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Form **990-PF**Department of the Treasury
Internal Revenue Service**Return of Private Foundation**
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation

OMB No 1545-0052

2011

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

, 20

Name of foundation

HELEN WADE GREENE CHAR TRUST

A Employer identification number

34-6527172

Number and street (or P O box number if mail is not delivered to street address)

Room/suite

B Telephone number (see instructions)

P O BOX 1802

(888) 866-3275

City or town, state, and ZIP code

PROVIDENCE, RI 02901-1802

G Check all that apply:

Initial return

Initial return of a former public charity

Final return

Amended return

Address change

Name change

H Check type of organization:

☒ Section 501(c)(3) exempt private foundation☐ Section 4947(a)(1) nonexempt charitable trust☐ Other taxable private foundation

I Fair market value of all assets at end

J Accounting method: ☒ Cash ☐ Accrual

of year (from Part II, col. (c), line

☐ Other (specify)

16) ▶ \$ 9,634,717.

(Part I, column (d) must be on cash basis)

C If exemption application is
pending, check here ☐D 1 Foreign organizations, check here ☐2 Foreign organizations meeting the
85% test, check here and attach
computation ☐E If private foundation status was terminated
under section 507(b)(1)(A), check here ☐F 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 columns (b), (c), and (d)
may not necessarily equal the amounts in
column (a) (see instructions))(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 (attach schedule)

2 Check ☒ if the foundation is not required to
attach Sch B

3 Interest on savings and temporary cash investments

4 Dividends and interest from securities

215,192.

213,979.

STMT 1

5a Gross rents

b Net rental income or (loss)

6a Net gain or (loss) from sale of assets not on line 10

2,327,419.

b Gross sales price for all

assets on line 6a 7,036,335.

7 Capital gain net income (from Part IV, line 2)

2,327,419.

8 Net short-term capital gain

9 Income modifications

10a Gross sales less returns
and allowances

b Less Cost of goods sold

c Gross profit or (loss) (attach schedule)

11 Other income (attach schedule)

3,010.

STMT 4

12 Total. Add lines 1 through 11

2,545,621.

2,541,398.

13 Compensation of officers, directors, trustees, etc.

42,072.

25,243.

16,829.

14 Other employee salaries and wages

15 Pension plans, employee benefits

16a Legal fees (attach schedule)

b Accounting fees (attach schedule) STMT 5

890.

NONE

NONE

890.

c Other professional fees (attach schedule) STMT 6

53,658.

32,195.

21,463.

17 Interest

18 Taxes (attach schedule) (see instructions) STMT 7

3,447.

3,447.

19 Depreciation (attach schedule) and depletion

20 Occupancy

21 Travel, conferences, and meetings

22 Printing and publications

23 Other expenses (attach schedule) STMT 8

200.

200.

24 Total operating and administrative expenses.

Add lines 13 through 23

100,267.

60,885.

NONE

39,382.

25 Contributions, gifts, grants paid

430,000.

430,000.

26 Total expenses and disbursements Add lines 24 and 25

530,267.

60,885.

NONE

469,382.

27 Subtract line 26 from line 12:

a Excess of revenue over expenses and disbursements

2,015,354.

b Net investment income (if negative, enter -0-)

2,480,513.

c Adjusted net income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see instructions.

JSA

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| Part II Balance Sheets | | Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions) | Beginning of year | End of year | |
|-----------------------------|---|---|-------------------|----------------|-----------------------|
| | | | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| Assets | 1 | Cash - non-interest-bearing | | | |
| | 2 | Savings and temporary cash investments | 2,192,783. | 121,645. | 121,645. |
| | 3 | 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 (attach schedule) (see instructions) | | | |
| | 7 | Other notes and loans receivable (attach schedule) ▶ Less allowance for doubtful accounts ▶ | | | |
| | 8 | Inventories for sale or use | | | |
| | 9 | Prepaid expenses and deferred charges | | | |
| | 10 a | Investments - U S and state government obligations (attach schedule) . | | | |
| | b | Investments - corporate stock (attach schedule) | 4,733,032. | 8,815,097. | 9,511,756. |
| | c | Investments - corporate bonds (attach schedule) | 2,547. | 1,424. | 1,316. |
| | 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) | 6,928,362. | 8,938,166. | 9,634,717. | |
| Liabilities | 17 | Accounts payable and accrued expenses | | | |
| | 18 | Grants payable | | | |
| | 19 | Deferred revenue | | | |
| | 20 | Loans from officers, directors, trustees, and other disqualified persons . | | | |
| | 21 | Mortgages and other notes payable (attach schedule) | | | |
| | 22 | Other liabilities (describe ▶) | | | |
| 23 | Total liabilities (add lines 17 through 22) | | | | |
| Net Assets or Fund Balances | Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31. | | | | |
| | 24 | Unrestricted | | | |
| | 25 | Temporarily restricted | | | |
| | 26 | Permanently restricted | | | |
| | Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ▶ <input checked="" type="checkbox"/> | | | | |
| | 27 | Capital stock, trust principal, or current funds | 6,928,362. | 8,938,166. | |
| | 28 | Paid-in or capital surplus, or land, bldg, and equipment fund | | | |
| | 29 | Retained earnings, accumulated income, endowment, or other funds . . | | | |
| | 30 | Total net assets or fund balances (see instructions) | 6,928,362. | 8,938,166. | |
| 31 | Total liabilities and net assets/fund balances (see instructions) | 6,928,362. | 8,938,166. | | |

Part III Analysis of Changes in Net Assets or Fund Balances

| | | | |
|---|--|---|------------|
| 1 | Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) | 1 | 6,928,362. |
| 2 | Enter amount from Part I, line 27a | 2 | 2,015,354. |
| 3 | Other increases not included in line 2 (itemize) ▶ | 3 | |
| 4 | Add lines 1, 2, and 3 | 4 | 8,943,716. |
| 5 | Decreases not included in line 2 (itemize) ▶ SEE STATEMENT 9 | 5 | 5,550. |
| 6 | Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 | 6 | 8,938,166. |

Part IV Capital Gains and Losses for Tax on Investment Income

| (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.) | | | (b) How acquired P-Purchase D-Donation | (c) Date acquired (mo., day, yr.) | (d) Date sold (mo., day, yr.) |
|--|--|---|--|--------------------------------------|----------------------------------|
| 1a PUBLICLY TRADED SECURITIES | | | | | |
| b | | | | | |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | (h) Gain or (loss) (e) plus (f) minus (g) | | |
| a 6,987,442. | | 4,708,916. | 2,278,526. | | |
| b | | | | | |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 | | | | | |
| (i) F.M.V. as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col (i) over col (j), if any | (l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h)) | | |
| a | | | 2,278,526. | | |
| b | | | | | |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| 2 Capital gain net income or (net capital loss) | | | 2 | 2,327,419. | |
| { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 } | | | | | |
| 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): | | | 3 | | |
| If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8 | | | | | |

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

| (a) Base period years Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitable-use assets | (d) Distribution ratio (col (b) divided by col (c)) |
|---|--|--|---|
| 2010 | 495,095. | 9,948,129. | 0.049768 |
| 2009 | 498,245. | 9,409,201. | 0.052953 |
| 2008 | 588,402. | 11,160,415. | 0.052722 |
| 2007 | 645,226. | 13,060,072. | 0.049404 |
| 2006 | 727,377. | 12,187,730. | 0.059681 |
| 2 Total of line 1, column (d) | | | 2 0.264528 |
| 3 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 | | | 3 0.052906 |
| 4 Enter the net value of noncharitable-use assets for 2011 from Part X, line 5 | | | 4 10,188,191. |
| 5 Multiply line 4 by line 3 | | | 5 539,016. |
| 6 Enter 1% of net investment income (1% of Part I, line 27b) | | | 6 24,805. |
| 7 Add lines 5 and 6 | | | 7 563,821. |
| 8 Enter qualifying distributions from Part XII, line 4 | | | 8 469,382. |

