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Form **990-PF**

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

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

OMB No 1545-0052

	Ford	alen	dar year 2011 or tax year beginning	-		, and en	ding		
	Nar	ne of	foundation					A Employer identification	number
	Т	ΗE	WILLIAM & LIA G. I						
			ILY FOUNDATION		04-2651199				
			nd street (or P O box number if mail is not delive	red to street	address)		Room/suite	B Telephone number	
	Р	.0	BOX 380828					617-576-10	10
			own, state, and ZIP code					C If exemption application is pe	ending, check here
	C	AM	BRIDGE, MA 02238						
	G C	heck	all that apply: Initial return		Initial return of a fo	rmer public cl	harity	D 1 Foreign organizations	, check here
			Final return		5				
			Address chang		Foreign organizations meeting the 85% test, 2. check here and attach computation				
	H C	_	type of organization: X Section 50		E If private foundation status was terminated				
			ction 4947(a)(1) nonexempt charitable tru		under section 507(b)(1)	(A), check here $ ightharpoonup$			
	I Fa	ır ma	arket value of all assets at end of year J		-	Accru	ıal	F If the foundation is in a 6	60-month termination
			Part II, col (c), line 16)		her (specify)			under section 507(b)(1)	(B), check here $ ightharpoonup$
	▶	<u> </u>	63,004,703.	art I, colui	mn (d) must be on cash b	pasis)			
	Pa	<u>rt l</u>	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)) may not	(a) Revenue and	(b) Net inv		(c) Adjusted net	(d) Disbursements for charitable purposes
			necessarily equal the amounts in column (a))		expenses per books	inco	me	income	(cash basis only)
		1	Contributions, gifts, grants, etc., received	The state of the s	5,500,000.				
		2	Check if the foundation is not required to attain interest on savings and temporary	ch Sch B	460 040				
~		3	cash investments		463,843.		<u>0,793.</u>		STATEMENT 1
2012		4	Dividends and interest from securities		199,089.	19	9,089.		STATEMENT 2
			Gross rents						
9		Þ	Net rental income or floss)		2,760,680.				
SCANNED NOV 2	ne	62	Net gain or (loss) from Sals of lasses is not on line Gross sales price for the Communication of the Communication	10	2,700,000.				
	Revenue	70	assets on line 8a Capitengain net income (from Part IV, line 2)	- 		2 76	0,680.		
Z	Re	7	Net short-term capital gain 2012			4,10	<u>, 000.</u>	<u> </u>	
		_	Information 10)					
Z		9 10a	Gross sales less returns						
Z		h	Gross ales Jesus returns and allowances The Control of the Control						
Ş		_	Gross profit or (loss)	-					
ທ			Other income		936,014.	42	4,653.	0.	STATEMENT 3
		12	Total. Add lines 1 through 11		9,859,626.		5,215.	0.	
		13	Compensation of officers, directors, trustees, etc.	:	0.		0.	0.	0.
		14	Other employee salaries and wages			_			
		15	Pension plans, employee benefits						
	ses	16a	Legal fees						
	Sen	Þ	Accounting fees STM	г 4	4,500.		0.	0.	4,500.
	Expenses	C	Other professional fees STM	г 5	56,000.		<u>6,000.</u>	0.	0.
	<u>×</u>	17	Interest		21,141.		<u>1,141.</u>	0.	0.
	Administrative	18	Taxes STM	г 6	525,723.	21	<u>0,138.</u>	0.	0.
	nis	19	Depreciation and depletion						
	퍨	20	Occupancy						
	Ϋ́	21	Travel, conferences, and meetings						-
	and	22	Printing and publications		000 500				
	ing	23	Other expenses STM'	r 7	228,579.		0.	0.	500.
	Operating	24	Total operating and administrative		025 042	0.0	7 272		F 000
	Ğ		expenses. Add lines 13 through 23		835,943.	28	7,279.	0,	5,000.
	-		Contributions, gifts, grants paid		3,343,000.				3,343,000.
		26	Total expenses and disbursements.		1 170 012	20	7 270	0.	3 340 000
		07	Add lines 24 and 25		4,178,943.	48	7,279.	<u> </u>	3,348,000.
			Subtract line 26 from line 12:		5,680,683.				}
			Excess of revenue over expenses and disburser Net investment income (if negative, enter -		3,000,003.	3 /10	7,936.		
			Adjusted net income (if negative, enter -0-)	- /		3,30	<u>, , , , , , , , , , , , , , , , , , , </u>	0.	

LHA For Paperwork Reduction Act Notice, see instructions

Form **990-PF** (2011)

,	, THE	WILLIAM	& LIA G.	POORVU			
Form 990-PF	(2011) FAN	ILY FOUNI	DATION			04-265119	9 Page 2
Part II	Balance Sheet	Attached schedules and a	mounts in the description	Beginning of yea	ar	End of year	
raitii	Dalance Officet	column should be for end	d-of-year amounts only	(a) Book Value	(h) Book Va	lue (c) Fair M	Market Value

