

### 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

OMB No 1545-0052

2011

Department of the Treasury Internal Revenue Service

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

For calendar year 2011, or tax year beginning , 2011, and ending ,							
Name of for ROBER	oundation RT C CARCO 31 CHARITABLE FOU	UNDATION		A Employer identification number 04-3060962			
	nd street (or PO box number if mail is not delivered to stre NWRIGHT RD UNIT #109	Room/suite	B Telephone number (see the instructions) (781) 729-4424				
City or town Sta WINCHESTER MI			ZIP code 01890-2394	C If exemption application is pending, check here			
	ck all that apply:   Initial return	Initial Return of a fori		D 1 Foreign organizations, check here			
	Final return	Amended return		2 Foreign organizations meeting the 85% test, check			
H CI	Address change X Section 501	Name change (c)(3) exempt private for	oundation	here and attach computation			
	Section 4947(a)(1) nonexempt charitable tr	ust Other taxable r	rivate foundation	E If private foundation status was terminated			
	5 111 1 131 151 1	ounting method: $X$ C	ash Accrual	under section 507(b)(1)(A), check here			
<b>⊳</b> s	210,088. (Part I,	column (d) must be on	cash basis )	If the foundation is in a 60-month termination under section 507(b)(1)(B), check here			
Part I	Analysis of Revenue and Expenses (The total of amounts in	(a) Revenue and	(b) Net investme				
	columns (b), (c), and (d) may not neces- sarily equal the amounts in column (a)	expenses per books	ıncome	income for charitable purposes			
	(see instructions) )	***************************************		(cash basis only)			
$\sim$	1 Contributions, gifts, grants, etc, received (att sch) 2 Ck   X   if the foundn is not req to att Sch B	29,961.					
	3 Interest on savings and temporary						
8	cash investments	6,275.					
<b>2</b>	<b>5a</b> Gross rents b Net rental income						
SCAMMER MAY	or (loss)  6a Net gain/(loss) from sale of assets not on line 10	·					
≥Œ V	b Gross sales price for all assets on line 6a						
Œ <b>E</b>	7 Capital gain net income (from Part IV, line 2)  8 Net short-term capital gain						
<b>E</b>	9 Income modifications						
A A	10a Gross sales less returns and allowances						
S	b Less Cost of goods sold						
	c Gross profit/(loss) (att sch) .						
	11 Other income (attach schedule)						
	12 Total. Add lines 1 through 11	36,236.					
	13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages						
	15 Pension plans, employee benefits						
A	16a Legal fees (attach schedule)						
D M I	b Accounting fees (attach sch) c Other prof fees (attach sch)	· · ·		<del></del>			
O I	17 Interest DECENTION						
O I S T R A A T T	18 Taxes (attach sthoolule) (see instrs)	-					
A A	19 Depreciation (attach, anti) 1.5%						
N V	sch) cand depletion 4 2012 102						
	21 Travel conferences and meetings 22 Printing and publications,	-					
A E N X D P	23 Other expenses (attach schedule)			· · · · · ·			
E N S	See Line 23 Stmt	311.					
Ē	24 Total operating and administrative expenses. Add lines 13 through 23	311.					
	<ul><li>25 Contributions, gifts, grants paid</li><li>26 Total expenses and disbursements.</li></ul>	11,150.					
	Add lines 24 and 25	11,461.					
	27 Subtract line 26 from line 12: a Excess of revenue over expenses						
	and disbursements	24,775.					
	<b>b</b> Net investment income (if negative, enter -0-)  C Adjusted net income (if negative, enter -0-)	<u> </u>					