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.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

| | | | |
|---|------------|----|---------|
| 1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 | | 1 | 49,610. |
| Date of ruling or determination letter _____ (attach copy of letter if necessary - see instructions) | | | |
| b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b | | | |
| c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b). | | | |
| 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) | | 2 | |
| 3 Add lines 1 and 2 | | 3 | 49,610. |
| 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) | | 4 | NONE |
| 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | | 5 | 49,610. |
| 6 Credits/Payments: | | | |
| a 2011 estimated tax payments and 2010 overpayment credited to 2011 | 6a 1,696. | | |
| b Exempt foreign organizations - tax withheld at source | 6b NONE | | |
| c Tax paid with application for extension of time to file (Form 8868) | 6c 47,924. | | |
| d Backup withholding erroneously withheld | 6d | | |
| 7 Total credits and payments. Add lines 6a through 6d | | 7 | 49,620. |
| 8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached | | 8 | |
| 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | 9 | |
| 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | 10 | 10. |
| 11 Enter the amount of line 10 to be Credited to 2012 estimated tax <input type="checkbox"/> 10. Refunded <input type="checkbox"/> | | 11 | |

Part VII-A Statements Regarding Activities

| | Yes | No |
|---|-----|----|
| 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? | | X |
| b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities | | X |
| c Did the foundation file Form 1120-POL for this year? | | X |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation ► \$ _____ (2) On foundation managers ► \$ _____ | | |
| e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ _____ | | |
| 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities | | X |
| 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | | X |
| 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | X |
| b If "Yes," has it filed a tax return on Form 990-T for this year? | | |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T. | | X |
| 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? | X | |
| 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV | X | |
| 8a Enter the states to which the foundation reports or with which it is registered (see instructions) ► OH | | |
| 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 | 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 | | X |
| 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses | | X |

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) | 11 | | X |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions) | 12 | | X |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <u>N/A</u> | 13 | X | |
| 14 | The books are in care of <u>US TRUST FIDUCIARY TAX SERVICES</u> Telephone no. <u>(401) 278-6837</u> Located at <u>P.O. BOX 1802, PROVIDENCE, RI</u> ZIP + 4 <u>02901</u> | | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year <u>15</u> | | | |
| 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? See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country <u></u> | 16 | Yes | No X |

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

| | Yes | No |
|--|-----|----|
| 1a During the year did the foundation (either directly or indirectly) | | |
| (1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| (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) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| 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)? <input type="checkbox"/> | 1b | X |
| Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/> | | |
| 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? <input type="checkbox"/> | 1c | X |
| 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)) | | |
| 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <u></u> | | |
| 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) <input type="checkbox"/> | 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 <u></u> | | |
| 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| 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 determine if the foundation had excess business holdings in 2011.) <input type="checkbox"/> | 3b | |
| 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? <input type="checkbox"/> | 4a | X |
| 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? <input type="checkbox"/> | 4b | X |

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Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year did the foundation pay or incur any amount to

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No
- (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions) ☒ Yes ☐ No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? ☐ Yes ☒ NoOrganizations 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? ☒ Yes ☐ No
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? ☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No
If "Yes" to 6b, file Form 8870.**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ Yes ☒ No**Part VIII Information About 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 | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|----------------------|---|---|---|---------------------------------------|
| SEE STATEMENT 10 | | 42,072. | -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 account, other allowances |
|---|---|------------------|---|---------------------------------------|
| NONE | | NONE | NONE | NONE |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Total number of other employees paid over \$50,000 ☐ NONE

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3 Five highest-paid independent contractors for professional services** (see instructions). If none, enter "NONE."

| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
|--|---------------------|------------------|
| NONE | | NONE |
| | | |
| | | |
| | | |
| | | |
| | | |
| Total number of others receiving over \$50,000 for professional services | | NONE |

Part IX-A Summary of Direct Charitable Activities

| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. | Expenses |
|--|----------|
| 1 NONE | |
| 2 | |
| 3 | |
| 4 | |

Part IX-B Summary of Program-Related Investments (see instructions)

| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 | Amount |
|--|--------|
| 1 NONE | |
| 2 | |
| All other program-related investments. See instructions. | |
| 3 NONE | |
| Total. Add lines 1 through 3 | |

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, 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 | 1a | 9,035,757. |
| b | Average of monthly cash balances | 1b | 1,307,584. |
| c | Fair market value of all other assets (see instructions) | 1c | NONE |
| d | Total (add lines 1a, b, and c) | 1d | 10,343,341. |
| e | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) | 1e | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | NONE |
| 3 | Subtract line 2 from line 1d | 3 | 10,343,341. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 155,150. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 10,188,191. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 509,410. |

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

| | | | |
|-----------|---|-----------|----------|
| 1 | Minimum investment return from Part X, line 6 | 1 | 509,410. |
| 2a | Tax on investment income for 2011 from Part VI, line 5 | 2a | 49,610. |
| b | Income tax for 2011. (This does not include the tax from Part VI.) | 2b | |
| c | Add lines 2a and 2b | 2c | 49,610. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 459,800. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | NONE |
| 5 | Add lines 3 and 4 | 5 | 459,800. |
| 6 | Deduction from distributable amount (see instructions) | 6 | NONE |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 459,800. |

Part XII Qualifying Distributions (see instructions)

| | | | |
|----------|--|-----------|----------|
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | |
| a | Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 | 1a | 469,382. |
| b | Program-related investments - total from Part IX-B | 1b | |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | NONE |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | |
| a | Suitability test (prior IRS approval required) | 3a | NONE |
| b | Cash distribution test (attach the required schedule) | 3b | NONE |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 469,382. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions) | 5 | N/A |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 469,382. |

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2010 | (c) 2010 | (d) 2011 |
|---|---------------|----------------------------|-------------|-------------|
| 1 Distributable amount for 2011 from Part XI, line 7 | | | | 459,800. |
| 2 Undistributed income, if any, as of the end of 2011 | | | | |
| a Enter amount for 2010 only | | | NONE | |
| b Total for prior years 20____, 20____, 20____ | | NONE | | |
| 3 Excess distributions carryover, if any, to 2011: | | | | |
| a From 2006 129,458. | | | | |
| b From 2007 2,502. | | | | |
| c From 2008 33,859. | | | | |
| d From 2009 34,088. | | | | |
| e From 2010 NONE | | | | |
| f Total of lines 3a through e | 199,907. | | | |
| 4 Qualifying distributions for 2011 from Part XII, line 4: ► \$ 469,382. | | | | |
| a Applied to 2010, but not more than line 2a | | | NONE | |
| b Applied to undistributed income of prior years (Election required - see instructions) | | NONE | | |
| c Treated as distributions out of corpus (Election required - see instructions) | NONE | | | |
| d Applied to 2011 distributable amount | | | | 459,800. |
| e Remaining amount distributed out of corpus | 9,582. | | | |
| 5 Excess distributions carryover applied to 2011 | NONE | | | NONE |
| <i>(If an amount appears in column (d), the same amount must be shown in column (a))</i> | | | | |
| 6 Enter the net total of each column as indicated below: | | | | |
| a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 | 209,489. | | | |
| b Prior years' undistributed income. Subtract line 4b from line 2b | | NONE | | |
| 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 | | NONE | | |
| d Subtract line 6c from line 6b. Taxable amount - see instructions | | NONE | | |
| e Undistributed income for 2010. Subtract line 4a from line 2a. Taxable amount - see instructions | | | NONE | |
| f Undistributed income for 2011. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2012 | | | | NONE |
| 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) | NONE | | | |
| 8 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions) | 129,458. | | | |
| 9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a | 80,031. | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2007 2,502. | | | | |
| b Excess from 2008 33,859. | | | | |
| c Excess from 2009 34,088. | | | | |
| d Excess from 2010 NONE | | | | |
| e Excess from 2011 9,582. | | | | |

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

NOT APPLICABLE

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2011, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section

