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Return of Private Foundation

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

The foundation may be able to use a copy of this return to satisfy state reporting requirements

2010

OMB No 1545-0052

<u>ern</u>	ai nev	renue Service	ote. The foundation may	DC abic to use a copy of this	Total in to Satisfy State Topo	rting requirements.	ل
For	calen	dar year 2010, or tax yea	r beginning MAR	1, 2010	, and ending	FEB 28, 2011	
G	heck	all that apply:	Initial return	Initial return of a fo	ormer public charity	Final return	1
			Amended return	Address chan	ge \square	Name change	
Nar	ne of	foundation			A Employer identification	n number	
		KARP FAMIL					
		JILL E. KA	04-3226725	<u>.</u>			
Nun	aber a	nd street (or P O box number if			Room/suite	B Telephone number	<u>, </u>
		C/O NEW EN	GLAND DEVEL	.Ормеми Оме	WELLS	(617)965-8	2700
Cit	orto	own, state, and ZIP code	ODINO DEVEL	JOINDINI, OND	инны		<u>, r</u>
City	OIL	NEWTON, MA	02459			C If exemption application is p	•
	· hool				-	D 1. Foreign organization 2 Foreign organizations mechanical check here and attach co	eeting the 85% test.
н (_			xempt private foundation		check here and attach co	omputation
		ction 4947(a)(1) nonexem		Other taxable private founda		E If private foundation sta	
		rket value of all assets at e	· —	•	X Accrual	under section 507(b)(1)(A), check here
-		Part II, col (c), line 16)		ther (specify)		F If the foundation is in a	
_	.\$			ımn (d) must be on cash i	basis.)	under section 507(b)(1	1
Pa	rt I	The total of amounts in colui	mns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
		necessarily equal the amount	ts in column (a))	expenses per books	income	income	(cash basis only)
	1	Contributions, gifts, grant	•			N/A	
	2	Check X if the foundation			· · · · · · · · · · · · · · · · · · ·		
	3	Interest on savings and tempo cash investments	orary	67.	66.		STATEMENT 1
	4	Dividends and interest fro	m securities	84,120.	84,120.		STATEMENT 2
	5a	Gross rents					
	ь	Net rental income or (loss)			- -		
•	6a	Net gain or (loss) from sale of a	assets not on line 10	34,540.			
ž	ь	Gross sales price for all assets on line 6a	868,223.				
Revenue	7	Capital gain net income (from			34,540.		
æ	8	Net short-term capital gai	n .		/		
	9	Income modifications					
	10a	Gross sales less returns and allowances					
2018	h	Less Cost of goods sold			"		
20	٦	Gross profit or (loss)					
	11	Other income		2,395.	0.		STATEMENT 3
	12	Total Add lines 1 throug	h 11	121,122.	118,726.		DIATEMENT J
				0.	0.		0.
NON	13	Compensation of officers, dire Other employee salaries a		0.			
	14	Pension plans, employee	•				
es:		• • • •	Denents				
-20		Legal fees	CONTRACT A	250			050
ğ	D	Accounting fees	STMT 4	250.	0.		250.
» کر ا	_ C	Other professional fees		RECEIVE	<u> </u>		
Operating and Administrative Expen	17	Interest	amer -			-	4 04 0
ìФа	18	Taxes	STMT 5	1,010.	<u> </u>		1,010.
inis	19	Depreciation and depletio	n	NOV 07 2	311 80-5		-
튵	20	Occupancy			<u> </u>		ļ <u></u>
٧	21	Travel, conferences, and	-				<u> </u>
ä	22	Printing and publications		OGDEN.			
ing	23	Other expenses	STMT 6	22,594.	22,239.	-	355.
rati	24	Total operating and adm					
ρe		expenses Add lines 13 ti	-	23,854.	22,239.		1,615.
U	25	Contributions, gifts, grant		714,850.			714,850.
	26	Total expenses and disb	ursements.				
		Add lines 24 and 25		738,704.	22,239.		716,465.
	27	Subtract line 26 from line	12:				
	a	Excess of revenue over expen	ses and disbursements	-617,582.			
	b	Net investment income (f negative, enter -0-)		96,487.		
	C	Adjusted net income (if no	egative, enter -0-)	<u> </u>		N/A	