Form 990-PF (2011) ROBERT C CARCO 31 CHARITABLE FOU	NDATION	04-30	
Attached schedules and amounts in the description	Beginning of year	End o	of year
Part II Balance Sheets  Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 Cash – non-interest-bearing			
2 Savings and temporary cash investments .			
3 Accounts receivable			
Less: allowance for doubtful accounts			
4 Pledges receivable	<del> </del>	<del>-</del>	
Less allowance for doubtful accounts		<del></del>	<del></del>
6 Receivables due from officers, directors, trustees, and other	-	· . <del></del>	
disqualified persons (attach schedule) (see instructions)	<u> </u>		
7 Other notes and loans receivable (attach sch)			
Less: allowance for doubtful accounts  8 Inventories for sale or use  9 Prepaid expenses and deferred charges		<del></del>	
8 Inventories for sale or use			
9 Prepaid expenses and deferred charges .			
S 10 a Investments — U.S. and state government obligations (attach schedule)	150,113.	146,009.	210,08
<b>b</b> Investments — corporate stock (attach schedule)			
c Investments — corporate bonds (attach schedule)			
11 Investments – land, buildings, and equipment: basis			
Less accumulated depreciation (attach schedule)			
12 Investments – mortgage loans			
13 Investments – other (attach schedule)			
14 Land, buildings, and equipment: basis ►			
Less accumulated depreciation (attach schedule)			
15 Other assets (describe ►			
16 Total assets (to be completed by all filers —			
see the instructions. Also, see page 1, item i)	150,113.	146,009.	210,08
L 17 Accounts payable and accrued expenses			
A 18 Grants payable			<u> </u>
B 19 Deferred revenue		_	]
20 Loans from officers, directors, trustees, & other disqualified persons			
I 21 Mortgages and other notes payable (attach schedule)			Ī
T 22 Other liabilities (describe ►)			1
Ė	-		1
S 23 Total liabilities (add lines 17 through 22)			}
Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
F 24 Unrestricted	150,113.	146,009.	
U of T		,	1
D 26 Permanently restricted		· · · · · · · · · · · · · · · · · · ·	1
Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.  27 Capital stock, trust principal, or current funds			1
27 Comital stock trust assessed as assessed for de-			
27 Capital stock, trust principal, or current funds  N 28 Paid-in or capital surplus, or land, building, and equipment fund			1
Cl			-
DE 29 Retained earnings, accumulated income, endowment, or other tunds			4
R S 30 Total net assets or fund balances (see instructions) . 31 Total liabilities and net assets/fund balances (see instructions)	150,113. 150,113.	146,009. 146,009.	-
Part III Analysis of Changes in Net Assets or Fund Balanc		140,003.	
7			<del>r</del>
1 Total net assets or fund balances at beginning of year — Part II, colur end-of-year figure reported on prior year's return)	mn (a), line 30 (must agre	· <u>  1</u>	150,11
2 Enter amount from Part I, line 27a		2	24,77
3 Other increases not included in line 2 (itemize) ► UNREALIZED_GA	INS	3	92
4 Add lines 1, 2, and 3		4	175,81
5 Decreases not included in line 2 (itemize) ► See Other Decreases	Stmt	5	29,80
	- Part II, column (b), line	30 . 6	146,009

(a) List and described 2-story brick warehold	quired nase	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)			
<del></del>			D — Dona	ition	· · · · · · · · · · · · · · · · · · ·	
b	<del></del>					
С						
d						
е						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sa		-	(h) Gain or (e) plus (f) m	(loss) inus (g)
a						
<u>b</u>				_		
c	<del></del>					
Complete only for accets show	was sain in column (b) and owned by	the foundation on 12/31/69			(I) Gains (Coli	ıma (h)
(i) Fair Market Value as of 12/31/69						
a						
b					<u> </u>	
c						
d						
e		<u> </u>			F:	
2 Capital gain net income or (ne	<b>—</b>	enter in Part I, line 7 ter -0- in Part I, line 7	-	2		
3 Net short-term capital gain or	(loss) as defined in sections 1222(5) a	and (6).				
ın Part I, line 8	ne 8, column (c) (see instructions). If (	<u> </u>	-	3		
	er Section 4940(e) for Reduce te foundations subject to the section 4					
If 'Yes,' the foundation does not qua	ction 4942 tax on the distributable am alify under section 4940(e). Do not cor in each column for each year; see the	nplete this part.		s	Yes	X No
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as:			<b>(d)</b> Distributior umn (b) divided	
2010	0.		0.			0.000000
2009			0.			0.000000
2008			0.			0.000000
2007	0.					
2006	0.	<u> </u>			,	
2 Total of line 1, column (d)				2		0.000000
Average distribution ratio for t number of years the foundation	he 5-year base period — divide the to on has been in existence if less than 5	tal on line 2 by 5, or by the years		3		0.00000
4 Enter the net value of noncha	ritable-use assets for 2011 from Part	X, line 5		4		0.
5 Multiply line 4 by line 3				5		0.
6 Enter 1% of net investment in	come (1% of Part I, line 27b)			6		
7 Add lines 5 and 6				7		0.
8 Enter qualifying distributions t				8		0.
If line 8 is equal to or greater Part VI instructions.	than line 7, check the box in Part VI,	line 1b, and complete that p	art using a	1%	tax rate See the	•