D	art	Balance Sheets Attached schedules and amounts in the description Column should be for end-of-year amounts only	Beginning of year	End o	year
	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	4,563,544.	5,915,805.	5,915,805.
	,	Savings and temporary cash investments	2/303/3113	3/323/3331	
	1				-
	3	Accounts receivable ►			
	l	Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
	1	Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	1 -	Receivables due from officers, directors, trustees, and other			
	٥	·			
		disqualified persons			
	7	Other notes and loans receivable	1		
		Less: allowance for doubtful accounts ▶			
Ø	8	Inventories for sale or use			
Assets	q	Prepaid expenses and deferred charges			
As	ı	Investments - U.S. and state government obligations			
	ı				_
	i	Investments - corporate stock			
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis	1		
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 8	51,719,114.	56,047,536.	57,088,898.
	_		31,719,1140	30,047,330.	37,000,030.
	14	Land, buildings, and equipment: basis			
		Less accumulated depreciation			
	15	Other assets (describe ►)			
	1		·		
	16	Total assets (to be completed by all filers)	56,282,658.	61,963,341.	63,004,703.
_		Accounts payable and accrued expenses	30720270301	01/303/3111	03700177031
	ı				
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ap	21	Mortgages and other notes payable			
	22	Other liabilities (describe)			
		·			
	22	Total liabilities (add lines 17 through 22)	0.	0.	
_	23	<u> </u>			
		Foundations that follow SFAS 117, check here			
G		and complete lines 24 through 26 and lines 30 and 31.			
ë	24	Unrestricted			
an	25	Temporarily restricted			
Bal		Permanently restricted			
ᅙ		Foundations that do not follow SFAS 117, check here			
בַּ		· · · · · · · · · · · · · · · · · · ·			
Net Assets or Fund Balances		and complete lines 27 through 31.		_	
ţ	27	Capital stock, trust principal, or current funds	0.	0.	
Š	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
ğ	29	Retained earnings, accumulated income, endowment, or other funds	56,282,658.	61,963,341.	
let et	30	Total net assets or fund balances	56,282,658.	61,963,341.	
~	• •			<u> </u>	
	24	Total liabilities and not access the delegan	56 202 650	61 062 241	
_	31	Total liabilities and net assets/fund balances	56,282,658.	61,963,341.	
P	art	III Analysis of Changes in Net Assets or Fund B	alances		
\equiv				,	
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		st agree with end-of-year figure reported on prior year's return)		1	56,282,658.
		ramount from Part I, line 27a			5,680,683.
				2	
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	61,963,341.
		eases 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, co	olumn (b), line 30	6_	61,963,341.
					Form 990-PF (2011)

Page 3

b SEE ATTACHED STATEMENT c d e (e) Gross sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis plus expense of sale a b c d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F.M.V. as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of col. (i) over col. (j), if any a b c d e Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 if (loss), enter -0- in Part I, line 7 if gain, also enter in Part I, line 7 if gain, also enter in Part I, line 8 column (c). If gain, also enter in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on Ne For optional use by domestic private foundations subject to the section 4940(a) tax on net investment	}	2	(co	(e) plus	Col. (h) gain not less tha (from col. (2,760,68 minus n-0-) or
(e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale (or allowable) (plus expense of sale plus expense of sale plus expense of sale (or allowable) (plus expense of sale plus expense of sale plus expense of sale plus expense of sale (or allowable) (plus expense of sale plus expense of	}	2	(co	(e) plus	Col. (h) gam not less tha (from col. (2,760,68 minus n-0-) or (h))
(e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F.M.V. as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of col. (i) over col. (j), if any Capital gain net income or (net capital loss) (If gain, also enter in Part I, line 7 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 Part V Qualification Under Section 4940(e) for Reduced Tax on Ne	}	2	Co	(e) plus	Col. (h) gam not less tha (from col. (2,760,68 minus n-0-) or (h))
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(e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale (or allowable) (g) Cost or other basis plus expense of sale (i) F.M.V. as of 12/31/69 (i) F.M.V. as of 12/31/69 (ii) F.M.V. as of 12/31/69 (j) Adjusted basis (k) Excess of col. (i) over col. (j), if any (ii) F.M.V. as of 12/31/69 (iii) F.M.V. as of 12/31/69 (iv) F	}	2	(co	(e) plus	Col. (h) gam not less tha (from col. (2,760,68 minus n-0-) or (h))
(or allowable) plus expense of sale (a) (b) (c) (i) F.M.V. as of 12/31/69 (k) Excess of col. (i)	}	2	Co	(e) plus	Col. (h) gam not less tha (from col. (2,760,68 minus n-0-) or (h))
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Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F.M.V. as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of col. (i) over col. (j), if any (k) Excess of col. (i) over col. (j) over col. (j), if any (k) Excess of col. (i) over col. (j), if any (k) Excess of col. (i) over col. (j)	}	2	(co	l. (k), but r	Col. (h) gain not less tha (from col. (minus n-0-) or (h))
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F.M.V. as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of col. (i) over col. (j), if any (k) Excess of col. (i) over col. (j), if any (k) Excess of col. (ii) over col. (ji), if any (k) Excess of col. (ii) over col. (ji), if any (k) Excess of col. (ii) over col. (ji), if any (k) Excess of col. (ii) over col. (ji), if any (k) Excess of col. (ii) over col. (ji), if any (k) Excess of col. (ii) over col. (ji), if any (k) Excess of col. (ii) over col. (ji), if any (k) Excess of col. (ii) over col. (ji), if any (k) Excess of col. (ii) over col. (ji), if any (k) Excess of col. (ii) over col. (ji), if any (k) Excess of col. (ii) over col. (ji), if any (k) Excess of col. (ii) over col. (ji), if any (k) Excess of col. (ii) over col. (ji), if any (k) Excess of col. (ii) over col. (ji), if any (k) Excess of col. (ii) over col. (ji), if any (k) Excess of col. (ii) over col. (ji), if any (k) Excess of col. (ii) over col. (ji), if any (k) Excess of col. (ii) over col. (ji), if any (k) Excess of col. (ii) over col. (ji) over col. (ji), if any (k) Excess of col. (ii) over col. (ji) over col	}	2	co	l. (k), but r	Col. (h) gain not less tha (from col. (minus n-0-) or (h))
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F.M.V. as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of col. (i) over col. (j), if any [K] Excess of col. (ii) over col. (j), if any [K] Excess of col. (ii) over col. (ji), if any [K] Excess of col. (iii) over col. (ji), if any [K] Excess of col. (iii) over col. (ji) over col. (ji) over col. (ji)	}	2	(co	l. (k), but r	Col. (h) gain not less tha (from col. (minus n-0-) or (h))
(i) F.M.V. as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of col. (i) over col. (j), if any Capital gain net income or (net capital loss) (lf gain, also enter in Part I, line 7 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 Part V Qualification Under Section 4940(e) for Reduced Tax on Ne	}	2	co	l. (k), but r	not less tha (from col. (n-0-) or (h))
Capital gain net income or (net capital loss) Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter 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 Part V Qualification Under Section 4940(e) for Reduced Tax on Ne	}	2	-	Losses	(from col. (2,760,68
Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	}	2				
Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7	}	2				
Capital gain net income or (net capital loss) (If gain, also enter in Part I, line 7) (If (loss), enter -0- in Part I, line 7) (If gain, also enter in Part I, line 8, column (c)). (If (loss), enter -0- in Part I, line 8) (Part V Qualification Under Section 4940(e) for Reduced Tax on Ne	}	2				
Capital gain net income or (net capital loss) (If gain, also enter in Part I, line 7) (If (loss), enter -0- in Part I, line 7) (If gain, also enter in Part I, line 8, column (c)) (If gain, also enter in Part I, line 8, column (c)) (If (loss), enter -0- in Part I, line 8) (Part V Qualification Under Section 4940(e) for Reduced Tax on Ne	}	2				
Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7 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 Part V Qualification Under Section 4940(e) for Reduced Tax on Ne	}	2				
Capital gain net income or (net capital loss) 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 Part V Qualification Under Section 4940(e) for Reduced Tax on Ne	} }	2				2,760,68
If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on Ne	}	2				
If (loss), enter -0- in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on Ne	}	,				
art V Qualification Under Section 4940(e) for Reduced Tax on Ne					37 / 3	
	t Inv	vestn	nent Inc	come	N/A	<u> </u>
s the foundation liable for the section 4942 tax on the distributable amount of any year in the base p Yes," the foundation does not qualify under section 4940(e). Do not complete this part.		•			_	Yes X
Enter the appropriate amount in each column for each year; see instructions before making any ent	ries.			-		745
(a) Base period years Calendar year (or tax year beginning in) Adjusted qualifying distributions Net value of n		aritable		I_	Distrit (col. (b) div	(d) oution ratio vided by col. (c))
2010 2,717,036.	<u>53</u>	,66	4,421	L.		.0506
2009 2,270,503.			5,151			.0529
2008 2,634,070.			0,706			.0667
2007 1,975,613.			3,374			.0558
2006 740,750.	<u>∠</u> 6	, 00	2,188	3.	<u> </u>	.0284
Total of line 1, column (d)				2		.2547
Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number the foundation has been in existence if less than 5 years	er of y	ears		3		.0509
					_	
Enter the net value of noncharitable-use assets for 2011 from Part X, line 5				4		0,273,10
Multiply line 4 by line 3				5		3,070,73
Enter 1% of net investment income (1% of Part I, line 27b)				6		34,87
Add lines 5 and 6				7	_	3,105,61
Enter qualifying distributions from Part XII, line 4				8		3,348,00
If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part us See the Part VI instructions.	ing a 1	1% tax	rate.			

