

## See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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.

Department of the Treasury	,
Internal Revenue Service	

F	For calendar year 2011 or tax year beginning , and ending									
	Nan	ne.o	f-foundation		<del></del>	A-Employer-identificatio	n-number-			
	=E]	Đ₩	'ARD=&=NANCY=STAVIS=CHAR	TABLE						
<u>-</u>	F	<u>UC</u>	NDATION			- 04-2942784				
	Num	ber a	and street (or P O box number if mail is not delivered to street	Room/suite	B Telephone number					
	567 BOYLSTON STREET					(617)482-	6349			
(	-		own, state, and ZIP code			C If exemption application is	pending, check here			
_	B	<u>RO</u>	OKLINE, MA 02445		· - · -					
G	C	heck	k all that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organization	ns, check here			
			Final return	Amended return		F				
_			Address change	Name change		Foreign organizations m 2. check here and attach of	computation			
H	C	٠.	k type of organization: X Section 501(c)(3) ex			E If private foundation st	atus was terminated			
<u>_L</u>				Other taxable private founda	ation	under section 507(b)(1	I)(A), check here			
I			arket value of all assets at end of year   J   Account	•	Accrual	F If the foundation is in a	60-month termination			
				ther (specify)		under section 507(b)(1	1)(B), check here			
Г	<u>&gt;</u>		384,880. (Part I, colu	mn (d) must be on cash i	basis.)					
	Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)			
		1	Contributions, gifts, grants, etc., received	166,586.		N/A				
		2	Check If the foundation is not required to attach Sch. B							
		3	Interest on savings and temporary cash investments	94.	94.	,	STATEMENT 1			
		4	Dividends and interest from securities	7,089.	7,089.	,	STATEMENT 2			
		5a	Gross rents							
		b	Net rental income or (loss)							
	<u>a</u>	6a	Net gain or (loss) from sale of assets not on line 10	4,042.						
	en	b	Gross sales price for all assets on line 6a 174,328.							
	Revenue	7	Capital gain net income (from Part IV, line 2)		4,042.					
	-	8	Net short-term capital gain							
	- 1	9	Income modifications Gross sales less returns							
1 . 7	Ì	10a				***	<del></del>			
2012			Less Cost of goods sold							
		11	Gross profit or (loss) Other income	-209.	-209		STATEMENT 3			
E 25		12	Total. Add lines through VED	177,602.	11,016	<del></del>	SIAIEMENI 3			
_	$\neg$	13		0.	0.		0.			
MAY	- 1	14	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0.			<u> </u>			
	- 1	15	Other employee salaries and wages 12 Pension glaas, employee benefits							
<u>.                                    </u>	ıΩ		Legal fees			· · · · ·				
Z	en		Accounting fees OCOEN LIT							
4	낊	C	Other professional fees							
SCANNED	Ş.	17	Interest							
y.	Operating and Administrative Expense	18	Taxes STMT 4	342.	192.		0.			
	nist	19	Depreciation and depletion		<u> </u>					
	Ξ	20	Occupancy							
	ĕΙ	21	Travel, conferences, and meetings							
	au	22	Printing and publications							
	ing	23	Other expenses STMT 5	1,748.	1,748.	,	0.			
	rat	24	Total operating and administrative							
	칅		expenses. Add lines 13 through 23	2,090.	1,940.		0.			
			Contributions, gifts, grants paid	82,867.			82,867.			
		26	Total expenses and disbursements.	04 057	1 040		00.005			
_	$\dashv$	07	Add lines 24 and 25	84,957.	1,940.		82,867.			
			Subtract line 26 from line 12:	02 645						
			Excess of revenue over expenses and disbursements  Net investment income (if negative, enter -0-)	92,645.	9,076					
			Adjusted net income (if negative, enter -0-)		3,0/0.	N/A	-			
12	2350		HA For Panerwork Reduction Act Notice see	instructions	L	I IV/A	Form <b>990-PF</b> (2011)			