4942(j)(3) or 4942(j)(5)

| | Tax year | Prior 3 years | | | (e) Total |
|---|----------|---------------|----------|----------|-----------|
| | (a) 2011 | (b) 2010 | (c) 2009 | (d) 2008 | |
| 2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed | | | | | |
| b 85% of line 2a | | | | | |
| c Qualifying distributions from Part XII, line 4 for each year listed | | | | | |
| d Amounts included in line 2c not used directly for active conduct of exempt activities | | | | | |
| e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c | | | | | |
| 3 Complete 3a, b, or c for the alternative test relied upon | | | | | |
| a "Assets" alternative test - enter | | | | | |
| (1) Value of all assets | | | | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i). | | | | | |
| b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed | | | | | |
| c "Support" alternative test - enter | | | | | |
| (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties). | | | | | |
| (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 | | | | | |

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see instructions.)**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

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

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

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

c Any submission deadlines:

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

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

| 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 or business) | | | | |
| a Paid during the year SEE STATEMENT 14 | | | | |
| Total | | | ▶ 3a | 430,000. |
| b Approved for future payment | | | | |
| Total | | | ▶ 3b | |

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FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

| DESCRIPTION | REVENUE AND EXPENSES PER BOOKS | NET INVESTMENT INCOME |
|--|---|-----------------------------|
| ----- | ----- | ----- |
| AT&T INC | 323. | 323. |
| ABBOTT LABORATORIES | 9,672. | 9,672. |
| ALLSTATE CORPORATION | 1,364. | 1,364. |
| ALTRIA GROUP INC | 2,622. | 2,622. |
| AMERICAN ELECTRIC POWER CO | 423. | 423. |
| AMGEN INC COM | 168. | 168. |
| APACHE CORPORATION | 109. | 109. |
| BP AMOCO P L C SPONSORED ADR | 7,560. | 7,560. |
| BANK AMER CORP COM | 26. | 26. |
| BECTON DICKINSON & COMPANY | 315. | 315. |
| BEST BUY INCORPORATED | 675. | 675. |
| BRISTOL MYERS SQUIBB CO COM | 4,356. | 4,356. |
| CHEVRONTXACO CORP COM | 8,694. | 8,694. |
| CISCO SYSTEMS INCORPORATED | 2,424. | 2,424. |
| CITIGROUP INC NEW COM | 4. | 4. |
| COLUMBIA ACORN INTERNATIONAL FUND CL Z | 528. | 528. |
| COLUMBIA INCOME OPPORTUNITIES FUND CL Z | 2,408. | 2,408. |
| COLUMBIA MID CAP VALUE FUND CLASS Z SHAR | 2,345. | 2,345. |
| COLUMBIA DIVIDEND INCOME FUND CLASS Z SH | 10,449. | 10,449. |
| COLUMBIA CORPORATE INCOME FUND CLASS Z S | 10,594. | 10,594. |
| COLUMBIA REAL ESTATE EQUITY FUND CLASS Z | 1,411. | 1,411. |
| COLUMBIA SMALL CAP GROWTH I FUND CLASS Z | 557. | 557. |
| COMCAST CORP NEW CL A COM | 180. | 180. |
| CONAGRA INC | 2,070. | 2,070. |
| DUPONT E I DE NEMOURS & CO COM | 1,599. | 1,599. |
| DUKE ENERGY CORP NEW COM | 4,440. | 4,440. |
| EL PASO CORP COM | 90. | 90. |
| EMERSON ELEC CO | 240. | 240. |
| EXELON CORP COM | 4,725. | 4,725. |
| EXXON MOBIL CORPORATION | 6,992. | 6,992. |
| FRANKLIN RES INC COM | 1,071. | 1,071. |
| FRONTIER COMMUNICATIONS CORP COM | 406. | 90. |

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

=====

| DESCRIPTION | REVENUE AND EXPENSES PER BOOKS | NET INVESTMENT INCOME |
|--|---|-----------------------------|
| ----- | ----- | ----- |
| GNMA POOL #355479 DTD 5/1/1993 8.00% DUE | 116. | 116. |
| GENERAL ELEC CO | 3,843. | 3,843. |
| GOLDMAN SACHS GROUP INC | 455. | 455. |
| HEWLETT PACKARD CO COM | 720. | 720. |
| HOME DEPOT INC | 1,675. | 1,675. |
| HONEYWELL INTERNATIONAL INC | 466. | 466. |
| INTEL CORPORATION | 5,037. | 5,037. |
| INTERNATIONAL BUSINESS MACHS | 413. | 413. |
| INTERNATIONAL PAPER COMPANY | 263. | 263. |
| INTUIT INC | 188. | 188. |
| ISHARES S&P U S PFD STK INDEX FUND | 3,416. | 3,416. |
| J P MORGAN CHASE & CO COM | 3,499. | 3,499. |
| KRAFT FOODS INC CL A COM | 1,846. | 1,846. |
| LOCKHEED MARTIN CORPORATION | 1,218. | 1,218. |
| MACYS INC COM | 110. | 110. |
| MCDONALDS CORP | 590. | 590. |
| MCKESSON HBOC INC | 100. | 100. |
| MERCK & CO INC NEW COM | 3,876. | 3,876. |
| METLIFE INC | 740. | 740. |
| MICROSOFT CORPORATION | 300. | 300. |
| MONSANTO CO NEW COM | 120. | 120. |
| NEXTERA ENERGY INC COM | 550. | 550. |
| NIKE INC CL B | 1,364. | 1,364. |
| OCCIDENTAL PETROLEUM CORPORATION | 403. | 403. |
| ORACLE SYS CORP | 2,670. | 2,670. |
| P G & E CORPORATION | 364. | 364. |
| PNC BK CORP | 385. | 385. |
| PARKER HANNIFIN CORPORATION | 370. | 370. |
| PEPSICO INCORPORATED | 515. | 515. |
| PFIZER INC | 4,830. | 4,830. |
| PHILIP MORRIS INTL INC COM | 5,032. | 5,032. |
| PRAXAIR INCORPORATED | 325. | 325. |
| PROCTER & GAMBLE CO COM | 3,589. | 3,589. |

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FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

=====

| DESCRIPTION | REVENUE AND EXPENSES PER BOOKS | NET INVESTMENT INCOME |
|--|---|-----------------------------|
| ----- | ----- | ----- |
| PRUDENTIAL FINL INC COM | 1,160. | 1,160. |
| QUALCOMM INC | 430. | 430. |
| RAYTHEON CO COM NEW | 2,964. | 2,964. |
| SARA LEE CORP COM | 874. | 874. |
| SCHLUMBERGER LIMITED | 163. | 163. |
| SONOCO PRODUCTS CO | 2,236. | 2,236. |
| SOUND SHORE FUND | 2,871. | 1,974. |
| SPECTRA ENERGY CORP COM | 2,340. | 2,340. |
| STAPLES INCORPORATED | 1,450. | 1,450. |
| SUNTRUST BANKS INCORPORATED | 50. | 50. |
| SUPERVALU INC | 70. | 70. |
| TJX COMPANIES INCORPORATED NEW | 133. | 133. |
| TEMPLETON GLOBAL BD FUND ADVISOR CL | 2,994. | 2,994. |
| THORNBURG INTL VALUE FUND CL I | 3,997. | 3,997. |
| 3M CO COM | 3,630. | 3,630. |
| US BANCORP DEL COM NEW | 250. | 250. |
| UNITED PARCEL SERVICE CL B | 286. | 286. |
| UNITED TECHNOLOGIES CORP | 552. | 552. |
| VANGUARD TOTAL BD MARKET ETF | 13,815. | 13,815. |
| VANGUARD MSCI EMERGING MKTS ETF | 20,517. | 20,517. |
| VERIZON COMMUNICATIONS | 6,602. | 6,602. |
| WALGREEN CO | 1,150. | 1,150. |
| WASTE MANAGEMENT INC | 1,632. | 1,632. |
| WELLS FARGO COMPANY | 1,800. | 1,800. |
| BANK OF AMERICA MONEY MARKET SAVINGS ACC | 1,322. | 1,322. |
| CUSTODY BANK OF AMERICA MONEY MARKET SAV | 115. | 115. |
| EVEREST RE GROUP LTD COM | 2,880. | 2,880. |
| TE CONNECTIVITY LTD COM | 468. | 468. |
| TYCO INTL LTD NEW F COM | 213. | 213. |
| | ----- | ----- |
| | 215,192. | 213,979. |
| | ===== | ===== |
| TOTAL | | |