THE WILLIAM & DIA G. POURV		o 4	0651100	
Form 990-PF (2011) FAMILY FOUNDATION Part VI Excise Tax Based on Investment Income (Section	4940(a) 4940(b) 4940(a) or 4	<u> </u>	2651199	Page 4
1a Exempt operating foundations described in section 4940(d)(2), check here ▶		540 ·	- see mstructio	115)
Date of ruling or determination letter: (attach copy of letter)				
b Domestic foundations that meet the section 4940(e) requirements in Part V, check h		1	34,8	279
of Part I, line 27b	isio p [22] and sinoi 170	<u> </u>		, , , ,
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations e	enter 4% of Part I, line 12, col. (b).			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations		2		0.
3 Add lines 1 and 2	,	3	34,8	379.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations	only. Others enter -0-)	4		0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter-	-0-	5	34,8	379.
6 Credits/Payments:	, ,			
a 2011 estimated tax payments and 2010 overpayment credited to 2011	6a 173,400.			
b Exempt foreign organizations - tax withheld at source	6b			
c Tax paid with application for extension of time to file (Form 8868)	6c			
d Backup withholding erroneously withheld	6d			
7 Total credits and payments. Add lines 6a through 6d		7	173,4	<u>100.</u>
8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220	0 is attached	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	>	9		
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount over		10	138,5	
Part VII-A Statements Regarding Activities 11 Enter the amount of line 10 to be: Credited to 2012 estimated tax ▶	34,880. Refunded ►		103,6	41.
	nal lagralation and did it market and a sure to make		Vos	No
1a During the tax year, did the foundation attempt to influence any national, state, or loc any political campaign?	car legislation or did it participate or intervene	ın	 	_
b Did it spend more than \$100 during the year (either directly or indirectly) for political	Laurances (eas instructions for definition)?		1a	X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activi	· · · · · · · · · · · · · · · · · · ·	d 0-	1b	<u> </u>
distributed by the foundation in connection with the activities	ties and copies of any materials publishe	u oi		
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 du	ring the year:		"	 ^
(1) On the foundation. \blacktriangleright \$ (2) On foundation ma			1 1	
e Enter the reimbursement (if any) paid by the foundation during the year for political				
managers. ► \$ 0.				
2 Has the foundation engaged in any activities that have not previously been reported	to the IRS?		2	x
If "Yes," attach a detailed description of the activities				
3 Has the foundation made any changes, not previously reported to the IRS, in its government	erning instrument, articles of incorporation, o	r		
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the	changes		3	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during	the year?		4a X	
b If "Yes," has it filed a tax return on Form 990-T for this year?			4b X	
5 Was there a liquidation, termination, dissolution, or substantial contraction during th	ne 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) sat	isfied either:			
By language in the governing instrument, or				
By state legislation that effectively amends the governing instrument so that no magnetic states are stated in the state of the st	andatory directions that conflict with the state	law		
remain in the governing instrument?			<u>6</u> X	<u> </u>
7 Did the foundation have at least \$5,000 in assets at any time during the year?			7 X	
If "Yes," complete Part II, col (c), and Part XV				
8a Enter the states to which the foundation reports or with which it is registered (see in:	structions) -			
MA	to the Attendary Occasional Control			
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF	, , ,			
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 very 2011 or the tayable year beginning in 2011 (see instructions for Part XIVA) if 1		ioar		
year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If **			9	$\frac{\mathbf{X}}{\mathbf{X}}$
10 Did any persons become substantial contributors during the tax year? If "Yes," attach	a schedule listing their names and addresses		10	<u> </u>