023501 12-07-10 LHA For Paperwork Reduction Act Notice, see the instructions

KARP FAMILY FOUNDATION, STEPHEN R. AND

FORM 990-PF (2010) JILL E. KARP, TRUSTEES		30-PF (2010) JILL E. KARP, TRUSTEES		3226725 Page 2	
P	art	Balance Sheets Atlached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year (a) Book Value	(b) Book Value	year (c) Fair Market Value
	1	Cash - non-interest-bearing	(a) Book value	(b) Book Value	(c) i ali ividi ket value
		Savings and temporary cash investments	168,553.	81,445.	81,445.
	1	Accounts receivable	100,333.		01,443.
	"	Less; allowance for doubtful accounts			
	4	Pledges receivable ►	-		
	'	Less; allowance for doubtful accounts			
	5	Grants receivable		·	
	6	Receivables due from officers, directors, trustees, and other			
	l _	disqualified persons	-		
	'	Other notes and loans receivable			
		Less; allowance for doubtful accounts			·
Assets	8	Inventories for sale or use			
Ass	9	Prepaid expenses and deferred charges			
_	1	Investments - U.S. and state government obligations	1 052 140	1 052 140	1 (40 201
	F	Investments - corporate stock STMT 7	1,053,148.	1,053,148.	1,640,381.
	1	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
		Investments - mortgage loans Investments - other STMT 8	5,687,704.	E 157 220	F 00C 00F
	13		3,007,704.	5,157,230.	5,806,925.
	14	Land, buildings, and equipment: basis Less accumulated depreciation			
	4.5				
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers)	6,909,405.	6,291,823.	7,528,751.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ç	19	Deferred revenue			
≝	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable			
Ξ	22	Other liabilities (describe)			
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
G		and complete lines 24 through 26 and lines 30 and 31.			
õ	24	Unrestricted			
alar	25	Temporarily restricted			
Net Assets or Fund Balances	26	Permanently restricted			
Š		Foundations that do not follow SFAS 117, check here			
Ϋ́		and complete lines 27 through 31			
ţ	27	Capital stock, trust principal, or current funds	94.	94.	
SSe	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Ä	29	Retained earnings, accumulated income, endowment, or other funds	6,909,311.	6,291,729.	
Ž	30	Total net assets or fund balances	6,909,405.	6,291,823.	
	31	Total liabilities and net assets/fund balances	6,909,405.	6,291,823.	
	art			0,251,025.	·
=					
1		I net assets or fund balances at beginning of year - Part II, column (a), line st agree with end-of-year figure reported on prior year's return)	30		.
_		1	6,909,405.		
_		r amount from Part I, line 27a		2	-617,582.
3		r increases not included in line 2 (itemize)	· -· · · · · · · · · · · · · · · · · ·	3	0.
4		lines 1, 2, and 3		4 1	6,291,823.
5		eases not included in line 2 (itemize)	olumn (h) lina 20	5	6 201 922
0	ıvla	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	numm (u), mie 30	6	6,291,823.

KARP FAMILY FOUNDATION, STEPHEN R. AND Form 990-PF (2010) JILL E. KARP TRUSTEES 04-3226725 Page 3 Capital Gains and Losses for Tax on Investment Income Part IV (b) How acquired P - Purchase D - Donation (a) List and describe the kind(s) of property sold (e.g., real estate, (c) Date acquired (d) Date sold (mo., day, yr.) (mo., day, yr.) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) 1a SEE ATTACHED STATEMENT b C d е (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) а b C d 34,540. 833,683 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or (j) Adjusted basis (k) Excess of col. (i) Losses (from col. (h)) (i) F.M.V. as of 12/31/69 over col. (j), if any as of 12/31/69 а b C d 34,540. If gain, also enter in Part I, line 7 34,540. 2 Capital gain net income or (net capital loss) 2 If (loss), enter -0- in Part I, line 7 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8 N/A Part V | Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank. Yes X No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part Enter the appropriate amount in each column for each year; see instructions before making any entries. (d)
Distribution ratio
(col. (b) divided by col. (c)) (a) Base period years (b) (c) Adjusted qualifying distributions Net value of noncharitable-use assets Calendar year (or tax year beginning in) 2009 1,850,426 7,257,882 .254954 4,151,752. 10,399,520 .399225 2008 630,919 13,470,497 .046837 2007 390,080 13,274,686 .029385 2006 235,600 10,488,973 .022462 2005 2 Total of line 1, column (d) .752863 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years <u>.150573</u> 3 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5 <u>7,019,680.</u> 1,056,974. Multiply line 4 by line 3 5 965. Enter 1% of net investment income (1% of Part I, line 27b) 6 1,057,939. 7 Add lines 5 and 6 7

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716,465.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

See the Part VI instructions

8 Enter qualifying distributions from Part XII, line 4

KARP FAMILY FOUNDATION, STEPHEN R. AND Form 990-PF (2010) 04-3226725 JILL E. KARP, TRUSTEES Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) 1a Exempt operating foundations described in section 4940(d)(2), check here | and enter "N/A" on line 1. ___ (attach copy of letter if necessary-see instructions) Date of ruling or determination letter: 1,930. b Domestic foundations that meet the section 4940(e) requirements in Part V, check here | and enter 1% 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-) 3 Add lines 1 and 2 3 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-6 Credits/Payments: 2,576. a 2010 estimated tax payments and 2009 overpayment credited to 2010 **b** Exempt foreign organizations - tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) 6c d Backup withholding erroneously withheld 2,576. 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached 8 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 646. 10 Overpayment, If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 646. Refunded ▶ 0. 11 Enter the amount of line 10 to be: Credited to 2011 estimated tax Part VII-A Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in X 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 If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? X 1c d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 0 . (2) On foundation managers. ► \$ (1) On the foundation. > \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ X 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 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 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a N/A b If "Yes," has it filed a tax return on Form 990-T for this year? 4b

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-X-

X

X

X

X

7

8b

MA

5- Was there a liquidation, termination, dissolution, or substantial contraction during the year?

6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.

8a Enter the states to which the foundation reports or with which it is registered (see instructions)

of each state as required by General Instruction G? If "No," attach explanation

By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)

year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV

_10 Did any persons become substantial contributors during the tax year? If "yes," attach a schedule listing their names and addresse:

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

If "Yes," attach the statement required by General Instruction T

7 Did the foundation have at least \$5,000 in assets at any time during the year?

By language in the governing instrument, or

If "Yes," complete Part II, col. (c), and Part XV

remain in the governing instrument?