FORM 990PF, PART I - OTHER INCOME
=====

| DESCRIPTION ----- | REVENUE AND EXPENSES PER BOOKS ----- |
|----------------------|--|
| FEDERAL TAX REFUND | 3,010. |
| | ----- |
| TOTALS | 3,010. |
| | ===== |

FORM 990PF, PART I - ACCOUNTING FEES
=====

| DESCRIPTION ----- | REVENUE AND EXPENSES PER BOOKS ----- | NET INVESTMENT INCOME ----- | ADJUSTED NET INCOME ----- | CHARITABLE PURPOSES ----- |
|--------------------------------|--|--------------------------------------|------------------------------------|---------------------------------|
| TAX PREPARATION FEE (NON-ALLOC | 890. | | | 890. |
| TOTALS | 890. | NONE | NONE | 890. |
| | ===== | ===== | ===== | ===== |

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

=====

| DESCRIPTION ----- | REVENUE AND EXPENSES PER BOOKS ----- | NET INVESTMENT INCOME ----- | CHARITABLE PURPOSES ----- |
|--------------------------------|--|--------------------------------------|---------------------------------|
| FEES PAID TO WALTER S. BURRAGE | 53,658. | 32,195. | 21,463. |
| TOTALS | 53,658. | 32,195. | 21,463. |
| | ===== | ===== | ===== |

FORM 990PF, PART I - TAXES
=====

| DESCRIPTION ----- | REVENUE AND EXPENSES PER BOOKS ----- | NET INVESTMENT INCOME ----- |
|--------------------------------|--|--------------------------------------|
| FOREIGN TAXES ON QUALIFIED FOR | 2,084. | 2,084. |
| FOREIGN TAXES ON NONQUALIFIED | 1,363. | 1,363. |
| | ----- | ----- |
| TOTALS | 3,447. | 3,447. |
| | ===== | ===== |

FORM 990PF, PART I - OTHER EXPENSES
=====

| DESCRIPTION ----- | REVENUE AND EXPENSES PER BOOKS ----- | CHARITABLE PURPOSES ----- |
|--------------------------------|--|---------------------------------|
| OTHER ALLOCABLE EXPENSE-INCOME | 200. | 200. |
| TOTALS | ----- 200. ===== | ----- 200. ===== |

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES
=====

| DESCRIPTION ----- | AMOUNT ----- |
|---------------------------|-----------------|
| TYE COST ADJUSTMENT | 287. |
| TYE INCOME ADJUSTMENT | 4,049. |
| TYE SALES ADJUSTMENT | 3. |
| TYE SECURITIES ADJUSTMENT | 1,211. |
| | ----- |
| TOTAL | 5,550. |
| | ===== |

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES
=====

OFFICER NAME:

BANK OF AMERICA, N.A.

ADDRESS:

225 FRANKLIN STREET, MA1-225-04-02
BOSTON, MA 02110

TITLE:

CO - TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

COMPENSATION

42,072.

COMPENSATION EXPLANATION:

SEE ATTACHED FOOTNOTE

OFFICER NAME:

WALTER S. BURRAGE, JR

ADDRESS:

120 WATER ST. PH
BOSTON, MA 02109

TITLE:

CO-TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 10

OFFICER NAME:

E. LEE PERRY

ADDRESS:

225 FRANKLIN STREET, MA1-225-04-02
BOSTON, MA 02110

TITLE:

CO-TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 10

OFFICER NAME:

SLOCUMB HOLLIS PERRY

ADDRESS:

225 FRANKLIN STREET, MA1-225-04-02
BOSTON, MA 02110

TITLE:

CO-TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 10

HELEN WADE GREENE CHAR TRUST

34-6527172

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

=====

OFFICER NAME:

ANNE HOLLIS PERKINS

ADDRESS:

225 FRANKLIN STREET, MA1-225-04-02

BOSTON, MA 02110

TITLE:

CO-TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 10

TOTAL COMPENSATION:

42,072.

=====

RECIPIENT NAME:
EDWARD LEE & SLOCUMB PERRY
FDN
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
SUPPORTS NAMED ORGANIZATION
FOUNDATION STATUS OF RECIPIENT:
EXEMPT
AMOUNT OF GRANT PAID 310,000.

RECIPIENT NAME:
UNITED WAY OF GREATER
CLEVELAND
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
SUPPORTS NAMED ORGANIZATION
FOUNDATION STATUS OF RECIPIENT:
PUBLIC CHARITY
AMOUNT OF GRANT PAID 5,000.

RECIPIENT NAME:
MUSICAL ARTS ASSOCIATION DBA
CLEVELAND
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
SUPPORTS NAMED ORGANIZATION
FOUNDATION STATUS OF RECIPIENT:
PUBLIC CHARITY
AMOUNT OF GRANT PAID 15,000.

RECIPIENT NAME:
UNIVERSITY HOSPITALS
OF CLEVELAND
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
SUPPORTS NAMED ORGANIZATION
FOUNDATION STATUS OF RECIPIENT:
PUBLIC CHARITY
AMOUNT OF GRANT PAID 10,000.

RECIPIENT NAME:
WESTERN RESERVE
HISTORICAL SOCIETY
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
SUPPORTS NAMED ORGANIZATION
FOUNDATION STATUS OF RECIPIENT:
PUBLIC CHARITY
AMOUNT OF GRANT PAID 5,000.

RECIPIENT NAME:
BEECH BROOK
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
SUPPORTS NAMED ORGANIZATION
FOUNDATION STATUS OF RECIPIENT:
PUBLIC CHARITY
AMOUNT OF GRANT PAID 8,000.

RECIPIENT NAME:
CLEVELAND MUSEUM OF ART
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
SUPPORTS NAMED ORGANIZATION
FOUNDATION STATUS OF RECIPIENT:
PUBLIC CHARITY
AMOUNT OF GRANT PAID 26,000.

RECIPIENT NAME:
CASE WESTERN RESERVE
UNIVERSITY
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
SUPPORTS NAMED ORGANIZATION
FOUNDATION STATUS OF RECIPIENT:
PUBLIC CHARITY
AMOUNT OF GRANT PAID 18,000.

RECIPIENT NAME:
HOSPICE OF THE WESTERN
RESERVE
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
SUPPORTS NAMED ORGANIZATION
FOUNDATION STATUS OF RECIPIENT:
PUBLIC CHARITY
AMOUNT OF GRANT PAID 5,000.

RECIPIENT NAME:
CLEVELAND INSTITUTE OF
ART
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
SUPPORTS NAMED ORGANIZATION
FOUNDATION STATUS OF RECIPIENT:
PUBLIC CHARITY
AMOUNT OF GRANT PAID 10,000.

RECIPIENT NAME:
CENTRAL SCHOOL OF
PRACTICAL NURSING, INC
RELATIONSHIP:
N/A
PURPOSE OF GRANT:
SUPPORTS NAMED ORGANIZATION
FOUNDATION STATUS OF RECIPIENT:
PUBLIC CHARITY
AMOUNT OF GRANT PAID 18,000.

TOTAL GRANTS PAID: 430,000.
=====

FEDERAL FOOTNOTES

=====

THE COMPENSATION SHOWN ON THE RETURN THAT IS PAID TO BANK OF AMERICA, N.A. AS CORPORATE TRUSTEE IS NOT CALCULATED BASED UPON AN HOURLY RATE FOR TIME SPENT BY THE TRUSTEE; RATHER, BANK OF AMERICA'S COMPENSATION AS CORPORATE TRUSTEE IS CALCULATED USING A MARKET VALUE FEE SCHEDULE. THE TRUST OFFICER'S TIME SPENT PERFORMING ADMINISTRATIVE RESPONSIBILITIES FOR THIS FOUNDATION AVERAGES ONE HOUR PER WEEK. IN ADDITION, TIME IS SPENT BY OTHER STAFF MEMBERS FOR RECORDKEEPING, INVESTMENT MANAGEMENT, INCOME COLLECTION, RENDERING STATEMENTS AND ACCOUNTINGS, REGULATORY REPORTING, REGULATORY COMPLIANCE, AND TAX SERVICES.