٠	. THE WILLIAM & LIA G. POURVU				
	n 990-PF (2011) FAMILY FOUNDATION	04-2651	<u> 199</u>	!	Page 5
	art VII-A Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of				
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	_	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory	privileges?			
	If "Yes," attach statement (see instructions)		12		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	_X_	
	Website address ► N/A	. (645)		4.0	-
14			<u>576</u>	-10	10
45	Located at P.O. BOX 380828, CAMBRIDGE, MA	ZIP+4 ▶ 02	238		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	Last	3.7	/ ₽	
16	and enter the amount of tax-exempt interest received or accrued during the year At any time during colorder year 2011, did the foundation have an interest in an expective or other without a color to the color of	15		/A Yes	No
10	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank,		1 1	res	No
	securities, or other financial account in a foreign country?		16		<u>X</u>
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country				
Pi	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	 :	<u> </u>		
نت	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1:	a During the year did the foundation (either directly or indirectly):			163	110
.,		es X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	C3 [21] NO			
		es X No			
		es X No			
		es X No		1	
	(5) Transfer any income or assets to a disqualified person (or make any of either available	00 22 110			
	<u> </u>	'es X No			
	(6) Agree to pay money or property to a government official? (Exception Check "No"	00 22 10		:	
	if the foundation agreed to make a grant to or to employ the official for a period after				
		'es X No			
ı	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 instructions)?	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here	ightharpoons			
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	-			
	before the first day of the tax year beginning in 2011?		1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation				
	defined in section 4942(j)(3) or 4942(j)(5)):				
í	a At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginni	ng			
	before 2011?	'es X No			
	If "Yes," list the years >				
ı	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	et			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attac	h			
	statement - see instructions.)	N/A	2b		
(of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
	•,,,,				
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				
		es X No			
ı	olf "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons a				
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to				
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule of				
	Form 4720, to determine if the foundation had excess business holdings in 2011)	N/A	3b		
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		_4a		<u>X</u>
ı	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpos	se that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2011?		4h		Y

Total number of other employees paid over \$50,000

All other program-related investments. See instructions.

Total, Add lines 1 through 3

<u>For</u>	m 990-PF (2011) FAMILY FOUNDATION	04-2	551199	Page 8
P	art X Minimum Investment Return (All domestic foundations must complete this part Foreign four	ndations, see	instructions)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:			
а	Average monthly fair market value of securities	1a	55,951	295.
b	Average of monthly cash balances	1b	5,239	675.
C	Fair market value of all other assets	1c		
d	Total (add lines 1a, b, and c)	1d	61,190,	970.
е	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation) <u>1e</u> 0 .			
2	Acquisition indebtedness applicable to line 1 assets	2		0.
3	Subtract line 2 from line 1d	3	61,190	
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	917	865.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	_5	60,273	,105.
<u>6</u>	Minimum investment return Enter 5% of line 5	6	3,013	655.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	ıd certain		
1	Minimum investment return from Part X, line 6	1	3,013	655.
2a	Tax on investment income for 2011 from Part VI, line 5		•	
b	Income tax for 2011. (This does not include the tax from Part VI.)			
С	Add lines 2a and 2b	2c	34	879.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,978	776.
4	Recoveries of amounts treated as qualifying distributions	4	•	0.
5	Add lines 3 and 4	5	2,978	
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	2,978	776.
P	art XII Qualifying Distributions (see instructions)	<u> </u>		-
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	3,348	
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	3,348	,000.
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		,879.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,313	
	Note The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation (ualifies for the		

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

			_	
	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI,			2010	2011
line 7				2,978,776.
2 Undistributed income, if any, as of the end of 2011				2,3,0,,,0
a Enter amount for 2010 only			0.	
b Total for prior years:				
,		0.		
3 Excess distributions carryover, if any, to 2011:				
a From 2006				
b From 2007 406,487.				
c From 2008 801,895.				
dFrom 2009 127,745.				
e From 2010 172,200.				
f Total of lines 3a through e	1,508,327.			
4 Qualifying distributions for 2011 from				
Part XII, line 4: ► \$ 3,348,000.				
a Applied to 2010, but not more than line 2a		,,	0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.	·· <u>·</u>	
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			· · · · · · · · · · · · · · · · · · ·
d Applied to 2011 distributable amount				2,978,776.
e Remaining amount distributed out of corpus	369,224.			
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a))	0.	, , , , , , , , , , , , , , , , , , , ,		0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,877,551.			
b Prior years' undistributed income. Subtract			11 11 11 11 11 11 11 11 11 11 11 11 11	
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 2010. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2011. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2012				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 2006				_
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2012.				
Subtract lines 7 and 8 from line 6a	1,877,551.			
O Analysis of line 9:				· ·····
a Excess from 2007 406, 487.				
b Excess from 2008 801,895.				
c Excess from 2009 127, 745.				
d Excess from 2010 172, 200.				
e Excess from 2011 369, 224.				Farm 000 DE (0044)

04-2651199 Page 11

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual. Recipient show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year PUBLIC CHARITY CHARITABLE ADOLESCENT CONSULTING SERVICE NONE 13,500. ALBERT SCHWEITZER FELLOWSHIP NONE PUBLIC CHARITY CHARITABLE 50,000, AMER. ARCHITECTURAL FDN NONE PUBLIC CHARITY CHARITABLE 2,500. AMERICAN JEWISH COMMITTEE NONE PUBLIC CHARITY CHARITABLE <u>25,000.</u> BOSTON ARTS ACADEMY NONE PUBLIC CHARITY CHARITABLE 1,000. SEE CONTINUATION SHEET(S) Total ▶ 3a 3 343 000 b Approved for future payment NONE Total