BAA

10

Form **990-PF** (2011)

X

9

Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If 'Yes,' complete Part XIV

Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names

<u> </u>	RIVIL-A Statements Regarding Activities (continued)	1		
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		х
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		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
14	Website address	729	-442	 24
	Located at ► 7 WAINWRIGHT RD #109 WINCHESTER MA ZIP + 4 ► 01880-239			 
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the year		•	Ц
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a		Yes	No
	bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If 'Yes,' enter the name of the foreign country ►			
Pa	Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Yes	No
1 a	a During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?  Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	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 termination of government service, if terminating within 90 days)  Yes X No			
ı	b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in	14		
	Regulations section 53.4941 (d)-3 or in a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance check here	1 b		
	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 before the first day of the tax year beginning in 2011?	1 c		Х
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) beginning before 2011? Yes X No			
	If 'Yes,' list the years > 20 , 20 , 20			
	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.)	2b		<u></u>
(	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	► 20 , 20 , 20			
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?  Yes X No			
ı	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, Form 4720, to		ĺ	
	(3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2011.)	3b		
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its			
7	charitable purposes?	4a		X
1	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could			
,	jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4b		X
	and the year beginning in bottom.	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		

Canal Cana	Form 990-PF (2011) ROBERT C CARCO 31			04-306	50 <b>962</b> Pag		
(a) Carry on procagands, or otherwise attempt to influence legislation (section 4945(e))?	Part VILE Statements Regarding Activit	ies for Which Form	4720 May Be Req	uired (continued)			
Op Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any worker regardation driver?  (3) Provide a grant to an individual for travel, study, or other similar purposes?  (4) Provide a grant to an individual for travel, study, or other similar purposes?  (5) Provide of any purpose other than religious, charitable, etc, organization described in section 505(4); 0, 0; 0; of section 4950(0)(2)* (see instructions)  (6) Provide for any purpose other than religious, charitable, scientific, interrary, or education purposes, or of the prevention of cruelly to children or animals?  bil any answer is "Yes" to 5a(1)-(3), day any of the transactions fall to quality under the exceptions described in Regulations section 53:495 or in a current notice regarding desaster assistance (see includines)?  Organizations relying on a current notice regarding disaster assistance check here  of the answer is "Yes" to quastion 53:495 or in a current notice regarding disaster assistance (see includines)?  Organizations relying on a current notice regarding disaster assistance check here  of the answer is "Yes" to quastion 54:495 or in a current notice regarding disaster assistance of the formation of the present individual or individual or individual organization of the animal organization		=					
an, directly or indirectly, any voter registration drive? 3) Provide a grant to an individual for travel, study, or other similar purposes? 4) Provide a grant to an organization other than a Charitable, etc., organization described in section 509(4)(1), (2), or 3(), or section 498(0)(2)? (see instructions) 5) Provide for any purpose other than neligious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelity to children or animals?  bit any answer is "Vest to Sci(1)-(5), aid any of the transactions fail to qualify under the exceptions of control or section 53.4945 or in a current notice registrating disaster assistance can be compared to the second of the	(1) Carry on propaganda, or otherwise attemp	t to influence legislation	(section 4945(e))?	Yes X	No		
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(0)(7), (2), or (3), or section 490(0)(2)* (see instructions)  (5) Provide for any purpose with the reliquious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelly to children or animals?  b) If any answers in Yes' to Squisson, charitable, scientific, literary, or educational purposes, or for the prevention of cruelly to children or animals?  b) If any answers in Yes' to question 5349-50 or in a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance check here  c) If the answers in Yes' to question 58(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  Organizations relying on a current notice regarding disaster assistance check here  c) If Yes's 60, the Form 887.  5a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  b) Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  b) If Yes's 60, the Form 887.  7a At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction?  1 If Yes's 60, the Form 887.  1 Ist all officers, United the foundation receives any proceeds or have any ret income altributable to the transaction?  1 Ist all officers, United the foundation of the property of the foundation of the	(2) Influence the outcome of any specific publi on, directly or indirectly, any voter registra	c election (see section a tion drive?	4955); or to carry	Yes X	No		
an section 509(0)(1), (2), or (3), or section 4940(0)(2)* (see instructions)	•			Yes X	No		