**SCHEDULE D
(Form 1041)**

Department of the Treasury
Internal Revenue Service

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T. See the Instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

2011

Name of estate or trust

Employer identification number

HELEN WADE GREENE CHAR TRUST

34-6527172

Note: Form 5227 filers need to complete **only** Parts I and II.

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less

| (a) Description of property (Example 100 shares 7% preferred of "Z" Co) | (b) Date acquired (mo, day, yr) | (c) Date sold (mo, day, yr) | (d) Sales price | (e) Cost or other basis (see instructions) | (f) Gain or (loss) for the entire year Subtract (e) from (d) |
|--|------------------------------------|--------------------------------|-----------------|---|--|
| 1a | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b | | | | | 1b 2,213. |
| 2 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 | | | | | 2 |
| 3 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts | | | | | 3 |
| 4 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2010 Capital Loss Carryover Worksheet | | | | | 4 () |
| 5 Net short-term gain or (loss). Combine lines 1a through 4 in column (f). Enter here and on line 13, column (3) on the back | | | | | 5 2,213. |

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

| (a) Description of property (Example 100 shares 7% preferred of "Z" Co) | (b) Date acquired (mo, day, yr) | (c) Date sold (mo, day, yr) | (d) Sales price | (e) Cost or other basis (see instructions) | (f) Gain or (loss) for the entire year Subtract (e) from (d) |
|--|------------------------------------|--------------------------------|-----------------|---|--|
| 6a LONG-TERM CAPITAL GAIN DIVIDENDS | | | | | 48,893. |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b | | | | | 6b 2,276,313. |
| 7 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 | | | | | 7 |
| 8 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts | | | | | 8 |
| 9 Capital gain distributions | | | | | 9 |
| 10 Gain from Form 4797, Part I | | | | | 10 |
| 11 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2010 Capital Loss Carryover Worksheet | | | | | 11 () |
| 12 Net long-term gain or (loss). Combine lines 6a through 11 in column (f). Enter here and on line 14a, column (3) on the back | | | | | 12 2,325,206. |

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2011

Part III Summary of Parts I and II**Caution:** Read the instructions *before* completing this part.

| | | (1) Beneficiaries' (see instr.) | (2) Estate's or trust's | (3) Total |
|-----------|---|------------------------------------|----------------------------|------------|
| 13 | Net short-term gain or (loss) | 13 | | 2,213. |
| 14 | Net long-term gain or (loss): | | | |
| a | Total for year | 14a | | 2,325,206. |
| b | Unrecaptured section 1250 gain (see line 18 of the wrksh.) | 14b | | |
| c | 28% rate gain | 14c | | |
| 15 | Total net gain or (loss). Combine lines 13 and 14a ▶ | 15 | | 2,327,419. |

Note: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a). If lines 14a and 15, column (2), are net gains, go to Part V, and **do not** complete Part IV. If line 15, column (3), is a net loss, complete Part IV and the **Capital Loss Carryover Worksheet**, as necessary.

Part IV Capital Loss Limitation

| | | | |
|-----------|--|-----------|-----|
| 16 | Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of: a The loss on line 15, column (3) or b \$3,000 | 16 | () |
|-----------|--|-----------|-----|

Note: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 34), is a loss, complete the **Capital Loss Carryover Worksheet** in the instructions to figure your capital loss carryover.

Part V Tax Computation Using Maximum Capital Gains Rates

Form 1041 filers. Complete this part **only** if both lines 14a and 15 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero.

Caution: Skip this part and complete the **Schedule D Tax Worksheet** in the instructions if

- Either line 14b, col. (2) or line 14c, col. (2) is more than zero, or
- Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.

Form 990-T trusts. Complete this part **only** if both lines 14a and 15 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and complete the **Schedule D Tax Worksheet** in the instructions if either line 14b, col. (2) or line 14c, col. (2) is more than zero.

| | | | | |
|-----------|--|-----------|--|--|
| 17 | Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34) | 17 | | |
| 18 | Enter the smaller of line 14a or 15 in column (2) but not less than zero | 18 | | |
| 19 | Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T) | 19 | | |
| 20 | Add lines 18 and 19 | 20 | | |
| 21 | If the estate or trust is filing Form 4952, enter the amount from line 4g; otherwise, enter -0- . . . ▶ | 21 | | |
| 22 | Subtract line 21 from line 20. If zero or less, enter -0- | 22 | | |
| 23 | Subtract line 22 from line 17. If zero or less, enter -0- | 23 | | |
| 24 | Enter the smaller of the amount on line 17 or \$2,300 | 24 | | |
| 25 | Is the amount on line 23 equal to or more than the amount on line 24? <input type="checkbox"/> Yes. Skip lines 25 and 26; go to line 27 and check the "No" box. <input type="checkbox"/> No. Enter the amount from line 23 | 25 | | |
| 26 | Subtract line 25 from line 24 | 26 | | |
| 27 | Are the amounts on lines 22 and 26 the same? <input type="checkbox"/> Yes. Skip lines 27 thru 30, go to line 31 <input type="checkbox"/> No. Enter the smaller of line 17 or line 22 | 27 | | |
| 28 | Enter the amount from line 26 (If line 26 is blank, enter -0-) | 28 | | |
| 29 | Subtract line 28 from line 27 | 29 | | |
| 30 | Multiply line 29 by 15% (.15) | 30 | | |
| 31 | Figure the tax on the amount on line 23. Use the 2011 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041) | 31 | | |
| 32 | Add lines 30 and 31 | 32 | | |
| 33 | Figure the tax on the amount on line 17. Use the 2011 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041) | 33 | | |
| 34 | Tax on all taxable income. Enter the smaller of line 32 or line 33 here and on Form 1041, Schedule G, line 1a (or Form 990-T, line 36) | 34 | | |

Schedule D (Form 1041) 2011

**Continuation Sheet for Schedule D
(Form 1041)**

OMB No 1545-0092

2011

► See instructions for Schedule D (Form 1041).

► Attach to Schedule D to list additional transactions for lines 1a and 6a.

Name of estate or trust

HELEN WADE GREENE CHAR TRUST

Employer identification number

34-6527172

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less[illegible]

| | | |
|---|--|----------|
| 1b Total. Combine the amounts in column (f). Enter here and on Schedule D, line 1b | | 2,213.00 |
|---|--|----------|

