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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

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

OMB No 1545-0052  
**2011**

For calendar year 2011, or tax year beginning 07-01-2011 , and ending 06-30-2012

G Check all that apply

☐ Initial return

☐ Initial return of a former public charity

☐ Final return

☐ Amended return

☐ Address change

☐ Name change

Name of foundation  
JANEY FUND CHARITABLE TRUST

**A Employer identification number**  
11-2836564

Number and street (or P O box number if mail is not delivered to street address)  
1330 BOYLSTON STREET 610

Room/suite

**B Telephone number** (see page 10 of the instructions)  
(617) 731-1222

City or town, state, and ZIP code  
CHESTNUT HILL, MA 02467

**C** If exemption application is pending, check here ☐

**H** Check type of organization ☒ Section 501(c)(3) exempt private foundation  
☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

**D 1.** Foreign organizations, check here ☐

**2.** Foreign organizations meeting the 85% test, check here and attach computation ☐

**I** Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 5,735,711

**J** Accounting method ☒ Cash ☐ Accrual  
☐ Other (specify)   
(Part I, column (d) must be on cash basis.)

**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 page 11 of the instructions) )		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	2,600,000			
	2 Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B				
	3 Interest on savings and temporary cash investments	188	188		
	4 Dividends and interest from securities. . . . .	232,786	232,786		
	5a Gross rents . . . . .				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	155			
	b Gross sales price for all assets on line 6a _____ 250,155				
	7 Capital gain net income (from Part IV , line 2 ) . . . .		155		
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold . . . . .				
	c Gross profit or (loss) (attach schedule) . . . . .				
	11 Other income (attach schedule) . . . . .				
	12 <b>Total.</b> Add lines 1 through 11 . . . . .	2,833,129	233,129		
	13 Compensation of officers, directors, trustees, etc	0	0		0
	14 Other employee salaries and wages . . . . .	62,165	0		0
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule). . . . .				
	b Accounting fees (attach schedule). . . . .	7,000	7,000		0
	c Other professional fees (attach schedule) . . . . .	823	0		0
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see page 14 of the instructions)	26,747	0		500
	19 Depreciation (attach schedule) and depletion . . . .				
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .				
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule). . . . .	35,827	17,869		17,869
	24 <b>Total operating and administrative expenses.</b>				
	Add lines 13 through 23 . . . . .	132,562	24,869		18,369
	25 Contributions, gifts, grants paid . . . . .	4,827,313			4,827,313
	26 <b>Total expenses and disbursements.</b> Add lines 24 and 25	4,959,875	24,869		4,845,682
	27 Subtract line 26 from line 12				
	a <b>Excess of revenue over expenses and disbursements</b>	-2,126,746			
	b <b>Net investment income</b> (if negative, enter -0-)		208,260		
	c <b>Adjusted net income</b> (if negative, enter -0-)				

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.

Cat No 11289X

Form **990-PF** (2011)

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 . . . . .	3,264,408	1,380,491	1,380,491
	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 page 15 of the 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 . . . . .			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) . . . . .			
	c	Investments—corporate bonds (attach schedule). . . . .	4,189,226	3,946,397	4,355,220
	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	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	7,453,634	5,326,888	5,735,711

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	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	0	0	

Net Assets or Fund Balances		<b>Foundations that follow SFAS 117, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
	24	Unrestricted . . . . .			
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
		<b>Foundations that do not follow SFAS 117, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 27 through 31.</b>			
	27	Capital stock, trust principal, or current funds . . . . .	0	0	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	7,453,634	5,326,888	
	30	<b>Total net assets or fund balances</b> (see page 17 of the instructions) . . . . .	7,453,634	5,326,888	
	31	<b>Total liabilities and net assets/fund balances</b> (see page 17 of the instructions) . . . . .	7,453,634	5,326,888	

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	7,453,634
2	Enter amount from Part I, line 27a . . . . .	2	-2,126,746
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3 . . . . .	4	5,326,888
5	Decreases not included in line 2 (itemize) ▶ _____	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .	6	5,326,888

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 )
1 a	BANK OF AMERICA	P	2003-08-12	2012-04-15
b	GOLDMAN SACHS TAX FREE MM	P		2011-12-31
c	GOLDMAN SACHS TAX FREE MM	P		2011-12-31
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 250,000		250,000	0
b 62			62
c 93			93
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			0
b			62
c			93
d			
e			

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	155
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions) If (loss), enter -0- in Part I, line 8 . . . . .		3	