educational purposes, or for the prevention of cruelty to children or animals?    Yes   No	In section $509(a)(1)$ , (2), or (3), or section $4940(d)(2)^{2}$ (see instructions)						
described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance check here  of if the answer is Yes' to question 53(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If Yes, attach the statement required by Regulations section 53 4945-5(d).  6a Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  If Yes' to 6b, the Form 8370.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  1 Ves to 6b, the Form 8370.  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  1 List all officers, directors, trustees, foundation managers and their compensation (c) Compensation (d) Contributions to express the foundation of the position of	(5) Provide for any purpose other than religiou educational purposes, or for the prevention	is, charitable, scientific, n of cruelty to children o	literary, or r animals?	. Yes X	No		
c If the answer is Yes' to question 5a(á), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If Yes, data the statement required by Regulations section 33 4945-5(d).  6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  b) Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  b) Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  b) Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  b) Did the foundation during the year, pay premiums, directly or indirectly, on a personal benefit contract?  b) Tyes Sold the toundation measure.  b) Tyes Sold the toundation receive any proceeds or have any net income altitubulable to the transaction?  c) Trustees, Foundation managers and their compensation (see instructions).  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  1 List all officers, directors, trustees, foundation managers an	described in Regulations section 53.4945 or in	he transactions fail to qual a current notice regardi 	ualify under the exception ng disaster assistance	ons	. 5b		
tax because it maintained expenditure responsibility for the grant?  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 a personal benefit contract?  If Yes to 6b, the Form 8370.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  If Yes to 6b, the Form 8370.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  2 (a) Name and address  (b) Title, and average hours per week deviced to position  MARIO P CARCO  109 WAINWRIGHT RD \$109  TRUSTEE  MINCHESTER  MA 01880  TRUSTEE  MINCHESTER  MA 01880  TRUSTEE  SUBBURY  MA 01821  TRUSTEE  SUBBURY  MA 01821  TRUSTEE  SUBBURY  MA 01776  TRUSTEE  SUBBURY  MA 01776  M	Organizations relying on a current notice regar	ding disaster assistance	e check here	. ▶ ∐			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If Yes to 6b, file Form 8870.  7 a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  I was an advantaged to the form 8870.  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  1 List all officers, directors, trustees, foundation managers and their compensation (fron paid, enter-0-) and deferred compensation.  1 List all officers, directors, trustees, foundation managers and their compensation (fron paid, enter-0-).  1 List all officers, directors, trustees, foundation managers and their compensation (fron paid, enter-0-).  1 List all officers, directors, trustees, foundation managers and their compensation (fron paid, enter-0-).  1 List all officers, directors, trustees, foundation managers and their compensation (fron paid, enter-0-).  1 List all officers, directors, trustees, foundation managers and their compensation.  1 List all officers, directors, trustees, foundation managers and their compensation.  1 List all officers, directors, trustees, foundation managers and their compensation.  1 List all officers, directors, trustees, foundation managers and their compensation.  1 List all officers, directors, trustees, foundation managers and their compensation.  1 List all officers, directors, trustees, foundation managers and their compensation.  1 List all officers, directors, trustees, foundation managers and their compensation.  2 Cange and address of the managers and their compensation.  2 Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter NONE.  2 Compensation of five highest-paid employees (ot	tax because it maintained expenditure respons	ibility for the grant?		Yes	No		
on a personal benefit contract?  b) Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  b) Did the foundation giving the year, pay premiums, directly or indirectly, on a personal benefit contract?  73 At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  1 List all officers, directors, trustees, foundation managers and their compensation (a) Name and address  (a) Name and address  (b) Title, and average hours per week devoted to position  (a) Name and address  (b) Title, and average hours per week devoted to position  TRUSTEE  MARIO P CARCO  109 WAINWRIGHT RD #109  WINCHESTER MA 01880  5.00  TRUSTEE  SUDBURY MA 01821  TRUSTEE  SUDBURY MA 01776  TRUSTEE  SUDBURY MA 01776  2 Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter 'NONE.'  (c) Compensation  (d) Contributions to enter of the reliable to the transaction?  TRUSTEE  SUDBURY MA 01776  TRUSTEE  SUDBURY MA 01776  1 TRUSTEE  (d) Contributions to enter 'NONE.'  (d) Contributions to enter 'NONE.'  (d) Contributions to enter 'NONE.'  (e) Expense according to the transaction?  TRUSTEE  SUDBURY MA 01776  1 TRUSTEE  (d) Contributions to enter 'NONE.'  (e) Compensation  (fine trail of the transaction?  TRUSTEE  SUDBURY MA 01776  5 .00  0 .  0 .  TRUSTEE  (d) Contributions to enter 'NONE.'  (d) Contri	If 'Yes,' attach the statement required by Regu	lations section 53 4945-	5(d).				