Form 990-PF (2011)

Part XVI-A

Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514		(e)	
			(a) Business	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income
1 Program	n service revenue:		code		code	ranount	- Tanetion meome
				. .	ļ		
b				··			
C							
_							
, —							
g Fees	and contracts from government ag	encies .					
	-	iciicies i					
	rship dues and assessments	}			-		
	on savings and temporary cash						
investm			531120	20,424.			443,419. 199,089.
4 Dividen	ds and interest from securities	Į	531120				199,089.
5 Net rent	tal income or (loss) from real estate:	:					
a Debi	t-financed property						
	debt-financed property	Ì		· · ·		,	
	tal income or (loss) from personal	i					-
	· · ·						
propert		}	501100	545 000			
	vestment income		531120	<u>515,992.</u>			420,049.
8 Gain or	(loss) from sales of assets other						
than inv	rentory		531120	483,513.			2,277,140.
9 Net inco	ome or (loss) from special events						
10 Gross p	rofit or (loss) from sales of inventor	·v [
11 Other re		´					
			1				
							
					 		
d				·			
е							
12 Subtota	l. Add columns (b), (d), and (e)	l		1,019,929.		C	3,339,697.
13 Total. A	Add line 12, columns (b), (d), and (e)				13	4,359,626.
	heet in line 13 instructions to verify						
	-						
Part X	VI-B Relationship of	Activities to	the Acco	emplishment of Ex	emp	t Purposes	
Line No.	Explain below how each activit	y for which incom	e is reported i	n column (e) of Part XVI-A	contril	outed importantly to the acc	complishment of
	the foundation's exempt purpo		y providing fui	nds for such purposes).			
3	INVESTMENT INCOM	ΜE					
4	INVESTMENT INCOM						
7	INVESTMENT INCOM			 			
8	INVESTMENT INCOM			<u>-</u>			
	INVESTIGATION INCOME	<u> </u>					
						,	
				 -			
							
				· · · · · ·			
			-				
							-
							
							
							
						<u>-</u>	.
							
	<u> </u>						

Part XVII	Information Re Exempt Organ		sfers To	and Transactions	and Relations	ships With Nonc	haritable	:	
1 Did the or			of the following	ng with any other organizat	ion described in sec	tion 501(c) of	Т	Yes	No
				27, relating to political orga					
	from the reporting found			- · · · · · · · · · · · · · · · · · · ·					
(1) Cash				G			1a(1)		X
(2) Other	assets						1a(2)		<u>x</u>
b Other tran							1.0(2)		<u></u>
(1) Sales	of assets to a noncharita	ble exempt organiza	tion				1b(1)		X
(2) Purch	nases of assets from a no	ncharitable exempt of	organization				1b(2)		X
• •	ıl of facılıtıes, equipment,	-	-				1b(3)		X
	bursement arrangements						1b(4)		X
(5) Loan:	s or loan guarantees						1b(5)		X
(6) Perfo	rmance of services or me	mbership or fundrai	sing solicitation	ons			1b(6)		X
c Sharing o	f facilities, equipment, ma	ılıng lists, other asse	ts, or paid em	nployees			1c		X
d if the ansv	wer to any of the above is	"Yes," complete the	following sch	edule. Column (b) should a	lways show the fair	market value of the goo	ds, other ass	ets,	
or service	s given by the reporting fo	oundation. If the four	ndation receiv	red less than fair market va	lue in any transactio	n or sharing arrangeme	nt, show in		
) the value of the goods,								
(a) Line no	(b) Amount involved	(c) Name of		e exempt organization	(d) Description	on of transfers, transactions,	and sharing arr	angemen	ts
			N/A						
				·		· · · · · · · · · · · · · · · · · · ·			
		_							
				_					
									
									
						 _			
					 				
-									
				,					
					-				
_		_							
									——
	_						·		
On In the four	adation directly or indirect	the officered with one	ralated to one						
				or more tax-exempt organ	nzations described			1	A1-
	501(c) of the Code (other amplete the following sch	• •	(3)) or in sec	11011 521 /			Yes	\mathbf{x}	NO
D II TES, CC	(a) Name of org			(b) Type of organization	<u> </u>	(c) Description of relati	onchin		——
<u> </u>	N/A	amzation		(b) Type of organization	+	(c) Description of relati	unsinp		——
	N/A			_	+	·			
-					-				
									—
				.,	-				—
Under	penalties of perjury, I declare	that have examined this	s return, includir	ng accompanying schedules and	d statements, and to the	best of my knowledge			_
Sign and be	elief, it is true, correct, and con	nplete Declaration of pre	eparer (other tha	in taxpayer) is based on all infor	mation of which prepare	er has any knowledge	May the IRS d return with the	preparer	r
Here	1100	(Dru-		11/14/17		-000	shown below	see instr	
	ature of officer or trustee			Date	Title		LAJ 162		No
	Print/Type preparer's na		Preparer's s	ignature ()	Date	Check If PT	IN		—
	, , , , , , , , , , , , , , , , , , ,		an			self- employed	-		
Paid	JANET SCOT	т	JANET	- /	11/12/12		00301	539	
Preparer	Firm's name ► WAL				<u></u>	Firm's EIN ▶ 04			
Use Only	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			- · · ·			J		
•	Firm's address ▶ 50	1 PROVIDE	NCE HT	GHWAY		 	_		
		RWOOD, MA				Phone no. (61	7) 44	7-27	700
		<u></u>	<u> </u>	<u> </u>		11.110110110. 101	Form 990		
							. 01111 000	,2	011)

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

Employer identification number

▶ \$

2011

THE WILLIAM & LIA G. POORVU FAMILY FOUNDATION 04-2651199 Organization type (check one) Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 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 Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc. purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

religious, charitable, etc., contributions of \$5,000 or more during the year.