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D-1 (Form 1041) 2011

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side

Employer identification number

HELEN WADE GREENE CHAR TRUST

34-6527172

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

| (a) Description of property (Example 100 sh. 7% preferred of "Z" Co) | (b) Date acquired (mo, day, yr) | (c) Date sold (mo, day, yr) | (d) Sales price | (e) Cost or other basis (see instructions) | (f) Gain or (loss) Subtract (e) from (d) |
|---|---------------------------------------|--------------------------------|-----------------|---|---|
| 6a 5700. ABBOTT LABORATORIES | 06/28/2001 | 08/18/2011 | 276,952.00 | 8,212.00 | 268,740.00 |
| 686. AGILENT TECHNOLOGIES | 06/28/2001 | 08/18/2011 | 22,129.00 | 30,030.00 | -7,901.00 |
| 2200. ALLSTATE CORPORATION | 06/28/2001 | 08/18/2011 | 53,437.00 | 25,540.00 | 27,897.00 |
| 2300. ALTRIA GROUP INC | 06/28/2001 | 08/18/2011 | 59,275.00 | 26,029.00 | 33,246.00 |
| 6000. BP AMOCO P L C SPONS | 06/28/2001 | 08/18/2011 | 235,197.00 | 94,935.00 | 140,262.00 |
| 1289. BANK AMER CORP COM | 11/17/2005 | 08/18/2011 | 8,945.00 | 99,491.00 | -90,546.00 |
| 1234.409 BARON ASSET FD SH | 11/15/2001 | 08/18/2011 | 61,893.00 | 50,426.00 | 11,467.00 |
| 12398.723 BARON ASSET FD S | 05/05/1955 | 08/18/2011 | 621,672.00 | 505,000.00 | 116,672.00 |
| 457.287 BARON ASSET FD SH | 11/21/2002 | 08/18/2011 | 22,928.00 | 16,046.00 | 6,882.00 |
| 1500. BEST BUY INCORPORATE | 11/17/2005 | 08/18/2011 | 35,920.00 | 67,817.00 | -31,897.00 |
| 4400. BRISTOL MYERS SQUIBB | 06/28/2001 | 08/18/2011 | 121,800.00 | 56,225.00 | 65,575.00 |
| 3000. CHEVRONTXACO CORP C | 06/28/2001 | 08/18/2011 | 278,887.00 | 62,543.00 | 216,344.00 |
| 17200. CISCO SYSTEMS INCOR | 07/02/2001 | 08/18/2011 | 258,339.00 | 21,010.00 | 237,329.00 |
| 200. CITIGROUP INC NEW COM | 02/01/2002 | 08/18/2011 | 5,537.00 | 87,020.00 | -81,483.00 |
| 3000. CONAGRA INC | 06/28/2001 | 08/18/2011 | 69,744.00 | 92,243.00 | -22,499.00 |
| 1300. DUPONT E I DE NEMOUR | 06/28/2001 | 08/18/2011 | 57,656.00 | 24,267.00 | 33,389.00 |
| 6000. DUKE ENERGY CORP NEW | 11/17/2005 | 08/18/2011 | 109,635.00 | 92,166.00 | 17,469.00 |
| 3000. EL PASO CORP COM | 11/17/2005 | 08/18/2011 | 53,161.00 | 34,050.00 | 19,111.00 |
| 3000. EXELON CORP COM | 11/17/2005 | 08/18/2011 | 124,840.00 | 156,083.00 | -31,243.00 |
| 3860. EXXON MOBIL CORPORAT | 06/28/2001 | 08/18/2011 | 273,236.00 | 70,511.00 | 202,725.00 |
| 85. FAIRPOINT COMMUNICATIO | 06/28/2001 | 02/15/2011 | | 482.00 | -482.00 |
| 1083. FRONTIER COMMUNICATI | 06/28/2001 | 08/18/2011 | 7,695.00 | 6,621.00 | 1,074.00 |
| 517.61 GNMA POOL #355479 D | 07/03/2001 | 01/31/2011 | 518.00 | 586.00 | -68.00 |
| 8.00% DUE 5/15/2023 | 07/03/2001 | 02/28/2011 | 292.00 | 330.00 | -38.00 |
| 291.83 GNMA POOL #355479 D | 07/03/2001 | 03/31/2011 | 18.00 | 20.00 | -2.00 |
| 8.00% DUE 5/15/2023 | | | | | |
| 6b Total. Combine the amounts in column (f). Enter here and on Schedule D, line 6b | | | | | |

Schedule D-1 (Form 1041) 2011

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side

Employer identification number

HELEN WADE GREENE CHAR TRUST

34-6527172

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

| (a) Description of property (Example 100 sh 7% preferred of "Z" Co) | (b) Date acquired (mo., day, yr) | (c) Date sold (mo., day, yr) | (d) Sales price | (e) Cost or other basis (see instructions) | (f) Gain or (loss) Subtract (e) from (d) |
|---|--|---------------------------------|-----------------|---|---|
| 6a 17.6 GNMA POOL #355479 DTD 8.00% DUE 5/15/2023 | 07/03/2001 | 04/30/2011 | 18.00 | 20.00 | -2.00 |
| 17.73 GNMA POOL #355479 DT 8.00% DUE 5/15/2023 | 07/03/2001 | 05/31/2011 | 18.00 | 20.00 | -2.00 |
| 17.85 GNMA POOL #355479 DT 8.00% DUE 5/15/2023 | 07/03/2001 | 06/30/2011 | 18.00 | 20.00 | -2.00 |
| 17.98 GNMA POOL #355479 DT 8.00% DUE 5/15/2023 | 07/03/2001 | 07/31/2011 | 18.00 | 20.00 | -2.00 |
| 18.11 GNMA POOL #355479 DT 8.00% DUE 5/15/2023 | 07/03/2001 | 08/31/2011 | 18.00 | 21.00 | -3.00 |
| 18.23 GNMA POOL #355479 DT 8.00% DUE 5/15/2023 | 07/03/2001 | 09/30/2011 | 18.00 | 21.00 | -3.00 |
| 18.36 GNMA POOL #355479 DT 8.00% DUE 5/15/2023 | 07/03/2001 | 10/31/2011 | 18.00 | 21.00 | -3.00 |
| 18.49 GNMA POOL #355479 DT 8.00% DUE 5/15/2023 | 07/03/2001 | 11/30/2011 | 18.00 | 21.00 | -3.00 |
| 18.62 GNMA POOL #355479 DT 8.00% DUE 5/15/2023 | 07/03/2001 | 12/31/2011 | 19.00 | 21.00 | -2.00 |
| 5700. GENERAL ELEC CO | 07/02/2001 | 08/18/2011 | 87,067.00 | 38,057.00 | 49,010.00 |
| 2400. GENERAL ELEC CO | 07/02/2001 | 11/30/2011 | 36,903.00 | 16,024.00 | 20,879.00 |
| 475. HANESBRANDS INC COM | 06/28/2001 | 08/18/2011 | 11,896.00 | 8,150.00 | 3,746.00 |
| 3600. HEWLETT PACKARD CO C | 06/28/2001 | 08/18/2011 | 109,132.00 | 77,818.00 | 31,314.00 |
| 750. HOME DEPOT INC | 11/17/2005 | 08/18/2011 | 23,999.00 | 31,853.00 | -7,854.00 |
| 340. HOSPIRA INC | 11/17/2005 | 08/18/2011 | 14,492.00 | 14,923.00 | -431.00 |
| 660. HOSPIRA INC | 06/28/2001 | 08/18/2011 | 28,131.00 | 631.00 | 27,500.00 |
| 8800. INTEL CORPORATION | 06/28/2001 | 08/18/2011 | 173,401.00 | 70,813.00 | 102,588.00 |
| 2580. J P MORGAN CHASE & C | 06/28/2001 | 08/18/2011 | 90,105.00 | 21,524.00 | 68,581.00 |
| 812. LOCKHEED MARTIN CORPO | 06/28/2001 | 08/18/2011 | 56,139.00 | 10,542.00 | 45,597.00 |
| 1000. MEDCO HEALTH SOLUTIO | 11/17/2005 | 08/18/2011 | 51,998.00 | 26,845.00 | 25,153.00 |
| 3400. MERCK & CO INC NEW C | 06/28/2001 | 08/18/2011 | 105,301.00 | 78,809.00 | 26,492.00 |
| 2200. NIKE INC CL B | 11/17/2005 | 08/18/2011 | 175,275.00 | 95,810.00 | 79,465.00 |
| 13000. ORACLE SYS CORP | 06/28/2001 | 08/18/2011 | 325,258.00 | 60,667.00 | 264,591.00 |
| 3000. PFIZER INC | 02/01/2002 | 08/18/2011 | 53,054.00 | 125,999.00 | -72,945.00 |
| 2184. PFIZER INC | 10/16/2009 | 08/18/2011 | 38,624.00 | 38,253.00 | 371.00 |
| 6b Total. Combine the amounts in column (f). Enter here and on Schedule D, line 6b | | | | | |