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 page 18 of 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	5,723,453	7,458,398	0 767384
2009	5,207,302	6,747,317	0 771759
2008	5,427,777	6,520,895	0 832367
2007	5,064,134	6,066,255	0 834804
2006	5,031,955	5,816,720	0 865085

2 Total of line 1, column (d). . . . .	2	4 071399
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 814280
4 Enter the net value of noncharitable-use assets for 2011 from Part X, line 5. . . . .	4	6,597,724
5 Multiply line 4 by line 3. . . . .	5	5,372,395
6 Enter 1% of net investment income (1% of Part I, line 27b). . . . .	6	2,083
7 Add lines 5 and 6. . . . .	7	5,374,478
8 Enter qualifying distributions from Part XII, line 4. . . . .	8	4,845,682

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 on page 18

Part VIExcise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a		Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1			
		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 . . . . .		1	4,165
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	0
3		Add lines 1 and 2. . . . .		3	4,165
4		Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0
5		Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- . . . . .		5	4,165
6		Credits/Payments			
a		2011 estimated tax payments and 2010 overpayment credited to 2011	6a	2,440	
b		Exempt foreign organizations—tax withheld at source . . . . .	6b		
c		Tax paid with application for extension of time to file (Form 8868)	6c		
d		Backup withholding erroneously withheld . . . . .	6d		
7		Total credits and payments. Add lines 6a through 6d. . . . .		7	2,440
8		Enter any penalty for underpayment of estimated tax. Check here <input checked="" 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	1,725
10		Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. . . . .		10	
11		Enter the amount of line 10 to be Credited to 2012 estimated tax	Refunded	11	

Part VII-AStatements Regarding Activities

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? . . . . .		Yes	No
		1a		No
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)? . . . . .			No
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.			
c	Did the foundation file Form 1120-POL for this year? . . . . .	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation  \$ _____ 0 (2) On foundation managers  \$ _____ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers  \$ _____ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . If "Yes," attach a detailed description of the activities.	2		No
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 . . . . .	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year? . . . . .	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . If "Yes," attach the statement required by General Instruction T.	5		No
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? . . . . .	6	Yes	
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	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions)  MA _____			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	8b	Yes	
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 on page 27)? If "Yes," complete Part XIV . . . . .	9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	Yes	

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 page 20 of the instructions).	11		No
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶N/A	13	Yes	
14	The books are in care of ▶SAMET & COMPANY PC Telephone no ▶(617) 731-1222 Located at ▶1330 BOYLSTON STREET CHESTNUT HILL MA ZIP +4 ▶02467			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . ▶	15		
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . .	16	Yes	No
See the instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes", enter the name of the foreign country ▶				

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly) (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 type="checkbox"/> Yes <input checked="" 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? ( <b>Exception.</b> 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 <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? . . . Organizations relying on a current notice regarding disaster assistance check here. . . . . ▶ <input type="checkbox"/>	1b		
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? . . . . .	1c		No
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 ▶ 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see page 20 of the instructions ). . . . .	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
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? ( <i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2011.</i> ). . . . .	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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		No

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))?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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 page 22 of the instructions).	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here.	5b		
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? <i>If "Yes," attach the statement required by Regulations section 53.4945–5(d).</i>			
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? <i>If "Yes" to 6b, file Form 8870.</i>	6b		No
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?			
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	7b		

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 page 22 of the 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 Additional Data Table				
2 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the 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
DEBORAH DENHART	DIRECTOR	62,165	0	0
595 COLES MEADOW RD	40 00			
NORTHAMPTON, MA 01060				
Total number of other employees paid over \$50,000.				0





Part X

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see page 24 of the 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	4,178,828
b	Average of monthly cash balances. . . . .	1b	2,519,369
c	Fair market value of all other assets (see page 24 of the instructions). . . . .	1c	0
d	Total (add lines 1a, b, and c). . . . .	1d	6,698,197
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	1e	0
2	Acquisition indebtedness applicable to line 1 assets. . . . .	2	0
3	Subtract line 2 from line 1d. . . . .	3	6,698,197
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25 of the instructions). . . . .	4	100,473
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	6,597,724
6	Minimum investment return. Enter 5% of line 5. . . . .	6	329,886

Part XI

Distributable Amount (see page 25 of the 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	329,886
2a	Tax on investment income for 2011 from Part VI, line 5. . . . .	2a	4,165
b	Income tax for 2011 (This does not include the tax from Part VI ). . . . .	2b	
c	Add lines 2a and 2b. . . . .	2c	4,165
3	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	3	325,721
4	Recoveries of amounts treated as qualifying distributions. . . . .	4	0
5	Add lines 3 and 4. . . . .	5	325,721
6	Deduction from distributable amount (see page 25 of the instructions). . . . .	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	7	325,721