## Yes' to 6b, the Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?    7b bif Yes, id the foundation receive any proceeds or have any net income attributable to the transaction?  1 List all officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address	on a personal benefit contract?						
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?		ums, directly or indirectly	y, on a personal benefit	contract?	6b		
Bit Yes', did the foundation receive any proceeds or have any net income attributable to the transaction?   7b			stad tav abaltar transact		No.		
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees,  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  (b) Title, and average devoted to position  (c) Compensation (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  (e) Expense according to the paid, enter-0-1.  (f) not paid, enter-0-1.  (g) Compensation (ff not paid, enter-0-1)  (g) Compen							
ALEST ALEST ALEST ALEST AND ALEST AL	Part VIII Information About Officers. D	irectors. Trustees.	Foundation Manag	ners. Highly Paid E			
(a) Name and address  (b) Title, and average hours per week devoted to position  (c) Compensation (if not paid, enter-0-) employee benefit plans and deferred compensation  (d) Contributions to total representation of the highest-paid employees (other allowance other allowance)  (e) Expense according to the properties of the properties		,,		, o. o, g , . a. a =			
Canal Name and address   Canal Name	1 List all officers, directors, trustees, foundation	n managers and their co	ompensation (see instru	ıctions).			
MARIO P CARCO 109 WAINWRIGHT RD #109 WINCHESTER MA 01880 5.00 0. 0. BARBARA CARCO 109 WAINWRIGHT RD #109 WINCHESTER MA 01880 TRUSTEE  BILLERICA MA 01821 TRUSTEE  SUDBURY MA 01776 2 Compensation of five highest-paid employees (other than those included on line 1— see instructions). If none, enter 'NONE.'  (a) Name and address of each employee paid more than \$50,000  NONE  D  Total number of other employees paid over \$50,000  Trustee  TRUSTEE  SUDBURY MA 01776  (b) Title, and average devoted to position  Trustee  (c) Compensation (d) Contributions to employee benefit plans and deferred compensation  O  Trustee  Trustee  Trustee  (c) Compensation (d) Contributions to employee benefit plans and deferred compensation  Trustee  Trustee  Trustee  (a) Name and address of each employee devoted to position  Trustee  Trustee  (b) Title, and average hours per week devoted to position  Trustee  (c) Compensation  Trustee  (d) Contributions to employee benefit plans and deferred compensation  Trustee	(a) Name and address	hours per week		employee benefit plans and deferred	(e) Expense accou other allowances		
WINCHESTER							
TRUSTEE  WINCHESTER MA 01880 5.00 0. 0.  TERESA CARCO B BILLERICA MA 01821 5.00 0. 0.  MARY ELIZABETH POLITO S SUDBURY MA 01776 5.00 0. 0.  2 Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter 'NONE.'  (a) Name and address of each employee hours per week devoted to position  NONE  O  Total number of other employees paid over \$50,000			0.	0.			
TRUSTEE  BILLERICA MA 01821 TRUSTEE  SUDBURY MA 01776  Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter 'NONE.'  (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation employee benefit plans and deferred compensation  (d) Contributions to employee benefit plans and deferred compensation  (e) Compensation  (f) Compensation  (o) Expense account of the remployee benefit plans and deferred compensation  (o) Total number of other employees paid over \$50,000		TRUSTEE					
B BILLERICA MA 01821 5.00 0. 0. MARY ELIZABETH POLITO S TRUSTEE SUDBURY MA 01776 5.00 0. 0. 0.  2 Compensation of five highest-paid employees (other than those included on line 1— see instructions). If none, enter 'NONE.'  (a) Name and address of each employee paid more than \$50,000 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	WINCHESTER MA 01880	5.00	0.	0.	·		
BILLERICA MA 01821 5.00 0. 0.  MARY ELIZABETH POLITO S SUDBURY MA 01776 5.00 0. 0.  2 Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter 'NONE.'  (a) Name and address of each employee paid more than \$50,000 pa	TERESA CARCO						
MARY ELIZABETH POLITO S SUDBURY MA 01776  TRUSTEE SUDBURY MA 01776  Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter 'NONE.'  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation (d) Contributions to employee benefit plans and deferred compensation  O  O  Total number of other employees paid over \$50,000	2	l :					
SUDBURY  MA 01776  TRUSTEE  SUDBURY  MA 01776  Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter 'NONE.'  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  NONE  O  Total number of other employees paid over \$50,000		5.00	0.	0.			
2 Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter 'NONE.'  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  (e) Expense according to the raillowance of the raillow		TRUSTEE					
(a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  (e) Expense according to the remover allowance of the remover of t	SUDBURY MA 01776	5.00	0.	0.	_		
hours per week devoted to position  NONE  O  Total number of other employees paid over \$50,000  hours per week devoted to position  compensation  other allowance	2 Compensation of five highest-paid employee	s (other than those incl	uded on line 1 – see ins	tructions). If none, ente	er 'NONE.'		
NONE  O  O  Total number of other employees paid over \$50,000	(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	(e) Expense accou- other allowances		
O	NONE						
O	0						
O							
Total number of other employees paid over \$50,000 .	0				-		
Total number of other employees paid over \$50,000 No	0						
Total number of other employees paid over \$50,000	0						
Total number of other employees paid over \$50,000							
Total number of other employees paid over \$50,000	Total number of other analysis and area 650,000	L			37 -		
BAA TEEA0306 12/05/11 Form 990-PF (2	BAA	TEEA0306 1	2/05/11		Form <b>990-PF</b> (20		