KARP FAMILY FOUNDATION, STEPHEN R. AND Form 990-PF (2010) JILL E. KARP, TRUSTEES 04-3226725 Page 5 Part VII-A | Statements Regarding Activities (continued) 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) Х 11 12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008? Х 12 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Website address ► N/A Telephone no. \triangleright (617) 965-8700 14 The books are in care of ► THE KARP FAMILY FOUNDATION Located at ►ONE WELLS AVENUE, NEWTON, MA ZIP+4 ▶02459 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year N/A 16 At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank, No Yes securities, or other financial account in a foreign country? X See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. Yes No 1a During the year did the foundation (either directly or indirectly); Yes X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) Yes X No a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No Yes X No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available Yes X No for the benefit or use of a disqualified person)? (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after Yes X No termination of government service, if terminating within 90 days.) b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)? 1b Organizations relying on a current notice regarding disaster assistance check here c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected X before the first day of the tax year beginning in 2010? 1c 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): a At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010? If "Yes," list the years b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach N/A statement - see instructions.) 2b c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time Yes X No during the year? b If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2010) N/A 3Ь Х 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?

KARP FAMILY FOUNDATION, STEPHEN R. AND

Form 990-PF (2010) JILL E. KARP, TRUSTEES	- 4500 14 5 5		<u>04-32267</u>	25	Page (<u>6</u>
Part VII-B Statements Regarding Activities for Which I	orm 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 (section			es X No			
(2) Influence the outcome of any specific public election (see section 4955); of	r to carry on, directly or indire		_			
any voter registration drive?			es X No			
(3) Provide a grant to an individual for travel, study, or other similar purposes	Ye	es X No				
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section					
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	es X No			
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or				
the prevention of cruelty to children or animals?		Y6	s X No			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	n Regulations				
section 53.4945 or in a current notice regarding disaster assistance (see instru		•	N/A	5b	1	
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?		[/A □ Ye	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?	pu) p		es X No			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6Ъ	x	
If "Yes" to 6b, file Form 8870.	ordonal bonone bontrace		<u> </u>	-		-
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	□ v ₄	s X No			
b If "Yes," did the foundation receive any proceeds or have any net income attribu		L '\	N/A	7b		-
Information About Officers Directors Truck		nagers Highly		70	<u> </u>	_
Part VIII Paid Employees, and Contractors	ooo, roundation ma	inagoro, riigin	,			
1 List all officers, directors, trustees, foundation managers and their	compensation.				•	_
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(6	e) Expense	_
(a) Name and address	hòurs per week devoted to position	(If not paid, enter -0-)	and deferred compensation	ac	count, other allowances	i
STEPHEN R. KARP	TRUSTEE					-
3 POSSUM ROAD				1		
WESTON, MA 02493	0.20	0.	0.		0.	
JILL E. KARP	TRUSTEE					<u>-</u>
3 POSSUM ROAD						
WESTON, MA 02493	0.20	0.	0.	İ	0.	
WED 1011 / 121 021 1 0 0 1 1 0 0 1 1 0 0 1 1 0 0 0 1 1 0 0 0 1 1 0 0 0 1 1 0	0.20					<u>.</u>

	 			+		-
· · · · · · · · · · · · · · · · · · ·						
				<u> </u>		_
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."		•		-
	(b) Title, and average		(d) Contributions to employee benefit plans and deferred	(6	e) Expense count, other	-
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	ac	count, other Illowances	•
NONE	dovotos to position		Compansation	† – Š		-
1,01,10						
	-			 		-
	1					
	-			1		-
				Ì		
		 		+		-
	1					
		 		┼		-
	1					
Total number of other employees paid over \$50,000	I		<u> </u>	L	(5

JILL E. KARP.	TRUSTEES
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Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	lation Managers, Highly	-
3 Five highest-paid independent contractors for professional services. If none, ent	er "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		
	_	
		-
Table number of others recovered over \$50,000 for professional converse		▶ 0
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 stat number of organizations and other beneficiaries served, conferences convened, research papers pr		Expenses
1 NONE		
		0.
2		<u> </u>
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 of	an lines 1 and 2	Amount
1 NONE	or mes 1 and 2.	Amount
		0.
2		0.
	NA TOTAL	
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	<u> </u>	6. Form 990-PF (2010)

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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:		
а	Average monthly fair market value of securities	1a	4,582,825.
b	Average of monthly cash balances	1b	96,816.
C	Fair market value of all other assets	1c	2,446,938.
d	Total (add lines 1a, b, and c)	1d	7,126,579.
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	7,126,579.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	106,899.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	7,019,680.
6	Minimum investment return. Enter 5% of line 5	6	350,984.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	350,984.
2a	Tax on investment income for 2010 from Part VI, line 5 2a 1,930.		
b	Income tax for 2010. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	1,930.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	349,054.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	349,054.
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	349,054.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	716,465.
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 charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	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, and Part XIII, line 4	4	716,465.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6-	Adjusted qualifying distributions -Subtract-line-5-from-line-4	6	716,465.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (4940(e) reduction of tax in those years.	qualifies t	for the section

1

JILL E. KARP, TRUSTEES

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Part XIII Undistributed Income (see instructions)

			 -	<u> </u>
	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,				
line 7				349,054.
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 3,638,498.				
e From 2009 1,495,180.				
f Total of lines 3a through e	5,133,678.			
4 Qualifying distributions for 2010 from			-	
Part XII, line 4: ► \$ 716,465.				
a Applied to 2009, but not more than line 2a			0.	
b Applied to undistributed income of prior				W-2
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus		· = :		
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount		-		349,054.
e Remaining amount distributed out of corpus	367,411.			
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:				
Corpus Add lines 3f, 4c, and 4e Subtract line 5	5,501,089.			
b Prior years' undistributed income. Subtract	3,301,003.		, , , , , , , , , , , , , , , , , , , ,	
line 4b from line 2b		о.		
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				
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				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2011.				
Subtract lines 7 and 8 from line 6a	5,501,089.	_,		
10 Analysis of line 9:				
a Excess from 2006				
b Excess from 2007				
c Excess from 2008 3,638,498.				
d Excess from 2009 1,495,180.				
e Excess from 2010 367,411.				