Part XII

Qualifying Distributions (see page 25 of the 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	4,845,682
b	Program-related investments—total from Part IX-B. . . . .	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required). . . . .	3a	
b	Cash distribution test (attach the required schedule). . . . .	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	4,845,682
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 page 26 of the instructions). . . . .	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4. . . . .	6	4,845,682
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 page 26 of the instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI, line 7				325,721
2 Undistributed income, if any, as of the end of 2011				
a Enter amount for 2010 only. . . . .			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2011				
a From 2006. . . . .	4,748,809			
b From 2007. . . . .	4,766,989			
c From 2008. . . . .	5,107,716			
d From 2009. . . . .	4,875,572			
e From 2010. . . . .	5,355,363			
f Total of lines 3a through e. . . . .	24,854,449			
4 Qualifying distributions for 2011 from Part XII, line 4 ▶ \$ 4,845,682				
a Applied to 2010, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see page 26 of the instructions)		0		
c Treated as distributions out of corpus (Election required—see page 26 of the instructions). . .	0			
d Applied to 2011 distributable amount. . . . .				325,721
e Remaining amount distributed out of corpus	4,519,961			
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	29,374,410			
b Prior years' undistributed income Subtract line 4b from line 2b. . . . .		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .		0		
d Subtract line 6c from line 6b Taxable amount—see page 27 of the instructions . . .		0		
e Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount—see page 27 of the instructions . . . . .			0	
f Undistributed income for 2011 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2011. . . . .				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions). . . . .	0			
8 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see page 27 of the instructions). . . . .	4,748,809			
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a . . . . .	24,625,601			
10 Analysis of line 9				
a Excess from 2007. . . .	4,766,989			
b Excess from 2008. . . .	5,107,716			
c Excess from 2009. . . .	4,875,572			
d Excess from 2010. . . .	5,355,363			
e Excess from 2011. . . .	4,519,961			

Part XIV

Private Operating Foundations (see page 27 of the instructions and Part VII-A, question 9)

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 organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

☐ 4942(j)(3) or ☐ 4942(j)(5)

2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .	Tax year	Prior 3 years			(e) Total
		(a) 2011	(b) 2010	(c) 2009	(d) 2008	
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 organization had \$5,000 or more in assets at any time during the year—see page 27 of the 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) )

DANIEL E ROTHENBERG

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

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 page 28 of the 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 Additional Data Table				
Total . . . . .			3a	4,827,313
b Approved for future payment				
Total . . . . .			3b	0

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See page 28 of the instructions )
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b>	Program service revenue					
<b>a</b>	_____					
<b>b</b>	_____					
<b>c</b>	_____					
<b>d</b>	_____					
<b>e</b>	_____					
<b>f</b>	_____					
<b>g</b>	Fees and contracts from government agencies					
<b>2</b>	Membership dues and assessments. . . .					
<b>3</b>	Interest on savings and temporary cash investments			14	188	
<b>4</b>	Dividends and interest from securities. . . .			14	232,786	
<b>5</b>	Net rental income or (loss) from real estate					
<b>a</b>	Debt-financed property. . . . .					
<b>b</b>	Not debt-financed property. . . . .					
<b>6</b>	Net rental income or (loss) from personal property					
<b>7</b>	Other investment income. . . . .					
<b>8</b>	Gain or (loss) from sales of assets other than inventory			18	155	
<b>9</b>	Net income or (loss) from special events					
<b>10</b>	Gross profit or (loss) from sales of inventory. .					
<b>11</b>	Other revenue <b>a</b> _____					
<b>b</b>	_____					
<b>c</b>	_____					
<b>d</b>	_____					
<b>e</b>	_____					
<b>12</b>	Subtotal. Add columns (b), (d), and (e). .		0		233,129	0
<b>13</b>	<b>Total.</b> Add line 12, columns (b), (d), and (e). . . . .			<b>13</b>		<b>233,129</b>

[illegible]