· EDWARD & NANCY STAVIS CHARITABLE

<u>Fo</u>	<u>Form.990-PF (2011) FOUNDATION 0.4 = 2.9.42.7.8.4 Page-2</u>						
	art	Balance Sheets Atlached schedules and amounts in the description column should be for end-of-year amounts only	Beginning_of_year	eginning_of_yearEnd=of_year			
	ait	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing	21,160.	7,117.	7,117.		
	_2_	Savings and temporary cash investments					
<del></del>		-Accounts receivable					
		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					
		disqualified persons					
	7	Other notes and loans receivable					
	`	Less: allowance for doubtful accounts					
ιņ	8	Inventories for sale or use					
Assets	9	Prepaid expenses and deferred charges			<del>.</del>		
As	10a	Investments - U.S. and state government obligations			· · · · · · · · · · · · · · · · · · ·		
	1	Investments - corporate stock STMT 6	197,950.	328,270.	350,386.		
	1	Investments - corporate bonds		320,2700	330,300.		
	1	Investments - land, buildings, and equipment, basis					
	''	Less accumulated depreciation					
	12	Investments - mortgage loans			<del></del>		
	13	Investments - other STMT 7	36,717.	32,756.	27,377.		
	14	Land, buildings, and equipment: basis	30,717	32,730.	27,3774		
	'	Less accumulated depreciation					
	15	Other assets (describe		-			
	13	other assets (describe					
	16	Total assets (to be completed by all filers)	255,827.	368,143.	384,880.		
	17	Accounts payable and accrued expenses	255,027.	200,143.	204,000.		
	18	Grants payable					
10	19	Deferred revenue					
Liabilities	20	ŀ					
ij	21	Loans from officers, directors, trustees, and other disqualified persons  Mortgages and other notes payable					
<u>:</u>	1	Other liabilities (describe )					
	**	other habilities (describe					
	23	Total liabilities (add lines 17 through 22)	0.	0.			
	20	Foundations that follow SFAS 117, check here					
		and complete lines 24 through 26 and lines 30 and 31.					
è	24	Unrestricted					
anc	25	Temporarily restricted					
Bal	26	Permanently restricted					
Net Assets or Fund Balances	20	Foundations that do not follow SFAS 117, check here					
Ē		and complete lines 27 through 31.					
ō	27	Capital stock, trust principal, or current funds	10.	10.			
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.			
Ass	29	Retained earnings, accumulated income, endowment, or other funds	255,817.	368,133.			
ē	30	Total net assets or fund balances	255,827.	368,143.			
Z		Total not associate of family surfaces	2337027.	300,143.			
	31	Total liabilities and net assets/fund balances	255,827.	368,143.			
Ξ				300 / 1 43 6			
LF	art	Analysis of Changes in Net Assets or Fund Ba	aiances				
1	Tota	I 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	255,827.		
2	Ente	r amount from Part I, line 27a		2	92,645.		
3	Othe	r increases not included in line 2 (itemize) ADJUSTMENT   2	AT END OF YEAR		19,671.		
		lines 1, 2, and 3		4	368,143.		
5	Decr	eases not included in line 2 (itemize)		5	0.		
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	368,143.		
					Farm 000 DE (0011)		