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) (2011)

Name of organization

THE WILLIAM & LIA G. POORVU

FAMILY FOUNDATION

04-2651199

Employer identification number

Part I	Contributors (see instructions)	Use duplicate copies of Part I if additiona	I space is needed
(a)		(b)	(c)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
110.	Humo, address, and Emily	Total contributions	Type of contribution
1	WILLIAM J. POORVU P O BOX 380828 CAMBRIDGE, MA 02238	\$ 5,500,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total 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) Total 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) Total 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) Total 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) Total contributions	(d) Type of contribution
			Person Payroll Noncash Complete Part II if there is a noncash contribution

Name of organization

Employer identification number

THE WILLIAM & LIA G. POORVU FAMILY FOUNDATION

<u>04-26</u>51199

Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is nee-

(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate)	(d) Date received
Part I		(see instructions)	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	990, 990-EZ, or 990-PF) (

Name of orga			Employer identification number
	LLIAM & LIA G. POORVU FOUNDATION		04-2651199
Part III	Exclusively religious, charitable, etc., individ year Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc., Use duplicate copies of Part III if additional	contributions of \$1,000 or less for	(7), (8), or (10) organizations that total more than \$1,000 for the
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gif	ft
	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee
.			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gif	ft
-	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gif	ft
<u> </u>	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee
-			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gif	ft
-	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee

Part IV Capital Gains and Lo	sses for Tax on Investment Income				
(a) List and 2-story br	describe the kind(s) of property soluck warehouse; or common stock, 2	d, e.g., real estate, 00 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a FROM BAUPOST 1	983 C-1		P		
b FROM BAUPOST 1			P		
c FROM BAUPOST 1	983 C-1		P		
d FROM ABRAMS CA			P		
e FROM ABRAMS CA	PITAL		P		
FROM CITIC CAP	ITAL CHINA PARTN	ERS II	P		
9					
h					**
<u>1</u>					
				_	
_k					
m					
n					
0		<u> </u>			
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h (e)) Gain or (loss) plus (f) minus (g)	
a					<u>87,245.</u>
b				2,	523,038.
С					82,983.
<u>d</u>					31,282.
<u>e</u>	-				35,913.
f				 	<u>219.</u>
9					
h					
1					
L L					
k I					
m -					
n .					
0			-		
	ng gain in column (h) and owned by	the foundation on 12/31/69	(1) 1 0	sses (from col. (h))	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col. (j), if any	Gains (excess	of col. (h) gain over not less than "-0-")	col. (k),
a					87,245.
b				2	523,038.
c					82,983.
d					31,282.
e					35,913.
f					219.
g					
h					
1					
<u>k</u>					
1					
m					
n					
0			<u> </u>		
2 Capital gain net income or (net ca	pital loss) { If gain, also enter If (loss), enter "-0	n Part I, line 7	2	2.	760,680.
3 Net short-term capital gain or (los If gain, also enter in Part I, line 8,	ss) as defined in sections 1222(5) an column (c).	_			
If (loss), enter "-0-" in Part I, line 8	<u> </u>	J	3	N/A	

FORM 990-PF INTEREST ON SAVINGS A	AND TEMPORARY CA	ASH INVESTMENTS	STATEMENT 1
SOURCE			AMOUNT
BANK OF AMERICA			5.
FIDELITY MASS MUNI MONEY MKT			46.
INTEREST INCOME - MA STATE TAX REP			8.
PASS-THRU ABRAMS CAPITAL PARTNERS PASS-THRU ABRAMS CAPITAL PARTNERS			7,801.
INTEREST	II - MUNI BOND		2,387.
PASS-THRU BAUPOST LP 1983 C-1 - IN	JTEREST		382,304.
PASS-THRU BAUPOST LP 1983 C-1 - M		ST	70,617.
PASS-THRU CITIC CAPITAL CHINA PART			2.
PASS-THRU ENERGY CAPITAL PARTNERS	II - INTEREST		673.
TOTAL TO FORM 990-PF, PART I, LINE	E 3, COLUMN A		463,843.
FORM 990-PF DIVIDENDS AND	O INTEREST FROM	SECURITIES	STATEMENT 2
FORM 990-PF DIVIDENDS AND SOURCE	O INTEREST FROM GROSS AMOUNT	SECURITIES CAPITAL GAINS DIVIDENDS	STATEMENT 2 COLUMN (A) AMOUNT
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
	GROSS AMOUNT 5,808.	CAPITAL GAINS DIVIDENDS 0.	COLUMN (A) AMOUNT 5,808.
SOURCE ABRAMS CAPITAL PARTNERS	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
SOURCE ABRAMS CAPITAL PARTNERS CBL ASSOCIATES FIDELITY INVESTMENT FIDELITY MASS MUNI MONEY MARKET	GROSS AMOUNT 5,808. 37,162.	CAPITAL GAINS DIVIDENDS 0. 0.	COLUMN (A) AMOUNT 5,808. 37,162.
SOURCE ABRAMS CAPITAL PARTNERS CBL ASSOCIATES FIDELITY INVESTMENT FIDELITY MASS MUNI MONEY MARKET GOLDMAN SACHS FED'L PORTFOLIO	GROSS AMOUNT 5,808. 37,162. 120. 20. 109.	CAPITAL GAINS DIVIDENDS 0. 0. 0. 0. 0.	COLUMN (A) AMOUNT 5,808. 37,162. 120. 20. 109.
SOURCE ABRAMS CAPITAL PARTNERS CBL ASSOCIATES FIDELITY INVESTMENT FIDELITY MASS MUNI MONEY MARKET GOLDMAN SACHS FED'L PORTFOLIO PASS-THRU - BAUPOST LP C-I	GROSS AMOUNT 5,808. 37,162. 120. 20.	CAPITAL GAINS DIVIDENDS 0. 0. 0. 0.	COLUMN (A) AMOUNT 5,808. 37,162. 120. 20.
SOURCE ABRAMS CAPITAL PARTNERS CBL ASSOCIATES FIDELITY INVESTMENT FIDELITY MASS MUNI MONEY MARKET GOLDMAN SACHS FED'L PORTFOLIO	GROSS AMOUNT 5,808. 37,162. 120. 20. 109. 113,157.	CAPITAL GAINS DIVIDENDS 0. 0. 0. 0. 0. 0. 0.	COLUMN (A) AMOUNT 5,808. 37,162. 120. 20. 109. 113,157.
SOURCE ABRAMS CAPITAL PARTNERS CBL ASSOCIATES FIDELITY INVESTMENT FIDELITY MASS MUNI MONEY MARKET GOLDMAN SACHS FED'L PORTFOLIO PASS-THRU - BAUPOST LP C-I PASS-THRU - CITIC CAPITAL CHINA	GROSS AMOUNT 5,808. 37,162. 120. 20. 109.	CAPITAL GAINS DIVIDENDS 0. 0. 0. 0. 0.	COLUMN (A) AMOUNT 5,808. 37,162. 120. 20. 109.
SOURCE ABRAMS CAPITAL PARTNERS CBL ASSOCIATES FIDELITY INVESTMENT FIDELITY MASS MUNI MONEY MARKET GOLDMAN SACHS FED'L PORTFOLIO PASS-THRU - BAUPOST LP C-I PASS-THRU - CITIC CAPITAL CHINA PARTNERS	GROSS AMOUNT 5,808. 37,162. 120. 20. 109. 113,157.	CAPITAL GAINS DIVIDENDS 0. 0. 0. 0. 0. 0. 0.	COLUMN (A) AMOUNT 5,808. 37,162. 120. 20. 109. 113,157.