پر KARP FAMILY FOUNDATION, STEPHEN R. AND Form 990-PF (2010) JILL E. KARP, TRUSTEES 04-3226725 Page 10 Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2010, enter the date of the ruling 4942(j)(5) b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or Tax year Prior 3 years 2 a Enter the lesser of the adjusted net (a) 2010 (b) 2009 (c) 2008 (d) 2007 income from Part I or the minimum (e) Totai 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 Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed c "Support" alternative test - enter; (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III) (3) Largest amount of support from an exempt organization Gross investment income Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any-time during the year-see the instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) NONE b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. NONE Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here X if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number of the person to whom applications should be addressed:

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors;

1 3

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Part XV Supplementary Information	continued)			
3 Grants and Contributions Paid During the Ye	ar or Approved for Future I	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	or substantial contributor	recipient		
Total			 ▶ 3a	714,850.
NONE Total 023611 12-07-10			▶ 3b	0. orm 990-PF (2010)

Form 990-PF (2010)

1

JILL E. KARP, TRUSTEES

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Part XVI-A	Analy	sis of I	ncome-	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 function income
1 Program service revenue:	code	Alloont	code	Allount	
a	_		+		
b			+		
<u> </u>	_		+		
d	_		+ +		
e			+		
Topo and contrasts from power-mont consequen	_		+		
g Fees and contracts from government agencies			+ +		<u> </u>
2 Membership dues and assessments					
3 Interest on savings and temporary cash			1 1 1	67	
investments 4 Dividends and interest from securities	-		14	84,120.	
			14	04,120.	
5 Net rental income or (loss) from real estate:			+ +		
a Debt-financed property				-	
b Not debt-financed property			+	-	
6 Net rental income or (loss) from personal property					Å
7 Other investment income					2,395.
8 Gain or (loss) from sales of assets other					
than inventory			14	1,006.	33,534.
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a	_				
b					
C	1 1				
d	1 1				
e					-
12 Subtotal. Add columns (b), (d), and (e)		0		85,193.	35,929.
13 Total. Add line 12, columns (b), (d), and (e)				13	121,122.
13 10tal. Add line 12, Columns (b), (d), and (e)	١			13	141,14

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)							
3	INCOME RECEIVED FROM INTEREST INCOME							
4	INCOME RECEIVED FROM DIVIDEND INCOME							
8 GAINS RECEIVED FROM CAPITAL GAIN DISTRIBUTIONS								
023621 12-07-10	Form 990-PF (2010)							

		E. KARP,	TRUSTE	ES			04-322	<u>6725 </u>	Page	13
Part)	Information Re Exempt Organ		nsfers To a	and Trans	actions a	ind Relat	ionships With Noncha	ritable		
1 Did	the organization directly or indi	rectly engage in an	y of the followin	g with any oth	er organizatio	on described i	n section 501(c) of	1	es N	0
the	Code (other than section 501(c)(3) organizations)	or in section 52	27, relating to p	olitical organ	ızatıons?	.,			_
a Tra	nsfers from the reporting found	ation to a nonchari	table exempt or	ganization of:						
(1)	Cash							1a(1)	2	K
(2)	Other assets							1a(2)		K
b Oth	er transactions:									
(1)	Sales of assets to a noncharita	ble exempt organiz	ation					1b(1)	1 2	K
(2)	Purchases of assets from a no	ncharitable exempt	torganization					1b(2)		K
(3)	Rental of facilities, equipment,	or other assets						1b(3)	7	ζ_
(4)	Reimbursement arrangements							1b(4)	2	ζ_
(5)	Loans or loan guarantees							1b(5)		<u>. </u>
(6)	Performance of services or me	embership or fundr	aising solicitatio	ons				1b(6)		<u> </u>
	aring of facilities, equipment, ma							_1c		<u> </u>
							e fair market value of the goods,		ts,	
					ır market valu	ie in any trans	saction or sharing arrangement, s	how in		
col	umn (d) the value of the goods,									
(a) Line n	o (b) Amount involved	(c) Name	of noncharitable	e exempt organ	nization	(d) Des	cription of transfers, transactions, and	sharing arrai	ngements	
			N/A		_					_
										_
	7					<u> </u>	<u> </u>			_
				-		<u> </u>				_
										_
			_							_
						-				
					 -					_
		ļ 					•			—
								-		—
										—
										
						1				—
					-					_
										_
2a Ist	he foundation directly or indirec	tly affiliated with, o	r related to, one	or more tax-e	xempt organi	zations descr	ibed			_
ın s	ection 501(c) of the Code (othe	r than section 501(c)(3)) or in sect	tion 527?				Yes	X N	lo
b_lf "\	es," complete the following sch		<u> </u>			-				
	(a) Name of org	ganization		(b) Type of o	organization		(c) Description of relations	hip		
	N/A									
										_
		<u> </u>		-						
							-			
	Under penalties of penaltry, I declar	e that I have examined	I this return, includ	I ling accompanyin	g schedules an	i d statements, a	nd to the best of my knowledge and be	tef, it is true	, correct,	
Sign	and complete Declaration of presa	arer (other than taxpay	er or fiduciary) is b	ased on all inform	nation of which	prebarer has an	y knowledge			
Here		whi	ay		10131	///	TRUSTEE			
	Signature of officer or tri	ustee			Date	, ,	Title			
	Print/Type reparer's na	ame	Preparer's s	ignature		Date	Check If PTIN			_
	BURTON R.						self- employed			
Paid	GESSERMAN,	CPA	BURTON	IR. G	ESSER	10/14/	11			
Prepa	arer Firm's name > WAI						Firm's EIN ▶			_
Use (<u> </u>							_		
	Firm's address ▶ 50							_		
	NORWOOD, MA 02062						Phone no. (617	<u>) 447</u>	-270	0(