123511 12-02-11

FOUNDATION Form\_990-PF\_(20.14). 04-2942784 Page 3 Part IV Capital Gains and Losses for Tax on Investment Income (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 2-story brick warehouse; or common stock, 200 shs. MLC Co.) (mo., day, yr.) (mo., day, yr.) -1a-MORGAN-STANLEY-SMITH-BARNEY-PUBLICLY-TRADED -b=SB@URITIES VARIOUS VARIOUS c MORGAN-STANLEY SMITH BARNEY-PUBLICLY d SECURITIES P **VARIOUS** VARIOUS (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) a 73,491. -5,132. 68,359 b C d 105,969 96,795 9,174. е 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 (i) Adjusted basis (k) Excess of col. (i) Losses (from col. (h)) (i) F.M.V. as of 12/31/69 as of 12/31/69 over col. (j), if any а -5,132.b C 9,174. d е If gain, also enter in Part I, line 7 4,042. 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 (a) Base period years Adjusted qualifying distributions Net value of noncharitable-use assets (col. (b) divided by col. (c)) Calendar year (or tax year beginning in) 68,999 277,841 2010 .248340 71,658. 267,804. .267576 2009 118,039. 324,313. .363966 2008 90,541. 416,158. .217564 2007 60,773 .155251 2006 391.449. 2 Total of line 1, column (d) 1.252697 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 .250539 3 225,262. Enter the net value of noncharitable-use assets for 2011 from Part X, line 5 4 56,437. Multiply line 4 by line 3 5 91. Enter 1% of net investment income (1% of Part I, line 27b) ß 56,528. 7 Add lines 5 and 6 7 82,867. 8 Enter qualifying distributions from Part XII, line 4 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.

Form **990-PF** (2011)

	EDWARD & NANCY STAVIS CHARITABLE				
	1990:PF(20.1:1)FOUNDATION		<u> 42784</u>		
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948 s	ee instru	ctio	<u>ns) —</u>
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.				
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)				
	Domestic_foundations that meet the section 4940(e)-requirements in Part V, check-here \( \subseteq \textbf{X} \) and enter=1%	_1_			<u>91.</u>
	of Part-I,-line-27b				
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	-		_	•
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			0.
_	Add lines 1 and 2	3			91.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			<u>0.</u>
_	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		_	<u>91.</u>
6	Credits/Payments: 2011 estimated tax payments and 2010 overpayment credited to 2011   6a   931.				
	· · · · · · · · · · · · · · · · · · ·				
	Exempt foreign organizations - tax withheld at source  Tax paid with application for extension of time to file (Form 8969)	ł			
	Tax paid with application for extension of time to file (Form 8868)  Backup withholding erroneously withheld  6d	1			
_	Backup withholding erroneously withheld  Total credits and payments. Add lines 6a through 6d	_		٥	31.
7		7	<del></del>		<u> 31.</u>
8 9	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached  Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		Q	40.
	Enter the amount of line 10 to be: Credited to 2012 estimated tax	11			0.
	irt VII-A Statements Regarding Activities	1 1 1			<u> </u>
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın		Yes	No
	any political campaign?		1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	ed or			
	distributed by the foundation in connection with the activities				
C	Did the foundation file Form 1120-POL for this year?		1c		х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		7.5		
	(1) On the foundation. $\blacktriangleright$ \$ 0. (2) On foundation managers. $\blacktriangleright$ \$ 0.				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	•			
	managers. ▶ \$ 0 .				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
	If "Yes," attach a detailed description of the activities.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	or			
	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	ļ	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b	<u> </u>	<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If "Yes," attach the statement required by General Instruction T.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	e law			1
	remain in the governing instrument?		6	X	ļ
7	Did the foundation have at least \$5,000 in assets at any time during the year?		7_	_X_	<u> </u>
	If "Yes," complete Part II, col. (c), and Part XV.				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				
	<u>MA</u>				
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)				
	of each state as required by General Instruction G? If "No," attach explanation		8b	X	ļ
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	endar			
	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV		9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10	L	X

.EDWARD & NANCY STAVIS CHARITABLE FOUNDATION 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) X 11 -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= -13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Website address > N/A Telephone no. > 617-482-6349 The books are in care of **EDWARD & NANCY STAVIS** Located at ▶ 567 BOYLSTON STREET, BROOKLINE, MA ZIP+4 ▶02445 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here N/A and enter the amount of tax-exempt interest received or accrued during the year 15 Yes No 16 At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? 16 X See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required Yes No File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 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? (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 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 Х before the first day of the tax year beginning in 2011? 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 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning \_\_\_ Yes X No before 2011? 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 statement - see instructions.) N/A 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.