Forn	1 990-PF (2011) ROBERT C CARCO 31 CHARITABLE FOUNDATION 04-30	
	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	imployees,
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NO	<u>NE</u>	
Tota	I number of others receiving over \$50,000 for professional services	No
organ	ne foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of izations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
2		
3		
4		
Pa	Summary of Program-Related Investments (see instructions)	
Des	cribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	NONE	
•		
2		
All a	other program-related investments. See instructions	
J		
Tota	II. Add lines 1 through 3	No
BAA		Form <b>990-PF</b> (20

Form **990-PF** (2011)

BAA

Form **990-PF** (2011)

	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes a Average monthly fair market value of securities	1 a	
	Average of monthly cash balances	1ь	
	Fair market value of all other assets (see instructions)	1 c	
	d Total (add lines 1a, b, and c)	1 d	
	e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
	(attach detailed explanation)	1 1	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	0.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	0.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0.
6	Minimum investment return. Enter 5% of line 5	6	0.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operand certain foreign organizations check here ► ☐ and do not complete this part.)	atıng f	oundations
1	Minimum investment return from Part X, line 6	1	0.
2	a Tax on investment income for 2011 from Part VI, line 5 . 2a 0.		
	b Income tax for 2011. (This does not include the tax from Part VI.)		
	c Add lines 2a and 2b	2 c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	0.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	0.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	0.
Pa	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes:  a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	
	b Program-related investments — total from Part IX-B	1 b	0.
	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	<u> </u>
3	Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)	3a	
	b Cash distribution test (attach the required schedule)	3ь	
	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	0.
	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.  Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
•			
	<b>Note.</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the qualifies for the section 4940(e) reduction of tax in those years.	ne tound	เลแงก

### Part XIII Undistributed Income (see instructions)

	<b>(a)</b> Corpus	<b>(b)</b> Years prior to 2010	<b>(c)</b> 2010	<b>(d)</b> 2011
1 Distributable amount for 2011 from Part XI,				0.
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: 20, 20, 20				
3 Excess distributions carryover, if any, to 2011			,	
a From 2006 17,137.				
<b>b</b> From 2007				
<b>c</b> From 20080.				
<b>d</b> From 20090.				
e From 20100.				
f Total of lines 3a through e	17,137.			
4 Qualifying distributions for 2011 from Part				+
XII, line 4 <sup>.</sup> ► \$0.		-		
a Applied to 2010, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required – see instructions)				W-1
c Treated as distributions out of corpus (Election required – see instructions)				
d Applied to 2011 distributable amount				
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2011				
(If an amount appears in column (d), the same amount must be shown in column (a).)				
.,,				
6 Enter the net total of each column as				
indicated below:	17 127			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	17,137.			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut-				
ed income for which a notice of deficiency has been issued, or on which the section				
4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable				
amount — see instructions .		0.		
e Undistributed income for 2010 Subtract line 4a from			0	
line 2a Taxable amount — see instructions			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) (see instructions)				
8 Excess distributions carryover from 2006 not				
applied on line 5 or line 7 (see instructions)	17,137.			· · · · · ·
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2007 0.				
<b>b</b> Excess from 2008 0.				i
c Excess from 2009 0.				
d Excess from 2010 0.	1			
e Excess from 2011 0.				5