8

Part IV Capital Gains and Lo	osses for Tax on Investment Income				
	d describe the kind(s) of property solo orick warehouse; or common stock, 20		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a GS CORE FIXED	INCOME FUND CLA	SS A SHARES		08/14/00	05/17/10
b GS CORE FIXED	INCOME FUND CLA			08/14/00	
c GS CORE FIXED	INCOME FUND CLA	SS A SHARES		08/14/00	
d GS CORE FIXED	INCOME FUND CLA	SS A SHARES		09/01/00	
e VIA FIDELITY -	SEE ATTACHMENT			VARIOUS	
f VIA FIDELITY	SEE ATTACHMENT		P	VARIOUS	
g CAPITAL GAINS	DIVIDENDS				
h					
<u>k</u>					
_m					
<u>n</u>					
0	T				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale) Gain or (loss) ilus (f) minus (g)	
a 200,000.	, , , , , , , , , , , , , , , , , , ,	196,480.	(0) F	nas (i) minas (g)	3 520
444 444		196,480.			3,520. 2,603.
000 010		267,659.			5,358.
d 26,983		26,565.			418.
e 172,233.		165,349.			6,884.
f 84,984.		70,233.	· · ·		14,751.
g 1,006		7072334			1,006.
h					
ı					
1					
k					
1				,	
m					
<u>n</u>					
0					
Complete only for assets show	ing gain in column (h) and owned by	the foundation on 12/31/69	(I) Los	sses (from col. (h))	(1.)
(i) F.M.V. as of 12/31/69	(j) Adjusted basis	(k) Excess of col. (i)	Gains (excess of	of col. (h) gain over ot less than "-0-")	col. (k),
(1) 1111111 45 01 12 0 17 00	as of 12/31/69	over col. (j), if any		<u> </u>	
<u>a</u>	 				3,520.
b					2,603.
<u>c</u>					5,358. 418.
<u>d</u>					$\frac{410.}{6,884.}$
e f					14,751.
9	+ · ·				1,006.
h					1,000.
1			-		
1	-				
k					
1			-		
m					
n					
0					
	. If nam also enter	r in Part I line 7			_
2 Capital gain net income or (net o	capital loss) { If gain, also enter "-()-" in Part I, line 7	2	_	34,540.
	oss) as defined in sections 1222(5) ar	nd (6):			
If gain, also enter in Part I, line 8		}			
If (loss), enter "-0-" in Part I, line	. <u>δ</u>		3	N/A	

FORM 990-PF INTEREST ON SAVI	INGS AND TE	MPORARY C	ASH :	INVESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
OTHER TAX EXEMPT				•		66.
TOTAL TO FORM 990-PF, PART I	, LINE 3, (COLUMN A				67.
FORM 990-PF DIVIDENI	OS AND INTE	REST FROM	SEC	URITIES	STATEMENT	2
SOURCE	GROS	SS AMOUNT		PITAL GAINS DIVIDENDS	COLUMN (A AMOUNT)
FIDELITY GOLDMAN SACHS GOLDMAN SACHS PRIVATE EQUITY		17,744. 67,375. 7.		1,006.	16,7 67,3	
TOTAL TO FM 990-PF, PART I, I	LN 4	85,126.		1,006.	84,1	20.
FORM 990-PF	OTHER	INCOME			STATEMENT	3
DESCRIPTION		(A) REVENUE PER BOOKS	S	(B) NET INVEST- MENT INCOME		
FEDERAL TAX REFUND	-	2,3	395.	0	•	
TOTAL TO FORM 990-PF, PART I	, LINE 11	2,3	395.	0	•	
FORM 990-PF	ACCOUNT	ING FEES			STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
ACCOUNTING & AUDITING	250	· ·	0	•		50.
TO FORM 990-PF, PG 1, LN 16B	250).	0	•		50.
=			_	= ======		_

FORM 990-PF	TAX	ES 			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
FOREIGN TAXES STATE TAXES	940.		0.			40. 70.
TO FORM 990-PF, PG 1, LN 18 =	1,010.		0.	-	1,0	10.
FORM 990-PF	OTHER E	XPENSES			STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
MANAGEMENT FEES INVESTMENT EXPENSE MISCELLANEOUS EXPENSE	12,501. 9,738. 355.	9,	501. 738. 0.		3	0. 0. 55.
TO FORM 990-PF, PG 1, LN 23	22,594.	22,	239.		3	55.
FORM 990-PF	CORPORAT	E STOCK			STATEMENT	7
DESCRIPTION			воо	K VALUE	FAIR MARKE VALUE	т
CORPORATE STOCK - GOLDMAN SAC	снѕ		1	,053,148.	1,640,3	81.
TOTAL TO FORM 990-PF, PART II	I, LINE 10B		1	,053,148.	1,640,3	81.
FORM 990-PF	OTHER INV	ESTMENTS			STATEMENT	8
DESCRIPTION		LUATION ETHOD	воо	K VALUE	FAIR MARKE VALUE	т
PRISMA SELECT FUND MUTUAL FUNDS - FIDELITY INVESTMENT IN GS PEP 2005 OFI INVESTMENT IN ATHENA SELECT I MUTUAL FUNDS - GOLDMAN SACHS COMMODITIES - GOLDMAN SACHS	FSH FUND	COST COST COST COST COST COST	1	,000,000. ,324,012. 624,339. 860,393. ,348,486. 0.	1,447,4 1,498,8 624,3 860,3 1,375,8	28. 39. 93. 96.