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X

3b

4a

Yes X No

N/A

during the year?

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form 4720, to determine if the foundation had excess business holdings in 2011.)

had not been removed from jeopardy before the first day of the tax year beginning in 2011?

b If "Yes," did it have excess business holdings in 2011 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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

EDWARD & NANCY STAVIS CHARITABLE Form 990-PF (2011) · FOUNDATION 04-2942784 Page 6 <u>Part VII\_B Statements Regarding Activities for Which Form 4720 May Be Required (continued)</u> •5a=During=the-year=did-the-foundation-pay-or-incur-any-amount-to-Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, -Yes-X-No any-voter-registration-drive?-Yes X No :(3)=Provide:a:grant-to:an:individual-for-travel;study;for:other:similar:purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section 🗕 Yes 🕱 No 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations N/A section 53.4945 or in a current notice regarding disaster assistance (see instructions)? 5b Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? N/A \_ Yes [ If "Yes," attach the statement required by Regulations section 53.4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b X If "Yes" to 6b, file Form 8870. Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? 7b Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred compensation (c) Compensation (b) Title, and average hours per week devoted to position (e) Expense account, other (a) Name and address (If not paid, enter -0-) allowances EDWARD STAVIS TRUSTEE 567 BOYLSTON STREET BROOKLINE, MA 02445 1.00 0 0 0. NANCY STAVIS TRUSTEE 567 BOYLSTON STREET BROOKLINE, MA 02445 1.00 0 0 0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deferred (e) Expense account, other (b) Title, and average (a) Name and address of each employee paid more than \$50,000 hours per week devoted to position (c) Compensation allowances compensation NONE

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

## . EDWARD & NANCY STAVIS CHARITABLE FOUNDATION Form 990-PF (2011) Information-About-Officers, Directors, Trustees, Foundation-Managers, Highly-Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services. If none, enter "NONE." \_\_\_\_\_(a) Name and address of each person paid more than \$50,000\_\_\_\_\_\_ (b)-Type-of-service-(c) Compensation= NONE— Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the Expenses number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount N/A

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▶

All other program-related investments. See instructions.

Total. Add lines 1 through 3

	rm_990-Pt-(2014)		3-9.4-2=/-84Page.8_
- [*F	Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, se	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
6	a_Average monthly fair-market-value of-securities	1a	<u>         214,553.                                   </u>
<u>—</u> t	=Average of monthly cash balances = -	-1b	14,139.
(	Fair market value of all other assets	1c	
(	Total (add lines 1a, b, and c)	1d	228,692.
—	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	228,692.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	3,430.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	225,262.
6	Minimum investment return. Enter 5% of line 5	6	11,263.
F	Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are	nd certain	·-
_	foreign organizations check here  and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	11,263.
28		]	
t	Income tax for 2011. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	91.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	11,172.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	11,172.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	11,172.
F	Part XII Qualifying Distributions (see instructions)		
_		1 1	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	.	00 067
	(-),	1a	82,867.
١		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
	Suitability test (prior IRS approval required)	3a	
ا	and the state of t	3b	00 007
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	82,867.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	1 _	^1
_	Income. Enter 1% of Part I, line 27b	5	91.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	82,776.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualities for t	ne section
	4940(e) reduction of tax in those years.		