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
<b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of			
<b>(1)</b> Cash.			No
<b>(2)</b> Other assets.			No
<b>b</b> Other transactions			
<b>(1)</b> Sales of assets to a noncharitable exempt organization.			No
<b>(2)</b> Purchases of assets from a noncharitable exempt organization.			No
<b>(3)</b> Rental of facilities, equipment, or other assets.			No
<b>(4)</b> Reimbursement arrangements.			No
<b>(5)</b> Loans or loan guarantees.			No
<b>(6)</b> Performance of services or membership or fundraising solicitations.			No
<b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees.			No
<b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column <b>(b)</b> should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column <b>(d)</b> the value of the goods, other assets, or services received			

[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . . . ☐ Yes ☒ No

**b** If "Yes," complete the following schedule

(a) Name of organization		(b) Type of organization		(c) Description of relationship	
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge					
*****		2012-10-24		*****	
Signature of officer or trustee		Date		Title	
Sign Here	Preparer's Signature THEODORE S SAMET CPA		Date	Check if self-employed <input checked="" type="checkbox"/>	PTIN P01330378
	Firm's name SAMET & COMPANY PC			Firm's EIN 04-3027605	
	1330 BOYLSTON STREET				
	Firm's address CHESTNUT HILL, MA 024672111			Phone no (617) 731-1222	

May the IRS discuss this return with the preparer shown above? See instructions . . . . . ☒ Yes ☐ No

Schedule B

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

Department of the Treasury  
Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2011

<b>Name of organization</b> JANEY FUND CHARITABLE TRUST	<b>Employer identification number</b> 11-2836564
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Organization type (check one)

<b>Filers of:</b>	<b>Section:</b>
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)( ) (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.  
**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule—

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

- ☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ, that met the 33<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. . . . . ▶ \$ \_\_\_\_\_

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

<b>Name of organization</b> JANEY FUND CHARITABLE TRUST	<b>Employer identification number</b> 11-2836564
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Part I

Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	DANIEL E ROTHENBERG 173 OTIS STREET  NEWTON, MA 02460	\$ 2,600,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution )



Name of organization JANEY FUND CHARITABLE TRUST	Employer identification number 11-2836564
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<div>Part II</div> <div>Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed</div>			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	<div></div> <div></div> <div></div> <div></div>	\$ <div></div>	<div></div>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	<div></div> <div></div> <div></div> <div></div>	\$ <div></div>	<div></div>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	<div></div> <div></div> <div></div> <div></div>	\$ <div></div>	<div></div>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	<div></div> <div></div> <div></div> <div></div>	\$ <div></div>	<div></div>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	<div></div> <div></div> <div></div> <div></div>	\$ <div></div>	<div></div>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	<div></div> <div></div> <div></div> <div></div>	\$ <div></div>	<div></div>

<b>Name of organization</b> JANEY FUND CHARITABLE TRUST	<b>Employer identification number</b> 11-2836564
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Part III

**Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year.** (Complete columns (a) through (e) and the following line entry )

For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc , contributions of **\$1,000 or less** for the year (Enter this information once See instructions ) ➤ \$

Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div>	<div></div>	
	<div></div>	<div></div>	
—	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div>	<div></div>	
	<div></div>	<div></div>	
—	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div>	<div></div>	
	<div></div>	<div></div>	
—	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div>	<div></div>	
	<div></div>	<div></div>	
—	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div>	<div></div>	
	<div></div>	<div></div>	

**Additional Data**

**Software ID:**  
**Software Version:**  
**EIN:** 11-2836564  
**Name:** JANEY FUND CHARITABLE TRUST

**Form 990PF - Special Condition Description:**

<b>Special Condition Description</b>
--------------------------------------

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(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
DANIEL E ROTHENBERG	TRUSTEE 1 00	0	0	0
173 OTIS STREET NEWTON,MA 02458				
SUSAN ROTHENBERG	TRUSTEE 1 00	0	0	0
173 OTIS STREET NEWTON,MA 02458				
EDWARD ROTHENBERG	TRUSTEE 1 00	0	0	0
293 PARK PLACE BROOKLYN,NY 11216				
WILLIAM J BUCKLEY	TRUSTEE 1 00	0	0	0
717 FIFTH AVENUE 19TH FLOOR NEW YORK,NY 10168				
ANN ROTHENBERG	TRUSTEE 1 00	0	0	0
62 HIGH STREET LEE,MA 01238				