199,089.

199,089.

0.

TOTAL TO FM 990-PF, PART I, LN 4

FORM 990-PF	OTHER	INCOME		STATEMENT	3
		(A) REVENUE	(B) NET INVEST-	(C) ADJUSTEI	n
DESCRIPTION		PER BOOKS	MENT INCOME	NET INCO	
FROM PASS-THRU ENTITY - BAUPO	ST LP				
C-1 ORDINARY INCOME FROM PASS-THRU ENTITY - BAUPO	እ ኖጥ ፒ. ኮ	295,855.	295,855.	•	0.
C-1 RENTAL REAL ESTATE INCOME	2	-49,505.	-49,505.	•	0.
FROM PASS-THRU ENTITY - BAUPC C-1 SEC. 1256 CONTRACTS & SAD	DLES	-27.	-27.	•	0.
FROM PASS-THRU ENTITY - BAUPC C-1 OTHER PORTFOLIO INCOME	ST LP	-170,756.	-170,756.		0.
CAPITAL GAIN REPORTED AS UBTI	•	43,410.	2,0,,30.		o.
INTEREST REPORTED AS UBTI		20,424.	0.	•	0.
SECTION 1231 GAIN REPORTED AS	UBTI	440,103.	0.	•	0.
STATE TAX REFUNDS FROM PASS-THRU ENTITY-ABRAMS		7,424.	0.	•	0.
CAPITAL ORDINARY INCOME FROM PASS-THRU ENTITY - ABRAM		-294.	-294.	•	0.
CAPITAL OTHER PORTFOLIO INCOM (LOSS)	ΙE	9,487.	9,487.		0.
FROM PASS-THRU ENTITY - BAUPC C-1 CANCELLATION OF DEBT INCO		339,893.	339,893		0.
TOTAL TO FORM 990-PF, PART I,	LINE 11	936,014.	424,653.	•	0.
FORM 990-PF	ACCOUNT	ING FEES		STATEMENT	4
	(A) EXPENSES	(B) NET INVEST-	(C) ADJUSTED	(D) CHARITAI	ים זם
DESCRIPTION	PER BOOKS				
ACCOUNTING FEES	4,500	. 0	. (4,50	00.
TO FORM 990-PF, PG 1, LN 16B	4,500	. 0	. (· 4,50	00.

FORM 990-PF	OTHER PROFES	SIONAL FEES	Si	PATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
MANAGEMENT FEES	56,000.	56,000.	0.	0.
TO FORM 990-PF, PG 1, LN 160	56,000.	56,000.	0.	0.
FORM 990-PF	TAX	ES	Si	PATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FEDERAL TAXES FOREIGN TAXES STATE TAXES	315,585. 84,474. 125,664.		0. 0. 0.	0. 0. 0.
TO FORM 990-PF, PG 1, LN 18	525,723.	210,138.	0.	0.
FORM 990-PF	OTHER E	XPENSES	Si	PATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
DEDUCTIONS RELATED TO PORTFOLIO INCOME ANNUAL REPORT	228,079.	0.	0.	0. 500.
TO FORM 990-PF, PG 1, LN 23	228,579.	0.	0.	500.

FORM 990-PF OT	THER	INVESTMENTS		STATEMENT 8
DESCRIPTION .		VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
BAUPOST LP 1983 C-1		COST	50,535,110.	50,419,289
CBL ASSOCIATES		COST	1,298,150.	702,952
NEW VERNON FUND		COST	1,250,000.	2,307,889
SONESTA INTERNATIONAL		COST	427,877.	365,987
CITIC CAPITAL PARTNERS		COST	738,254.	1,392,339
ABRAMS CAPITAL PARTNERS II LP		COST	1,112,197.	1,115,900
CITIC CAPITAL CHINA PARTNERS II I	LP	COST	206,224.	203,100
ENERGY CAPITAL PARTNERS II-B LP		COST	479,724.	581,442
TOTAL TO FORM 990-PF, PART II, LI	INE 1	3	56,047,536.	57,088,898.
		-		
		- LINE 1A ATION MANAGE	RS	STATEMENT 9

NAME OF MANAGER

LIA G. POORVU WILLIAM J. POORVU FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

10

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

WILLIAM J. POORVU P.O. BOX 380828 CAMBRIDGE, MA 02238

TELEPHONE NUMBER

617-576-1010

FORM AND CONTENT OF APPLICATIONS

NO SPECIFIC APPLICATION FORM IS NECESSARY. COMPLETE INFORMATION ON THE CHARITABLE PURPOSE OF THE REQUEST IS REQUIRED.