Form **990-PF** (2011)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
=1=Distributable-amount-for-201-1-from:Part+XI;===				
line 7				11,172.
2 Undistributed income, if any, as of the end of 2011				
a Enter amount for 2010 only			0.	
<b>b</b> Total for prior years:		_		
<del></del>		0.	<del></del>	
3 Excess distributions carryover, if any, to 2011:				
a From 2006 43,031.				
b From 2007 70,495.				
c From 2008 103,005. d From 2009 58,422.				
d From 2009 58,422. e From 2010 55,699.				
f Total of lines 3a through e	330,652.			
4 Qualifying distributions for 2011 from	330,032.	-		
Part XII, line 4: ►\$82,867.				
a Applied to 2010, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior			<u> </u>	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus		•		
(Election required - see instructions)	0.			
d Applied to 2011 distributable amount				11,172.
e Remaining amount distributed out of corpus	71,695.			
5 Excess distributions carryover applied to 2011	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				<del></del>
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	402,347.			
<b>b</b> Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				-
amount - see instructions		0.		
e Undistributed income for 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	43,031.			
9 Excess distributions carryover to 2012				
Subtract lines 7 and 8 from line 6a	359,316.			
10 Analysis of line 9:				
a Excess from 2007 70,495.				
b Excess from 2008 103,005.				
c Excess from 2009 58,422.				
d Excess from 2010 55,699. e Excess from 2011 71,695.				
e Excess from 2011 71,695.				Form <b>990-PF</b> (2011)

Eorm.990-PF\_(20.1:1)-FOUNDATION-04-2942784 Part\_XV\_\_\_Supplementary\_Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to
any foundation manager
or-substantial contributor Purpose of grant or contribution Foundation 'Amount' status of Name and address (home or business) recipient= a Paid during the year ADRIENNE ARSHT CENTER NONE 501(C)(3) UNRESTRICTED 200, ALVIN AILEY DANCE FOUNDATION NONE 501(C)(3) UNRESTRICTED 150. ARSENAL CENTER FOR THE ARTS NONE 501(C)(3) UNRESTRICTED 300. BEAVER COUNTRY DAY SCHOOL NONE 501(C)(3) UNRESTRICTED 2,500. BOSTON SYMPHONY ORCHESTRA NONE 501(C)(3) UNRESTRICTED 500. SEE CONTINUATION SHEET(S) Total ► 3a 82 867. b Approved for future payment NONE Total

FOUNDATION 04-2942784

Part XV Supplementary Information \_Grants\_and\_Contributions Paid During\_the\_Year-(Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of Amount any foundation manager contribution Name and address (home or business) or\_substantial\_contributor. recipient BRANDIES UNIVERSITY NONE UNRESTRICTED 501(C)(3) 60,000. BROWN ALUMNI MAGAZINE NONE 501(C)(3) UNRESTRICTED 30. BROWN UNIVERSITY NONE 501(C)(3) UNRESTRICTED 1,000. CAPE CODE CHAMBER MUSIC FESTIVAL NONE 501(C)(3) UNRESTRICTED 500. CELEBRITY SERIES OF BOSTON NONE 501(C)(3) UNRESTRICTED 3,000. COOLIDGE CORNER THEATER NONE 501(C)(3) UNRESTRICTED 100. CROKN' AT COLITIS FOUNDATION NONE 501(C)(3) UNRESTRICTED 100. DAVENPORT/MAGAR CANCER NONE 501(C)(3) UNRESTRICTED 50, NONE DURFEE ALUMNI ASSOCIATION 501(C)(3) UNRESTRICTED 25, DURFEE BELLS RESERVATION NONE 501(C)(3) UNRESTRICTED 25, Total from continuation sheets 79,217.

04-2942784 FOUNDATION Part XV -Supplementary-Information-Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount any foundation manager status of contribution Name and address (home or business) or-substantial-contributor recipient NONE FLORIDA GRAND OPERA 501(C)(3) UNRESTRICTED 3,000. HARRINGTON MEMORIAL HOSPITAL NONE 501(C)(3) UNRESTRICTED 50. NONE KEY BISCAYNE COMMUNITY FOUNDATION 501(C)(3) UNRESTRICTED 100. MUSEUM OF FINE ARTS, BOSTON NONE 501(C)(3) UNRESTRICTED 3,190, NATIONAL SELF DEFENSE NONE 501(C)(3) UNRESTRICTED 150. NEW REPERTORY THEATER NONE 501(C)(3) UNRESTRICTED 500. NEW WORLD SYMPHONY NONE 501(C)(3) UNRESTRICTED 1,000. NEWBURY COLLEGE NONE 501(C)(3) UNRESTRICTED 2,630, NONE 501(C)(3) UNRESTRICTED NEWTON SYMPHONY ORCHESTRA 500,

OPERA BOSTON

501(C)(3)

NONE

Total from continuation sheets

UNRESTRICTED

200.