FORM 990-PF GRANTS PAID	STATEMENT		
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
A SAFE PLACE, INC.			1,000.
ALICE HOFFMAN BREAST CENTER			2,500.
AMERICAN DIABETES ASSOCIATION			1,000.
AUTISM SPEAKS			15,000.
BOSTON MEDICAL CENTER			6,000.
BRIGHAM AND WOMENS			500.
CHILDREN'S HOSPITAL BOSTON			 28,500.
CHILDREN'S HOSPITAL LEAGUE			10,000.

KARP FAMILY FOUNDATION, STEPHEN R. AND J	04-3226725
CHILDREN'S HOSPITAL PLAYGROUND	1,000.
CHILDREN'S HOSPITAL TRUST	10,000.
COMBINED JEWISH PHILANTHROPIES	3,800.
CRADLES TO CRAYONS	30,000.
CROHN'S & COLITIS FOUNDATION	1,000.
CYSTIC FIBROSIS FOUNDATION	2,000.
DANA FARBER CANCER INSTITUTE	10,000.
FAMILY TO FAMILY PROJECT	2,500.
	••
FJC-BJMF/BOSTON JEWISH MUSIC F	1,800.
GATEWAYS	1,000.

KARP FAMILY FOUNDATION, STEPHEN R. AND J	04-3226725
GREATER BOSTON FOOD BANK	50,000.
HADASSAH-BRANDEIS INSTITUTE	. 500.
HARRIS CENTER FOR EDUCATION	25,000.
HEBREW COLLEGE	1,000.
HOME FOR LITTLE WANDERERS	10,000.
HORIZONS FOR HOMELESS CHILDREN	1,250.
JEWISH FUND FOR JUSTICE	77,500.
MASS EYE & EAR INFIRMARY	7,500.
MAYYIM HAYYIM LIVING WATERS	5,000.
MUSEUM OF FINE ARTS	5,000.

KARP FAMILY FOUNDATION, STEPHEN R. AND J	04-3226725
NANTUCKET BOYS & GIRLS CLUB	25,000.
NANTUCKET COMEDY FESTIVAL	10,000.
NANTUCKET CONSERVATION FOUNDAT	1,000.
NANTUCKET COTTAGE HOSPITAL	250,000.
NEW ENGLAND AQUARIUM	10,000.
NEW ENGLAND BAPTIST HOSPITAL	10,000.
PERKINS SCHOOL FOR THE BLIND	5,000.
	15,000.
SPECIAL OLYMPICS	5,000.
SUMMER SEARCH	1,000.

KARP FAMILY FOUNDATION, STEPHEN R. AND J	04-3226725
THE BOSTON FOUNDATION	10,000.
THE BOSTON VET CENTER	500.
THE JOEY FUND	25,000.
THE MSPCA-ANGELL	1,000.
THE SECOND STEP, INC	5,000.
TOS/TCEE	10,000.
TRINITY BOSTON FOUNDATION	5,000.
UNION COLLEGE	2,500.
-	
UNITED WAY	1,000.
UNITING AGAINST LUNG CANCER	2,500.

KARP	FAMILY	FOUNDATION,	STEPHEN	R.	AND	J
YOGA RI	EACHES (OUT				_

04-3226725

10,000.

TOTAL TO FORM 990-PF, PART XV, LINE 3A

714,850.



5

2010 Supplemental Information						
Account No.	Taxpayer ID.	Page				
613-738514	04-3226725	4 of 6				

Customer Service:

781-274-9300

6,421.11

447,44 0.22 0.11 . 0.22 0.33

KARP FAMILY FOUNDATION STEPHEN R KARP NEW ENGLAND DEVELOPMENT ONE WELLS AVENUE NEWTON MA 02459-3226

BARCLAYS BANK PLC IPATE FIN 12/06/36 057380778 various 09/17/10 4.075.000 PIRST RAGLE OVERSEAS CLASS A / 32008F101

various 09/17/10 4,075,000 169,499.98
PIRST BAGLE OVERSEAS CLASS A / 32008F101
12/17/09 10/22/10 118.043 2,579.24
SPDR GOLD TR GOLD SHS / 78463V107

This detail h	nformation is not reporte	of to the IDS It me	u acolet man la f	-		Amount
Proceeds Investment Expenses Short-Term Realized Gain/Loss Cong-Term Realized Gain/Loss		a to green a transfer and the second	y assist you in	ak roum prepara		6,884.3 6,750.2
Detail Information	Proceeds	Investment E	xpenses		3 3 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	,
Description		CÚSIÁ	Date	Am	ount	Total
This detail fr	nformation is not reporte	d to the IRS, It ma	y assist you in t	áx return prepara	tion.	
SPDR GOLD TR GOLD SHE		78463V107	01/07/10 02/03/10 03/03/10 04/08/10 05/07/10 06/04/10 07/08/10 08/04/10 10/04/10 11/05/10 12/03/10		8.31- 8.25- 7.09- 7.98- 7.59- 9.20- 9.09- 9.37- 10.04- 13.94- 15.42- mses	212.32- 212.32-
Detail Information	Short-Ter	m Realized G	ain/Loss			-1,
escription/CUSIR ate Acquired Date Sold	Quantity	Proceeds	Cost 1	Basis	Ga	in/Lóss(-)

This information is not reported to the IRS, it may assist you in tax return preparation.