Schedule D-1 (Form 1041) 2011

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side

Employer identification number

HELEN WADE GREENE CHAR TRUST

34-6527172

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

| (a) Description of property (Example 100 sh 7% preferred of "Z" Co) | (b) Date acquired (mo, day, yr) | (c) Date sold (mo, day, yr) | (d) Sales price | (e) Cost or other basis (see instructions) | (f) Gain or (loss) Subtract (e) from (d) |
|---|---------------------------------------|--------------------------------|-----------------|---|---|
| 6a 1500. PHILIP MORRIS INTL I | 06/28/2001 | 08/18/2011 | 102,193.00 | 38,999.00 | 63,194.00 |
| 26254.952 PIONEER GROWTH O | 06/28/2001 | 08/18/2011 | 626,443.00 | 505,000.00 | 121,443.00 |
| FUND CL A | 06/28/2001 | 08/18/2011 | 626,443.00 | 505,000.00 | 121,443.00 |
| 1000. PROCTER & GAMBLE CO | 06/28/2001 | 08/18/2011 | 60,463.00 | 41,205.00 | 19,258.00 |
| 2400. RAYTHEON CO COM NEW | 06/28/2001 | 08/18/2011 | 95,987.00 | 53,844.00 | 42,143.00 |
| 3800. SARA LEE CORP COM | 06/28/2001 | 08/18/2011 | 65,796.00 | 46,708.00 | 19,088.00 |
| 2600. SONOCO PRODUCTS CO | 06/28/2001 | 08/18/2011 | 73,418.00 | 80,594.00 | -7,176.00 |
| 160.952 SOUND SHORE FUND | 12/30/2003 | 08/18/2011 | 4,363.00 | 5,390.00 | -1,027.00 |
| 108.636 SOUND SHORE FUND | 12/30/2003 | 08/18/2011 | 2,945.00 | 3,638.00 | -693.00 |
| 18.409 SOUND SHORE FUND | 12/30/2003 | 08/18/2011 | 499.00 | 617.00 | -118.00 |
| 22.37 SOUND SHORE FUND | 12/28/2001 | 08/18/2011 | 606.00 | 688.00 | -82.00 |
| 1689.974 SOUND SHORE FUND | 12/28/2001 | 08/18/2011 | 45,815.00 | 51,928.00 | -6,113.00 |
| 14.29 SOUND SHORE FUND | 06/27/2003 | 08/18/2011 | 387.00 | 419.00 | -32.00 |
| 9.429 SOUND SHORE FUND | 06/26/2002 | 08/18/2011 | 256.00 | 262.00 | -6.00 |
| 18822.214 SOUND SHORE FUND | 06/28/2001 | 08/18/2011 | 510,270.00 | 504,191.00 | 6,079.00 |
| 30.498 SOUND SHORE FUND | 12/30/2002 | 08/18/2011 | 827.00 | 777.00 | 50.00 |
| 3000. SPECTRA ENERGY CORP | 11/17/2005 | 08/18/2011 | 72,418.00 | 68,710.00 | 3,708.00 |
| 5000. STAPLES INCORPORATED | 11/17/2005 | 08/18/2011 | 67,263.00 | 115,650.00 | -48,387.00 |
| 2500. SUNTRUST BANKS INCOR | 06/28/2001 | 08/18/2011 | 44,365.00 | 27,431.00 | 16,934.00 |
| 400. SUPERVALU INC | 06/03/2006 | 08/18/2011 | 2,758.00 | 11,692.00 | -8,934.00 |
| 2200. 3M CO COM | 06/28/2001 | 08/18/2011 | 169,805.00 | 39,291.00 | 130,514.00 |
| 1000. 21ST CENTY HLDG CO C | 02/01/2007 | 08/19/2011 | 2,625.00 | 22,830.00 | -20,205.00 |
| 2856. 21ST CENTY HLDG CO C | 02/01/2007 | 08/19/2011 | 7,497.00 | 62,273.00 | -54,776.00 |
| 144. 21ST CENTY HLDG CO CO | 02/01/2007 | 08/22/2011 | 349.00 | 3,140.00 | -2,791.00 |
| 3214. VERIZON COMMUNICATIO | 06/28/2001 | 08/18/2011 | 111,976.00 | 76,338.00 | 35,638.00 |
| 1300. VERIZON COMMUNICATIO | 06/28/2001 | 08/25/2011 | 46,492.00 | 30,877.00 | 15,615.00 |

6b Total. Combine the amounts in column (f). Enter here and on Schedule D, line 6b

Schedule D-1 (Form 1041) 2011

Employer identification number

34-6527172

[illegible]

| | |
|---|--------------|
| 6b Total. Combine the amounts in column (f). Enter here and on Schedule D, line 6b | 2,276,313.00 |
|---|--------------|

Schedule D-1 (Form 1041) 2011

**EXPENDITURE REPORT
GRANTEE**

**EDWARD LEE PERRY AND SLOCUMB HOLLIS PERRY
145 Sargent Road, Brookline, MA 02445**

NAME OF TRUST: Helen Wade Greene Charitable Trust

ACCOUNT #: _____

To Bank of America, N.A., in its capacity as Trustee:

The following constitutes the expenditure report for the Helen Wade Greene Charitable Trust for the period January 1 through December 31, 2011 for a grant award totaling \$310,000 ("grant funds") received by the Edward Lee Perry and Slocumb Hollis Perry Foundation. We certify that the grant funds and the income earned on the grant funds (if any) have been used exclusively for the charitable purposes set forth in the grant agreement letter.

Attached is a report showing income earned on the grant funds, if any, and expenditures of the grant funds and income earned on the grant funds during the fiscal year by amount and purpose.

No part of the grant funds or interest earned on the grant funds were used for any of the following purposes:

- (i) carrying on propaganda or attempting to influence legislation,
- (ii) influencing the outcome of any election for public office or carrying on directly or indirectly any voter registration drive,
- (iii) making grants to individuals or organizations that do not comply with sections 4945(d)(3) or (d)(4) of the Internal Revenue Code, or
- (iv) for any non-charitable purpose, that is, any purpose not described in section 170(c)(2)(B) of the Internal Revenue Code.

I further certify that the Edward Lee Perry and Slocumb Hollis Perry Foundation has not diverted any portion of the grant funds (or the income on the grant funds) from the specified purpose of the grant and that this organization has complied with the terms of the grant. I am authorized to sign this report on behalf of the Grantee. I have examined the foregoing statements, including the attached Expenditure Responsibility Report, and they are true, correct and complete, to the best of my knowledge.

By: _____

Its Treasurer & Trustee

(Slocumb Hollis Perry)

Telephone Number: 617-739-1298

Date October 26, 2012

EXPENDITURE RESPONSIBILITY REPORT
(Note that the final report must cover expenditures over the life of the grant.)

Date of report: _____October 25, 2012_____

Report Period: January 1 - December 31, 2012

Name and address of organization:

Edward Lee Perry and Slocumb Hollis Perry Foundation
145 Sargent Road
Brookline, MA 02445

Amounts and dates of grants received during the period from January 1, 2011 through December 31, 2012:

| <u>Date</u> | <u>Amount</u> |
|-------------|---------------|
| 5/13/11 | \$150,000 |
| 7/15/11 | \$10,000 |
| 10/7/11 | \$150,000 |

Describe the uses of grant funds and the progress made towards the goal of the grant(attach additional pages, if needed):

The funds were used to provide grants to worthy not-for-profit organizations _____

Itemize all income earned on the grant funds: \$32.67

Itemize all amounts spent from the grant funds and income earned on the grant funds, including salaries, travel and supplies (attach additional pages, if needed):

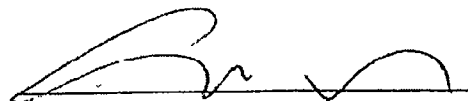
| <u>Date</u> | <u>Amount</u> | <u>Purpose</u> |
|-------------|---------------|----------------|
|-------------|---------------|----------------|

See attached list

Amount of grant funds and income earned on the grant funds unspent as of the end of Grantee's most recent fiscal year: \$_0

[All such expenditures are treated as distributions "out of corpus" under Treas. Reg. 53.4942(a)-3(d). We understand that this means that we have, during this fiscal year, made expenditures equal to or greater than (1) the full amount of the Grant, (2) plus 5% of the value of our investment assets during our previous fiscal year. Attached is a copy of our form 990PF for the previous fiscal year.]