Part XV \_Supplementary\_Information\_ -Grants-and Contributions-Paid-During-the-Year-(Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) or-substantial contributor recipient. OTHER MISC. CHARITIES 501(C)(3) UNRESTRICTED NONE 300, PARKINSONS DISEASE FOUNDATION NONE 501(C)(3) UNRESTRICTED 50. PHI BETA KAPPA SOCIETY NONE 501(C)(3) UNRESTRICTED 39. SERAPHIC FIRE NONE 501(C)(3) UNRESTRICTED 100. SPEAK EASY STAGE COMPANY 501(C)(3) NONE UNRESTRICTED 400. TEMPLE BETH ELOHIM NONE 501(C)(3) UNRESTRICTED 100. THE FUND FOR BRIGHAM & WOMEN'S NONE 501(C)(3) UNRESTRICTED 2,000. HOSPITAL NONE 501(C)(3) UMASS LOWELL ALUMNI ASSOCIATION UNRESTRICTED <u>50,</u> NONE WGBH 501(C)(3) UNRESTRICTED 28,

Total from continuation sheets

Part XVI-A

–F	()	H	N	D	Α	<u>172</u>	<b>T</b> .	O	N	_

**Analysis of Income-Producing Activities** 

Enter gross amounts unless otherwise indicated.	Unrelated by	isiness income	Excluded	by section 512, 513, or 514	(e)
	(a) Business	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion	. ' '	function income
a	-	-		-	
b					
C					
d					
e	_				
f	_			<u> </u>	
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	94.	
4 Dividends and interest from securities			14	7,089.	
5 Net rental income or (loss) from real estate:	<u> </u>	<del></del>	+		
a Debt-financed property		<del>-</del>	+		
<ul><li>b Not debt-financed property</li><li>6 Net rental income or (loss) from personal</li></ul>		·	+		
	]				
property 7 Other investment income	900099	-209	+	-	<del></del>
8 Gain or (loss) from sales of assets other	500055	-203	•		
than inventory	.		18	4,042.	
9 Net income or (loss) from special events			+ - 4	4,042.	
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:			1		
a					
b					
C					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		-209		11,225.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	11,016.
(See worksheet in line 13 instructions to verify calculation:	s.)				
Part XVI-B Relationship of Activitie	es to the Accom	plishment of E	xempt P	urposes	
Line No. Explain below how each activity for which	income is reported in co	olumn (e) of Part XVI-	A contribute	d importantly to the accome	ulshment of
the foundation's exempt purposes (other t	han by providing funds	for such purposes).		a importantly to the accomp	
	***	<u>_</u>			
· · · · · - · · · · · · · · · · · · · ·					
	<del></del>				<u> </u>
		<del></del>		·	
			<del></del>		
		·			
		<u> </u>	<u> </u>		····
					· · · · · · · · · · · · · · · · · · ·
123621	<del></del> _	<del></del>			5 . 000 DE (0044)