Form 990PF Part XV Line 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)				
<b>a</b> <i>Paid during the year</i>				
ACCESS31 ST JAMES AVE BOSTON,MA 02116	NONE	EXEMPT	UNRESTRICTED	10,000
ADOLESCENT CONSULTANTS40 THORNDIKE STREET CAMBRIDGE,MA 02141	NONE	EXEMPT	UNRESTRICTED	15,000
AIDS ACTION COMMITTEE294 WASHINGTON STREET BOSTON,MA 02108	NONE	EXEMPT	UNRESTRICTED	10,000
ALBERT EINSTEIN COLLEGE OF MEDICINE1300 MORRIS PARK AVENUE BRONX,NY 10461	NONE	EXEMPT	UNRESTRICTED	25,000
ALL DORCHESTER SPORTS LEAGUEPO BOX 220643 DORCHESTER,MA 02122	NONE	EXEMPT	UNRESTRICTED	10,000
ALL NEWTON MUSIC SCHOOL321 CHESTNUT STREET WEST NEWTON,MA 02465	NONE	EXEMPT	UNRESTRICTED	5,000
AMERICA SCORES NEW ENGLAND 520 EIGHT AVENUE 11TH FLOOR NEW YORK,NY 10018	NONE	EXEMPT	UNRESTRICTED	12,000
AMERICAN EDUCATIONAL ASSISTANCE FOUNDATIONPO BOX 158544 NASHVILLE,TN 37215	NONE	EXEMPT	UNRESTRICTED	25,000
AMERICAN FRIENDS ISRAEL PHILHARMONIC ORCHESTRA500 FIFTY AVENUE SUITE 2540 NEW YORK,NY 10110	NONE	EXEMPT	UNRESTRICTED	2,500
AMERICAN JEWISH COMMITTEE 126 HIGH STREET BOSTON,MA 02110	NONE	EXEMPT	UNRESTRICTED	50,000
AMERICAN JEWISH HISTORICAL SOCIETY160 HERRICK ROAD NEWTON CENTER,MA 02459	NONE	EXEMPT	UNRESTRICTED	1,012
AMERICAN SOCIETY FOR TECHNION-ISRAEL INSTITUTE ONE GATEWAY CENTER NEWTON,MA 02458	NONE	EXEMPT	UNRESTRICTED	50,000
AMERICAN SOCIETYPROTECT NATURE IN ISRAEL5550 MEADOWBROOK INDSTRL 120 ROLLING MEADOWS,IL 60008	NONE	EXEMPT	UNRESTRICTED	1,000
ANTI-DEFAMATION LEAGUE OF NEW ENGLAND126 HIGH STREET BOSTON,MA 02110	NONE	EXEMPT	UNRESTRICTED	25,000
ARTISTS FOR HUMANITY100 WEST SECOND STREET BOSTON,MA 02127	NONE	EXEMPT	UNRESTRICTED	20,000
BAY COVE - SMALL WONDERS105 VICTORY ROAD DORCHESTER,MA 02122	NONE	EXEMPT	UNRESTRICTED	12,000
BERKANA FUND150 LINCOLN STREET BOSTON,MA 02111	NONE	EXEMPT	UNRESTRICTED	10,000
BERKLEE CITY MUSIC1140 BOYLSTON STREET BOSTON,MA 02215	NONE	EXEMPT	UNRESTRICTED	100,000
BETH ISRAEL DEACONESS330 BROOKLINE AVE BOSTON,MA 02215	NONE	EXEMPT	UNRESTRICTED	100,000
BIG APPLE CIRCUS19622 UNION TURNPIKE FRESH MEADOWS,NY 11366	NONE	EXEMPT	UNRESTRICTED	12,000
BIG SISTER ASSOC OF GREATER BOSTON161 MASSACHUSETTS AVENUE BOSTON,MA 02115	NONE	EXEMPT	UNRESTRICTED	20,000
BIRD STREET COMMUNITY CENTER500 COLUMBIA ROAD BOSTON,MA 02125	NONE	EXEMPT	UNRESTRICTED	15,000
BOSTON AREA RAPE321 COLUMBUS AVE BOSTON,MA 02116	NONE	EXEMPT	UNRESTRICTED	15,000
BOSTON ARTS ACADEMY174 IPSWICH STREET BOSTON,MA 02215	NONE	EXEMPT	UNRESTRICTED	35,000
BOSTON CITY SINGERS17 WALDECK ST DORCHESTER,MA 02124	NONE	EXEMPT	UNRESTRICTED	15,000
BOSTON HEALTH CARE FOR THE HOMELESS729 MASSACHUSETTS AVE BOSTON,MA 02118	NONE	EXEMPT	UNRESTRICTED	50,000
BOSTON JEWISH FILM FESTIVAL 1001 WATERTOWN STREET WEST NEWTON,MA 02465	NONE	EXEMPT	UNRESTRICTED	2,500
BOSTON MEDICAL CENTER818 HARRISON AVE BOSTON,MA 02118	NONE	EXEMPT	UNRESTRICTED	150,000
BOSTON RONALD MCDONALD HOUSE229 KENT STREET BROOKLINE,MA 02446	NONE	EXEMPT	UNRESTRICTED	5,000
BOSTON SYMPHONY ORCHESTRA 301 MASSACHUSETTS AVE BOSTON,MA 02115	NONE	EXEMPT	UNRESTRICTED	100,000