By:



Its Treasurer & Trustee

Date:

10/26/12

Expenditure Report for Tax Year Ending December 31, 2011:
Edward Lee Perry and Slocumb Hollis Perry Foundation

| Check No. | Payment Date | Grantee | Amount |
|-----------|--------------|--|-------------|
| 674 | 12/27/2010 | New England Conservatory 290 Huntington Avenue Boston, MA 02115 | \$25,000 00 |
| 675 | 12/27/2010 | Museum of Fine Arts, Boston - Conservation 465 Huntington Avenue Boston, MA 02115 | \$8,000.00 |
| 676 | 12/27/2010 | Museum of Fine Arts, Boston - Director's Circle 465 Huntington Avenue Boston, MA 02115 | \$25,000 00 |
| 678 | 12/27/2010 | American Repertory Theatre - Annual Donation 64 Brattle Street Cambridge, MA 02138 | \$10,000 00 |
| 679 | 6/7/2011 | Boston Lyric Opera 11 Avenue de Lafayette Boston, MA 02111 | \$50,000 00 |
| 680 | 6/7/2011 | WGBH - Campaign Pledge One Guest Street Boston, MA 02135 | \$30,000 00 |
| 681 | 6/7/2011 | Museum of Fine Arts, Boston - Art of the Americas 465 Huntington Avenue Boston, MA 02115 | \$10,000.00 |
| 682 | 6/28/2011 | Phillips Exeter Academy - Annual Donation 20 Main Street Exeter, NH 03833 | \$5,000.00 |
| 683 | 6/28/2011 | The Vincent Club - Annual Donation 71 Brimmer Street Boston, MA 02108 | \$5,000.00 |
| 684 | 6/28/2011 | Boston Philharmonic - Committed Partner Donation 295 Huntington Avenue, Suite 210 Boston, MA 02115 | \$2,500 00 |
| 685 | 6/28/2011 | Opera America - Annual Donation 330 Seventh Avenue, 18th Floor New York, New York 10001 | \$2,500 00 |
| 686 | 6/28/2011 | Boston Symphony Orchestra 301 Massachusetts Avenue Boston, MA 02115-4511 | \$5,000.00 |
| 687 | 6/28/2011 | Mark Morris Dance Group 3 Lafayette Avenue Brooklyn, New York 11217-1415 | \$2,500 00 |
| 688 | 6/28/2011 | New England Conservatory - Annual Fund, Festival of Music 290 Huntington Avenue Boston, MA 02115 | \$12,500.00 |
| 689 | 6/29/2011 | Museum of Fine Arts, Boston - Capital Campaign 465 Huntington Avenue Boston, MA 02115 | \$25,000.00 |
| 690 | 6/29/2011 | Museum of Fine Arts, Boston - Musical Instruments 465 Huntington Avenue Boston, MA 02115 | \$5,000 00 |

| Check No. | Payment Date | Grantee | Amount |
|--------------|--------------|--|---------------------|
| 691 | 6/29/2011 | Huntington Theatre Company 264 Huntington Avenue Boston, MA 02115-4606 | \$5,000 00 |
| 692 | 7/7/2011 | WGBH - Member Pledge One Guest Street Boston, MA 02135 | \$5,000.00 |
| 941 | 12/14/2011 | Museum of Fine Arts, Boston 465 Huntington Avenue Boston, MA 02115 | \$45,000.00 |
| 942 | 12/14/2011 | Boston Lyric Opera 11 Avenue de Lafayette Boston, MA 02111 | \$60,000.00 |
| 943 | 12/14/2011 | WGBH One Guest Street Boston, MA 02135 | \$15,000.00 |
| 944 | 12/14/2011 | Huntington Theatre Company 264 Huntington Avenue Boston, MA 02115 | \$10,000 00 |
| 945 | 12/14/2011 | New England Conservatory of Music 290 Huntington Avenue Boston, MA 02115 | \$10,000.00 |
| TOTAL | | | \$373,000.00 |

Please Note: There is a break in the Check Numbers, from \$692, written on July 7, 2011, to the next Check, #941, written on December 14, 2011. The reason. The address on the Checks was changed from 3 Post Office Square, Boston, MA 02109 to 145 Sargent Road, Brookline, MA 02445 This change in address is permanent going forward.

**Application for Extension of Time To File an
Exempt Organization Return**

OMB No 1545-1709

► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete **only Part I** and check this box ☒ **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete **only Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on **e-file for Charities & Nonprofits**.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Enter filer's identifying number, see instructions

**Type or
print**File by the
due date for
filing your
return. See
instructions

Name of exempt organization or other filer, see instructions.

Employer identification number (EIN) or

HELEN WADE GREENE CHAR TRUST

☒ **X**

34-6527172

Number, street, and room or suite no. If a P.O. box, see instructions

Social security number (SSN)

P O BOX 1802

City, town or post office, state, and ZIP code. For a foreign address, see instructions.

PROVIDENCE, RI 02901-1802

Enter the Return code for the return that this application is for (file a separate application for each return) 0 4

| Application Is For | Return Code | Application Is For | Return Code |
|--|-------------|--------------------------|-------------|
| Form 990 | 01 | Form 990-T (corporation) | 07 |
| Form 990-BL | 02 | Form 1041-A | 08 |
| Form 990-EZ | 01 | Form 4720 | 09 |
| Form 990-PF | 04 | Form 5227 | 10 |
| Form 990-T (sec. 401(a) or 408(a) trust) | 05 | Form 6069 | 11 |
| Form 990-T (trust other than above) | 06 | Form 8870 | 12 |

- The books are in the care of ► U.S. TRUST FIDUCIARY TAX SERVICES

Telephone No. ► (401) 278-6837

FAX No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 08/15, 20 12, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
- ☒ **X** calendar year 2011 or
- ☐ tax year beginning , 20 , and ending , 20 .

- 2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
- ☐ Change in accounting period

| | | |
|--|-------|---------|
| 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. | 3a \$ | 49,620. |
| b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit | 3b \$ | 1,696. |
| c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions. | 3c \$ | 47,924. |

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form **8868** (Rev. 1-2012)

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete **only Part II** and check this box ☒ **X**
Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete **only Part I** (on page 1)

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

| | | | | |
|--|---|--|--|--|
| Type or print File by the due date for filing your return See instructions | Name of exempt organization or other filer, see instructions | | Enter filer's identifying number, see instructions | |
| | HELEN WADE GREENE CHAR TRUST | | Employer identification number (EIN) or <input checked="" type="checkbox"/> 34-6527172 | |
| | Number, street, and room or suite no If a P O box, see instructions | | Social security number (SSN) <input type="checkbox"/> | |
| | P O BOX 1802 | | | |
| City, town or post office, state, and ZIP code For a foreign address, see instructions | | | | |
| PROVIDENCE, RI 02901-1802 | | | | |

Enter the Return code for the return that this application is for (file a separate application for each return) 0 4

| Application Is For | Return Code | Application Is For | Return Code |
|---|-------------|--------------------|-------------|
| Form 990 | 01 | | |
| Form 990-BL | 02 | Form 1041-A | 08 |
| Form 990-EZ | 01 | Form 4720 | 09 |
| Form 990-PF | 04 | Form 5227 | 10 |
| Form 990-T (sec 401(a) or 408(a) trust) | 05 | Form 6069 | 11 |
| Form 990-T (trust other than above) | 06 | Form 8870 | 12 |

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.


- The books are in the care of **US TRUST FIDUCIARY TAX SERVICES**
Telephone No **(401) 278-6837** FAX No.
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 4 I request an additional 3-month extension of time until 11/15, 20 12
- 5 For calendar year 2011, or other tax year beginning , 20 , and ending , 20
- 6 If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period
- 7 State in detail why you need the extension ADDITIONAL TIME REQUESTED TO FILE A COMPLETE AND ACCURATE RETURN

| | | |
|---|--------------|---------|
| 8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions. | 8a \$ | 49,620. |
| b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 | 8b \$ | 49,620. |
| c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. | 8c \$ | |

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature  Title **SVP** Date **07/31/2012**

Form 8868 (Rev 1-2012)