Form 990-PF (2011) ROBERT C CARCO 3				04-3060962	Page <b>10</b>
	Pant XIV Private Operating Foundations (see instructions and Part VII-A, question 9)				
1 a If the foundation has received a ruling or c is effective for 2011, enter the date of the	letermination letter t ruling .		perating foundation,		
<b>b</b> Check box to indicate whether the foundat		ating foundation des		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years	1,0000	
investment return from Part X for each year listed	(a) 2011	<b>(b)</b> 2010	(c) 2009	(d) 2008	(e) Total
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test — enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)		<u> </u>			
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test - enter:					
<ol> <li>Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)</li> </ol>					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Supplementary Information assets at any time during the	(Complete this ne vear – see in	part only if the structions.)	organization ha	ad \$5,000 or mor	e in
Information Regarding Foundation Managers at List any managers of the foundation who had close of any tax year (but only if they have NONE)	ave contributed mo	re than 2% of the to han \$5,000). (See so	tal contributions rec ection 507(d)(2))	eived by the foundati	on before the
<b>b</b> List any managers of the foundation who ca partnership or other entity) of which the NONE	own 10% or more of foundation has a 10	the stock of a corpo % or greater interes	oration (or an equall t.	y large portion of the	ownership of
2 Information Regarding Contribution, Grar Check here ► X if the foundation only requests for funds if the foundation makes complete items 2a, b, c, and d	nakes contributions	to preselected chari	table organizations		
a The name, address, and telephone number MARIO P CARCO	r of the person to w	hom applications sh	ould be addressed.		
7 WAINWRIGHT RD #109					
WINCHESTER	MA 0189	0-2394 (78	1) 729-4424		
b The form in which applications should be s SEE ATTACHED	submitted and inforn	nation and materials	they should include	<b>:</b> :	
c Any submission deadlines: SEE ATTACHED					
d Any restrictions or limitations on awards, s SEE ATTACHED	such as by geograph	nical areas, charitab	le fields, kinds of ins	stitutions, or other fac	ctors:

Page 11

3 Grants and Contributions Page 3			r or Approved for Futu				
Recipient			If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	,	Amount
Name and address (home of	or busine	ess)	substantial contributor	recipient			
a Paid during the year					COUCT ADOUT D		
ST MARY'S CATHOLIC			N/A	PRIVATE	SCHOLARSHIP		
SCHOOL WINCHESTER	MA	01890		PKIVALE	ĺ		5,600.
WINCHESTER SENIORS	I-TA	01030			SPECIAL APPEAL		3,000.
ASSOCIATION			N/A	PRIVATE			
WINCHESTER	MA	01890					500.
WINCHESTER SCHOLARSH					SPECIAL APPEAL		
WINCHESTER SCHOOLS			N/A	PRIVATE			
WINCHESTER	MA	01890	J				3,000.
WINCHESTER PUBLIC					SPECIAL APPEAL		
LIBRARY							
WINCHESTER	MA	01890		PRIVATE			1,000.
BLESSED JOHN XXIII			N/A		SPECIAL APPEAL		
558 SOUTH AVE				PRIVATE			
WESTON	MA	02493		}			1,050.
				ł			
				Ì			
				]			
						}	
Total			γ	1		► 3a	11,150.
<b>b</b> Approved for future payment	t						
			}				
						Į	
				L			
Total .			<del> </del>			► 3b	

Page 12

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

Enter gross amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by	section 512, 513, or 514	(e)
Program service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	<b>(d)</b> Amount	Related or exempt function income (See instructions)
· ·					
ab	<del>                                     </del>	***			
<del></del>	<del>    -</del>				
		· · · · · · · · · · · · · · · · · · ·			
<u> </u>					
ef		<del>-</del>			
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities	900001	6,275.	3		
5 Net rental income or (loss) from real estate:					
a Debt-financed property .					
<b>b</b> Not debt-financed property	İ				
6 Net rental income or (loss) from personal property .	,				
7 Other investment income .					
8 Gain or (loss) from sales of assets other than inventory .					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue.					
a					
b		_			
c	i I				
d					
е					
12 Subtotal Add columns (b), (d), and (e) .		6,275.			
13 Total. Add line 12, columns (b), (d), and (e)				13	6,275

(See worksheet in line 13 instructions to verify calculations.)