## EDWARD & NANCY STAVIS CHARITABLE

orm-990-PF-(2				04-29		—Pa
Part-XVII-			> and=Transactions-an	nd-Relationships-With-Nonch	aritable-	
4 Diddle -	Exempt Organiz			<del></del>		<u> </u>
			wing with any other organization	* *	ין ו	<u>es</u>
			527, relating to political organiza	ations?———————————		<b>→</b>
	· •	ion to a noncharitable exempt	organization or,			
(1) Cash			-		1a(1)	
(2) Other					1a(2)	
b Other tran		la avenue				
	of assets to a noncharitab	· -	_		1b(1)	
	nases of assets from a nomal al of facilities, equipment, o	charitable exempt organization	ł		1b(2)	
	bursement arrangements	i oner assers			1b(3)	
	s or loan guarantees				1b(4) 1b(5)	
	-	nbership or fundraising solicita	atione		1b(6)	
		ing lists, other assets, or paid			1c	
			· -	ays show the fair market value of the goods		
				in any transaction or sharing arrangement		.5,
		ther assets, or services receive		any danisation of one my arrangement	,	
(a) Line no	(b) Amount involved		able exempt organization	(d) Description of transfers, transactions, ar	nd sharing arra	ngeme
	··	N/A		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
			<u> </u>			
			······································			
				-		
			· · · · · · · ·			
		· · · · · · · · · · · · · · · · · · ·				
	-					
			-			
2a Is the fou	ndation directly or indirectly	y affiliated with, or related to, o	one or more tax-exempt organiza	itions described		
ın section	501(c) of the Code (other	than section 501(c)(3)) or in s	ection 527?		Yes	X
<b>b</b> If "Yes," c	omplete the following sche					
	(a) Name of orga	nization	(b) Type of organization	(c) Description of relation	nship	
	N/A_					
		<u> </u>				
<u> </u>						
r	<del></del>					
and h				tatements, and to the best of my knowledge tion of which preparer has any knowledge	May the IRS dis	cuss t
Sign   L	S1.1	B (.	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		eturn with the shown below (s	
Here	- Co hod	Story	11017	- the	X Yes	
Sigi	nature of officer or trustee	· 1	Date	Title		
	Print/Type preparer's nar	ne Prepaker'	s signature	Date Check If PTII	V	
Da: -			1/1	self- employed		
Paid	DAVID SWAN	Ma			003342	
Preparer	Firm's name ► CBI2	I TOFIAS		Firm's EIN ► 26 – 3	375313	4
Use Only	F					
	TEIRM'S Address - 500	) BOYLSTON STR	) राज्यम	l l		
				_		<b>_</b>
		STON, MA 02116			– 761 – 0 Form <b>990</b> -	

## Schedule-of-Contributors-Schedule<sub>\*</sub>E OMB No 1545-0047 or 990-PF) ► Attach to Form 990, Form 990-EZ, or Form 990-PF. Department of the Treasury Internal Revenue Service Name-of-the organization-Employer-identification-number EDWARD-&-NANCY-STAVIS-CHARITABLE FOUNDATION-04-2942784 - - - -Organization type (check one). Filers of: Section: Form 990 or 990-EZ \_\_\_ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 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. S

pecial	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 <i>exclusively</i> 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 <i>exclusively</i> religious, charitable, etc., purpose. Do not complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.

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

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)

•	` `		
	B-(Form-990,-990-EZ,-or-990-PF)-(201-1)	Fmn	Page 2 oyer-identification number
EDWAR	D & NANCY STAVIS CHARITABLE ATION		4-2942784
Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	EDWARD STAVIS  567 BOYLSTON STREET  BROOKLINE, MA 02445	\$166,586.	Person Payroll Noncash X (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 Payroli 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)

Employer-identification number-

EDWARD & NANCY STAVIS CHARITABLE

FOINDATTON

04-2942784

<u>UNDATI</u>	<u>ON</u>	04-	2942784
art II— No	ncash Property (see instructions). Use duplicate copies of Part II if	additional space is needed.	
(a) No. from	(b)  Description of noncash property given	(c)FMV (or estimate)	(d) Date received
Part I		(see instructions)	Bute received
<u> </u>	8 SHARES OF APPLE, INC., 723 SHARES PEPSICO, INC., 576 SHARES OF OCTOR & GAMBLE INC.	\$ <u>166,586.</u>	12/30/11
(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
		\$	- <del></del>
(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
3453 01-23-12		\$	10, 990-EZ, or 990-PF) (2