169,499,98 163,078.87 £

2,131,80 a



21 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	plemental informa	ition
Account No.	Taxpayer ID.	Page
613-738514	04-3226725	5 of 6

KARP FAMILY FOUNDATION STEPHEN R KARP NEW ENGLAND DEVELOPMENT ONE WELLS AVENUE NEWTON MA 02459-3226

Customer Service: 781-274-9300

Detail Information Short-Term Realized Gain/Loss	,
scription/CUSIP te Acquired Date Sold Quantity Proceeds, Cost Basis	Gain/Loss(-)
Cost basis, realized gain and loss, and holding period information reported may not reflect all adjustments necessary for	r tax reporting purp
This information is not reported to the IRS it may assist you in tax return preparation.	
DR GOLD TR GOLD SHS / 78463V107	
/17/09 05/07/10 0.000 7.59	0.64
/17/09 06/04/10 9.20 9.20 9.42 f	0.78
7/17/09 07/08/10 0.000 9.09	0.71
/17/09 08/04/10 8.60 f	0.77
/17/09 09/03/10 8.91 f	1.13
arious 10/04/10 0.000 0.000 32:22 27.77 f cp	4.45
arious 11/05/10 0.000 22:42 19.21 f.	3,21
arious 12/03/10 0.000 22212 18.85 f	3.27
USD Subtotal 153.58 137.84	
Totals 84,984 70,233	
Short-Term Realized Gain	6,884,39
Short-Term Realized Loss	0.00
Short-Term Realized Disallowed Loss	0.00
Total Short-Term Realized Gain/Loss	6,884.39

f - FIFO (First-in First-out)

a - Average Cost - Single Category

cp - Cost basis information (or proceeds from short sales) was provided by you. We treat it as originial cost basis. For equities, we will adjust the cost basis for any corporate actions which our system supports from the date the security was transferred to the account. For asset backed fixed income securities, we will adjust the cost basis for principal pay downs from the date the security was transferred to the account. We do not apply any wash sale rules to tax lots with customer-provided cost basis. In certain cases, when positions are transferred between accounts the cost basis information may be automatically transferred and deemed to be customer-provided.

Detail Information Long-Term Realized Gain/Loss	
Description/CUSIP Date Acquired Date Sold Quantity Proceeds Cost Basis Gain/Loss(-)	
Cost basis, realized gain and loss, and holding period information reported may not reflect all adjustments necessary for tax reporting put.	nposes.

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FIRST EAGLE OVERSEAS;C	2ASS_A:/ (32008F10924);	
07/29/09 10/22/10	3,986,730	14,732.59
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06/22/09 10/04/10	1 1 2 2 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	3.34
various 11/05/10	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	7.17
various 12/03/10	16:13 to 20:00000000000000000000000000000000000	7.17



2010 Supplemental Information Account No. Taxpayer ID. 613-738514 04-3226725 6 of 6

KARP FAMILY FOUNDATION STEPHEN R KARP NEW ENGLAND DEVELOPMENT ONE WELLS AVENUE NEWTON MA 02459-3226

Customer Service:

781-274-9300

Detail Information	Long-Term Realized Gain/Loss	
Description/CUSIP Date Acquired Date Sold	Quarrility Proceeds Cost Basis	Gain/Loss(-)

Cost basis, realized gain and toss, and holding period information reported may not reflect all adjustments necessary for tax reporting purposes. This information is not reported to the IRS, it may assist you in tax return preparation.

USD Subtotal	58.64	40.96	,
- Totals	172,233	165,349	·-
is and the assistant	全部的海绵的高级	ong-Term Realized Ga	in 14,750.27
	1 1 2 2 3 3 3 3 4 3 4	ong-Term Realized Lo	0.00 ea
		alized Disallowed Lo	
	Total Long-7	Cerm Realized Gain/Lo	as 14.750.27

a - Average Cost - Single Category

f - FIFO (First-in First-out)

cp - Cost basis information (or proceeds from short sales) was provided by you. We treat it as originial cost basis For equities, we will adjust the cost basis for any corporate actions which our system supports from the date the security was transferred to the account. For asset-backed fixed income securities, we will adjust the cost basis for principal pay downs from the date the security was transferred to the account. We do not apply any wash sale rules to tax lots with customer-provided cost basis. In certain cases, when positions are transferred between accounts the cost basis information may be automatically transferred and deemed to be customer-provided.

Amortization, accretion, and similar adjustments to cost basis are not provided for short-term instruments, unit investment trusts, or securities of foreign issuers.

To see the interactive Helpful hints for Completing Form 1040, Schedule D, visit Fidelity.com/ScheduleD.

efiled 7.11-110

Form **8868**

(Rev. January 2011)

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Form 8868 (Rev. 1-2011)

Department of the Treasury Internal Revenue Service

► File a separate application for each return.