#### Part XVIE Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See instructions)
1	FILED ON RECORD

de	escribe	organization directed in section 501(cto political organization)	ly or indirectly eng ) of the Code (other ations?	page in any of er than section	the following v 501(c)(3) org	vith any anizatio	y other ons) or	organization in section 52	27,			Yes No
a Tr	ansfer	s from the reporting	ng foundation to a	noncharitable	exempt organi	zation	of:					14.5
(1	) Casl	h								•	1 a (1)	Χ
(2	) Othe	er assets .									1a (2)	X
<b>b</b> O	ther tra	ansactions <sup>,</sup>										
(1	) Sale	es of assets to a n	oncharitable exem	pt organizatio	n						1 b (1)	<u> </u>
(2	) Purc	chases of assets fr	rom a noncharitabl	e exempt orga	anization .						1b (2)	<u> </u>
(3	) Ren	tal of facilities, eq	uipment, or other a	essets							1 b (3)	X
(4	) Rein	nbursement arran	gements						•		1 b (4)	X
(5	) Loar	ns or loan guarant	ees								1 b (5)	Х
(6	) Perf	formance of servic	es or membership	or fundraising	solicitations						1 b (6)	Х
c SI	haring	of facilities, equip	ment, mailing lists	, other assets	, or paid emplo	yees				•	1 c	Х
	•	. , ,										
th	e door	ts other assets o	above is 'Yes,' cor r services given by arrangement, sho	the reportina	foundation. If	the fou	ındatıcı	n received les	s than faii	r market v	rket value o alue in	f
(a) Line	no.	(b) Amount involved	(c) Name of	noncharitable exe	mpt organization		<b>(d)</b> D	escription of trai	nsfers, transa	ictions, and	sharing arrange	ements
					-							
		·		_								
				•						-		
		1										
									*******			
			<del></del>			_		• •				
						-						
							-					
			<del></del>									
			<del></del>									
					<del></del>	!_				<del>-</del>		<del></del>
d€	escribe	undation directly or ed in section 501 (or complete the follo	or indirectly affiliate  of the Code (other  wing schedule	ed with, or rela er than section	ated to, one or n 501(c)(3)) or	more t in sect	tax-exe tion 52	mpt organiza 7?	tions		Yes	X No
		) Name of organiz		<b>(b)</b> Tvi	oe of organizat	ion		(	c) Descript	tion of rela	ationship	
		<u>, , , , , , , , , , , , , , , , , , , </u>		1,7,7,				-			_	
								-				
						·						
				-		-						
											-	
	Under p	penalties of perjury, I de	clare that I have examin	ed this return, incl	uding accompanyin	g schedu	les and s	statements, and to	the best of r	ny knowledg	and belief, it is	s true,
	correct,	and complete Declara	tion of preparer (other th	ian taxpayer) is ba	ised on all informat	ion of wh	nch prepa	arer has any know	rledge			
Sign		mal			. 11						May the IR: this return	discuss with the
Here	<u> </u>	MIN	u		05/09/20	1	TR	USTEE			preparer sh (see <u>instru</u> c	own below tions)?
	Signa	ature of officer or trustee			Date		Title			<del></del>	Y	es No
		Print/Type preparer's	name	repare	Signature			Date 1	Check	if	PTIN	
Paid		CATHERINE	DAIGLE					5/8/12	self-em	ployed		
Prepa	rer	Firm's name	Goodness &	Daigle,	P.C.				Firm's EIN	>		
Use O		Firm's address	393 Totten			03						
			Waltham			MA	024	51-2012	Phone no	(781	290-4	750
BAA											Form <b>990</b> -	PF (2011)

04-3060962

1

Form 990-PF, Page 1, Part I, Line 23

Line 23 Stmt

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
CUSTODIAN FEES	150.			
FOREIGN TAXES	143.			
CERT FEE	18.			

Total <u>311.</u>

Form 990-PF, Page 2, Part III, Line 5

**Other Decreases Stmt** 

UNREALIZED LOSSES
INVESTMENT PURCHASE 29,801.

Total <u>29,801.</u>

#### **Supporting Statement of:**

Form 990-PF, p1/Line 1(a)

Description	Amount		
STOCK DONATION-1000 SHS NCR STOCK	29,961.		
Total	29,961.		