Schedule_B_	(Form_990, 990;EZ, or 990:PF).(201:1)						
Name_of_orga	nization			Employer identification number			
EDWARD FOUNDA	& NANCY STAVIS CHARITA	ABLE		04-2942784			
Part III	Exclusively religious charitable etc., indiv	idual contributions to section 501(c)(	7), (8), or (10) organizatio	ns that total more than \$1,000 for the			
	year. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc.	ne following line entry. For organization , contributions of \$1,000 or less for t	<u>is completing Part III, enter</u> he year. (Enter this information once	<b>→</b> \$			
(a) No	Use duplicate copies of Part III if additional		<del>  </del>				
(a) No. from Part I	(b) Purpose of gift	(c).Use.of.gift	(d) Desc	ription of how gift is held			
Parti				<del></del>			
:							
			<del></del>   <del></del>				
-		(e) Transfer of gift					
		(e) Hansier or gire					
	Transferee's name, address, ar	Relationship of tra	nsferor to transferee				
-				<del></del>			
-			·····	· · · · · · · · · · · · · · · · · · ·			
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held			
Part I	-						
`							
-		(e) Transfer of gift					
		(e) Transier or gift					
	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) Desc	ription of how gift is held			
			<del></del>				
	(e) Transfer of gift						
	Transferee's name, address, a	Relationship of tra	nsferor to transferee				
(a) No.							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held			
- -	<u> </u>		— I ———				
	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee						
<del> </del>	Transferee's name, address, a	IU ZIP + 4	neiationship of tra	nsieror to transieree			
		<u> </u>					

FORM 990-PF INTEREST ON SAVI	NGS AND	EMPORARY	CASH 1	INVESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
MORGAN STANLEY SMITHBARNEY-IN	TEREST				9	94.
TOTAL TO FORM 990-PF, PART I,	LINE 3,	COLUMN A	7	=	9	94.
FORM 990-PF DIVIDEND	S AND IN	TEREST FI	OM SEC	JRITIES	STATEMENT	2
SOURCE	GRO	OSS AMOUI		PITAL GAINS DIVIDENDS	COLUMN (A)	)
MORGAN STANLEY SMITHBARNEY-DIVIDENDS		7,08	39.	0.	7,08	89.
TOTAL TO FM 990-PF, PART I, I	ın 4	7,08	39.	0.	7,08	89.
FORM 990-PF	ОТНЕ	R INCOME			STATEMENT	3
DESCRIPTION		(A REVEI PER B	<b>WE</b>	(B) NET INVEST- MENT INCOME		
ALLIANCE BERNSTEIN HLDG LP			-209.	-209	•	
TOTAL TO FORM 990-PF, PART I,	, LINE 11		-209.	-209	•	
FORM 990-PF		raxes			STATEMENT	4
DESCRIPTION				(C) ADJUSTED NET INCOM		
FOREIGN TAXES FEDERAL INCOME TAXES		92. 50.	192			0.
TO FORM 990-PF, PG 1, LN 18	3	42.	192	_		0.

FORM 990-PF	OTHER EXPENSES			STATEMENT 5
DESCRIPTION	EXPENSES PER BOOKS	(-B-) NET INVES MENT INCO		
MANAGEMENT FEES	1,748.	1,7	48.	0.
TO FORM 990-PF, PG 1, LN 23	1,748.	1,7	48.	0.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 6
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE
INVESTMENT IN COMMON STOCKS		_	328,270.	350,386.
TOTAL TO FORM 990-PF, PART II,	LINE 10B	=	328,270.	350,386.
FORM 990-PF	OTHER INV	ESTMENTS		STATEMENT 7
DESCRIPTION		LUATION ETHOD	BOOK VALUE	FAIR MARKET VALUE
INVESTMENT IN EXCHANGE TRADED INVESTMENT IN MUTUAL FUNDS	FUNDS	COST COST	18,558. 14,198.	16,412. 10,965.
TOTAL TO FORM 990-PF, PART II,	LINE 13	-	32,756.	27,377.