- H.	are filing for an Automatic 3-Month Extension, comple	te only Da	et Land check this box		-	X
	are filing for an Automatic 3-Month Extension, comple are filing for an Additional (Not Automatic) 3-Month Ex			form)		
	complete Part II unless you have already been granted a					
	nic filing (e-file). You can electronically file Form 8868 if y					moration
	d to file Form 990-T), or an additional (not automatic) 3-mo					
	to file any of the forms listed in Part I or Part II with the ex					
	al Benefit Contracts, which must be sent to the IRS in pap					
	www.irs.gov/efile and click on e-file for Chanties & Nonprofits		(300 mondenene)		out of the last	
Part			bmit onginal (no copies needed).			
	pration required to file Form 990-T and requesting an autor			plete		
Part I o	•				l	
_	er corporations (including 1120-C filers), partnerships, REM acome tax returns.	ICs, and t	rusts must use Form 7004 to request an	exter	nsion of time	
Type o	Name of exempt organization			Emp	loyer identification	n number
print	KARP FAMILY FOUNDATION, ST	EPHEN	R. AND			
-	JILL E. KARP, TRUSTEES			0	4-3226725	
File by the	Number street and seem or quite no Ma D.O. how o	ee instruc	tions.			
filing your	C/O NEW ENGLAND DEVELOPMENT	r, on	E WELLS A			
neturn Se		reign add	ress, see instructions.			
	NEWTON, MA 02459					
Enter th	ne Return code for the return that this application is for (file	e a separa	te application for each return)		•	0 4
Applica	ation	Return	Application			Return
ls For		Code	Is For			Code
Form 9	90	01	Form 990-T (corporation)			07
Form 9	90-BL	02	Form 1041-A			08
Form 9	90-EZ	03	Form 4720			09
Form 9	90-PF	04	Form 5227			10
Form 9	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 9	90-T (trust other than above)	06	Form 8870			12
	THE KARP FAMILY	Y FOU	NDATION			
• The	books are in the care of ► ONE WELLS- AVENT	JE <u>1</u>	<u>NEWTON,MA-02459</u>			
Tele	phone No. ► <u>(617)965-8700</u>		FAX No. >			
• If th	e organization does not have an office or place of business	in the Ur	nited States, check this box		.	▶ □
• If thi	s is for a Group Return, enter the organization's four digit of	Group Exe	emption Number (GEN) If thi	s is fo	r the whole group,	check this
box 🕨	. If it is for part of the group, check this box				ers the extension	is for.
1	request an automatic 3-month (6 months for a corporation					
_	OCTOBER 17, 2011 , to file the exemp	t organiza	tion return for the organization named a	bove.	The extension	
is	for the organization's return for:					
	calendar year or		00 0011			
	X tax year beginning MAR 1, 2010	, an	d ending <u>FEB 28, 2011</u>		 ·	
2 If						
1	Change in accounting period					
	A					
	this application is for Form 990-BL, 990-PF, 990-T, 4720, c	or 6069, ei	nter the tentative tax, less any			4 4 5 0
_	onrefundable credits. See instructions.			3a_	\$	<u>1,152.</u>
	this application is for Form 990-PF, 990-T, 4720, or 6069,	-				0 586
_	stimated tax payments made. Include any prior year overp			_3b_	\$	<u>2,576.</u>
	alance due. Subtract line 3b from line 3a. Include your pa					^
	y using EFTPS (Electronic Federal Tax Payment System). S			3c	5	0.
autio <u>u</u>	n. If you are going to make an electronic fund withdrawal w	in this Fo	orm 8858, see Form 8453-EO and Form	<u>ცც79∙</u> [<u>EU for payment ins</u>	structions

For Paperwork Reduction Act Notice, see Instructions.

023841 01-03-11

Form 8868 (Rev. 1-2011)					Page 2
If you are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II and check this b	ох		▶ X
Note. Only complete Part II if you have already been granted an a	automatic	3-month extension on a previously filed	i Form	8868	
If you are filing for an Automatic 3-Month Extension, complete					
Part II Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the original (no c	opies r	needed).	
Name of exempt organization Type or WADD FAMTLY FOLINDARTON CREE			Emp	loyer identifica	tion number
neint KARP PARILLI FOUNDATION, STEPHEN K. AND					\ -
File by the State		 		<u>4-322672</u>	<u>25 </u>
Number, street, and room or suite no. If a P O box, so due date for C / O NEW ENCLAND DEVELOPMENT					
filing your C/O HEW BROTHERT					
return See City, town or post office, state, and ZIP code For a form instructions NEWTON, MA 02459	oreign add	iress, see instructions			
MUNION, IM 02439					
Enter the Return code for the return that this application is for (file	a separa	te application for each return)			0 4
					0,1
Application	Return	Application			Return
ls For	Code	Is For			Code
Form 990	01				
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
STOP! Do not complete Part II if you were not already granted			usly file	ed Form 8868.	
THE KARP FAMILY					
• The books are in the care of • ONE WELLS AVENU	JE			<u>-</u>	
Telephone No ► (617) 965 – 8700	a in tha life	FAX No.			. —
 If the organization does not have an office or place of business If this is for a Group Return, enter the organization's four digit 			60	r the whole are	p L
box If it is for part of the group, check this box	1	ich a list with the names and EINs of al		_	• •
4 I request an additional 3-month extension of time until		ARY 15, 2012	memb	ers the exterisit	JIT IS TOT
5 For calendar year, or other tax year beginning	_		FEB	28, 201	. 1
6 If the tax year entered in line 5 is for less than 12 months, c			Final r		<u>. </u>
Change in accounting period					
7 State in detail why you need the extension					
ADDITIONAL TIME IS REQUIRED TO) FIL	E AN ACCURATE RETURI	1 .		
				· · · · · · · · · · · · · · · · · · ·	
8a —If this application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069, e	nter the tentative-tax, less any -	-		
nonrefundable credits See instructions			8a	\$	<u>1,930.</u>
b If this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated			
tax payments made. Include any prior year overpayment all	owed as a	a credit and any amount paid			
previously with Form 8868			8b	\$	<u>2,576.</u>
c Balance due. Subtract line 8b from line 8a. Include your pa	•	th this form, if required, by using			_
EFTPS (Electronic Federal Tax Payment System) See instru		d Varification	8c		0.
•		d Verification		Constitution of the	
Under penalties of perjury, I declare that I have examined this form, includ it is true, correct, and complete, and that I am authorized to prepare this fo	orm.		ie dest c	it my knowledge a	na beliet,
Signature ► Title ► .	rrust:	EE	Date	>	
				Form non	0 (Dov. 1 2011)

Form **8868** (Rev 1-2011)