T (sec 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12									
Form 990-T (trust other than above) 06 Form 8870 12									
	HOWARD M. GARDI	NER							
• The bo	ooks are in the care of > 354 MERRIMACK S	STREE'	<u> </u>	43					
Teleph	one No. ► 978-687-2321		FAX No. ► 978-685-7265						
If the c	organization does not have an office or place of business	s in the Ur	nited States, check this box						
 If this i 	s for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN) If thi	s is fo	r the whole group, c	heck this			
box ▶	. If it is for part of the group, check this box	and atta	ch a list with the names and EINs of all	memb	ers the extension is	for			
1 I red	quest an automatic 3-month (6 months for a corporation	required	to file Form 990-T) extension of time unt	ıl	-				
	AUGUST 15, 2011 , to file the exempt	t organiza	tion return for the organization named a	bove.	The extension				
is fo	or the organization's return for:								
▶[is for the organization's return for: X calendar year 2010 or								
▶[tax year beginning	, an	d ending						
2 If th	e tax year entered in line 1 is for less than 12 months, cl Change in accounting period	heck reas	on: Initial return Fina	l retur	n				
3a If th	us application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069, e	nter the tentative tax, less any		··				
non	refundable credits. See instructions.			За	\$	<u> </u>			
b If th	is application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and						
	mated tax payments made. Include any prior year overp			3b	\$	712.			
	ance due. Subtract line 3b from line 3a Include your pa		-						
	using EFTPS (Electronic Federal Tax Payment System)			3с	\$	0.			
	If you are going to make an electronic fund withdrawal w				EO for payment insti				

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For Paperwork Reduction Act Notice, see Instructions.