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

NO RESTRICTIONS, EXCEPT IT MUST BE A TAX EXEMPT CHARITABLE ORGANIZATION.

Form **8868**

(Rev. January 2012)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

• If yo	u are filing for an Automatic 3-Month Extension, complet	te only Pa	irt I and check this box			▶ X
-	u are filing for an Additional (Not Automatic) 3-Month Ex	-		this form).	-	
•	complete Part II unless you have already been granted a	_			m 8868.	
	onic filing (e-file). You can electronically file Form 8868 if y		·	-		a comoration
	d to file Form 990-T), or an additional (not automatic) 3-moi			-		•
•	to file any of the forms listed in Part I or Part II with the exc		•		•	
	al Benefit Contracts, which must be sent to the IRS in pap					
	• •		(see instructions). For more details t	AT THE EIGC	uone ning c	n trus ionn,
Part	www.rs.gov/efile and click on e-file for Charities & Nonprofits Automatic 3-Month Extension of Time		submit original (no copies ne	eded).	<u></u>	
A corp	oration required to file Form 990-T and requesting an autor	natic 6-mo	onth extension - check this box and	complete		
Part I o	•					▶ □
All oth	er corporations (including 1120-C filers), partnerships, REM ncome tax returns.	ICs, and t	rusts must use Form 7004 to reques	t an exten	sion of time	, <u> </u>
Туре	r Name of exempt organization or other filer, see instru	ctions		Employer	identification	n number (EIN) or
print THE WILLIAM & LIA G. POORVU					(=::, =:	
P	FAMILY FOUNDATION			X	04-26	51199
File by th	6 Number street and some security as Ma DO hours	ee instruc	tions		cunty number	
due date	· · ·	00 111011100			ounty numbe	1 (0014)
return Sonstruction	~	veian add	ress see instructions			
HIQU GOV	CAMBRIDGE, MA 02238	neigii add	ress, see manuchons			
	CAMBRIDGE, MA 02230					
Enter t	he Return code for the return that this application is for (file	e a separa	te application for each return)			0 4
	etion.	Return				Return
Applic	auon		Application			1
is For	•••	Code	Is For			Code
Form 9		01	Form 990-T (corporation)			07
Form 9		02	Form 1041-A			08
Form 9		01	Form 4720			09
Form 9	······	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 FOUNDATION					
	books are in the care of ▶ P.O. BOX 380828	3 - C	<u>AMBRIDGE, MA 02238</u>			
Tele	ephone No. ► <u>(617)</u> 576-1010		FAX No. 🕨			
	e organization does not have an office or place of business					
• if th	is is for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN) t	f this is fo	the whole g	roup, check this
box 🕨	F					
1 1	request an automatic 3-month (6 months for a corporation	required	to file Form 990-T) extension of time	untd		
	AUGUST 15, 2012 , to file the exemp	t organiza	tion return for the organization name	ed above.	The extensio	n
	s for the organization's return for					
ı	►X calendar year <u>2011</u> or					
ı	tax year beginning	, an	d ending			
						
2	f the tax year entered in line 1 is for less than 12 months, c	heck reas	on: Initial return	Fınal retur	n	
	Change in accounting period					
	•					
3a	f this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069. e	nter the tentative tax, less any			
	nonrefundable credits. See instructions.			3a	\$	173,400.
-	f this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and	 30		_, _, _, _,
	estimated tax payments made. Include any prior year overp	•		31-	\$	173,400.
	Balance due. Subtract line 3b from line 3a Include your pa			3b	Ψ	T13,200.
	•	-	• •		•	^
	by using EFTPS (Electronic Federal Tax Payment System).			3c	504	0.
	nn. If you are going to make an electronic fund withdrawal v			orm 8879-		
LHA	For Privacy Act and Paperwork Reduction Act Notice,	see instr	uctions.		Form 8	868 (Rev 1-2012)

• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box	Page 2
	\mathbf{x}
Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.	
If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).	
Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).	
Enter filer's identifying number, see instr	uctions
Type or Name of exempt organization or other filer, see instructions Employer identification number	
print THE WILLIAM & LIA G. POORVU	(=11.1)
File by the FAMILY FOUNDATION X 04-265119	•
due date for Number, street, and room or suite no. If a P.O. box, see instructions Social security number (SSN)	
return See P.O. BOX 380828	
ristructions City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
CAMBRIDGE, MA 02238	
Enter the Return code for the return that this application is for (file a separate application for each return)	0 4
	0 4
Application Return Application	Return
Is For Code Is For	Code
Form 990 01	Coue
Form 990-BL 02 Form 1041-A	08
Form 990-EZ 01 Form 4720	09
Form 990-PF 04 Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069	11
	12
STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.	
THE FOUNDATION	
• The books are in the care of P.O. BOX 380828 - CAMBRIDGE, MA 02238	
Telephone No. ► (617) 576-1010 FAX No. ►	
A Make annual called the contract of the contract of the contract of the first of the contract	
If the organization does not have an office or place of business in the United States, check this box	
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, ch	
• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box > and attach a list with the names and EINs of all members the extension is f	
• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box and attach a list with the names and EINs of all members the extension is for the until NOVEMBER 15, 2012.	
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 If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, chebx If it is for part of the group, check this box I request an additional 3-month extension of time until NOVEMBER 15, 2012. For calendar year 2011, or other tax year beginning, and ending If the tax year entered in line 5 is for less than 12 months, check reason Initial return Change in accounting period State in detail why you need the extension ADDITIONAL TIME AND INFORMATION IS NEEDED TO FILE A COMPLETE AND ACCURATE RETURN If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 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 allowed as a credit and any amount paid 	,400.
 If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, chebx	or
 If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, chebx	,400.
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