Form 990PF Part XV Line 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)				
<b>a</b> <i>Paid during the year</i>				
BOYS & GIRLS CLUB50 CONGRESS STREET BOSTON,MA 02109	NONE	EXEMPT	UNRESTRICTED	35,000
BRANDEIS HELLER SCHOOL MAILSTOP 035 WALTHAM,MA 02254	NONE	EXEMPT	UNRESTRICTED	50,000
BRANDEIS UNIVERSITYPO BOX 549110 WALTHAM,MA 02454	NONE	EXEMPT	UNRESTRICTED	206,000
BRIGHAM & WOMENS116 HUNTINTON AVE BOSTON,MA 02116	NONE	EXEMPT	UNRESTRICTED	5,000
BROOKLINE COMMUNITY MENTAL HEALTH CENTER43 GARRISON ROAD BROOKLINE,MA 02445	NONE	EXEMPT	UNRESTRICTED	15,000
BROOKLINE HIGH SCHOOL115 GREENOUGH STREET BROOKLINE,MA 02445	NONE	EXEMPT	UNRESTRICTED	10,000
BROOKLYN WORKFORCE INNOVATIONS621 DEGRAW STREET BROOKLYN,NY 11217	NONE	EXEMPT	UNRESTRICTED	30,000
CAMERAPO BOX 35040 BOSTON,MA 02135	NONE	EXEMPT	UNRESTRICTED	25,000
CARROLL CENTER770 CENTRE STREET NEWTON,MA 02458	NONE	EXEMPT	UNRESTRICTED	5,000
CASA NUEVE VIDA53 GLEN ROAD JAMAICA PLAIN,MA 02130	NONE	EXEMPT	UNRESTRICTED	10,000
CENTER FOR FAMILY LIFE IN SUNSET PARKSUNSET PARK RD HAMPSTEAD,NH 03841	NONE	EXEMPT	UNRESTRICTED	35,000
CHILDREN'S AID SOCIETY105 EAST 22ND STREET NEW YORK,NY 10010	NONE	EXEMPT	UNRESTRICTED	25,000
CHILDREN'S CHARTER77 RUMFORD AVE WALTHM,MA 02453	NONE	EXEMPT	UNRESTRICTED	5,000
CHILDREN'S MUSEUM300 CONGRESS STREET BOSTON,MA 02210	NONE	EXEMPT	UNRESTRICTED	5,000
CHILDREN'S ROOM OF ARLINGTON1210 MASSACHUSETTS AVE ARLINGTON,MA 02467	NONE	EXEMPT	UNRESTRICTED	3,500
CODMAN SQ HEALTH CENTER637 WASHINGTON STREET DORCHESTER,MA 02124	NONE	EXEMPT	UNRESTRICTED	50,000
COLONEL DANIEL MARR1135 DORCHESTER AVE DORCHESTER,MA 02125	NONE	EXEMPT	UNRESTRICTED	25,000
COMBINED JEWISH PHILANTHROPIES126 HIGH STREET BOSTON,MA 02110	NONE	EXEMPT	UNRESTRICTED	175,000
COMMUNITY ART CENTER119 WINDSOR STREET CAMBRIDGE,MA 02139	NONE	EXEMPT	UNRESTRICTED	10,000
COMMUNITY PREPARTORY SCHOOL126 SOMERSET STREET PROVIDENCE,RI 02907	NONE	EXEMPT	UNRESTRICTED	25,000
COMMUNITY RESOURCE FOR JUSTICE355 BOYLSTON STREET BOSTON,MA 02116	NONE	EXEMPT	UNRESTRICTED	10,000
COOPERATIVE ARTIST INSTITUTE311 FOREST HILLS STREET JAMAICA PLAIN,MA 02130	NONE	EXEMPT	UNRESTRICTED	15,000
CRISPUS ATTUCKS CHILDREN'S CENTER105 CRAWFORD STREET DORCHESTER,MA 02121	NONE	EXEMPT	UNRESTRICTED	15,000
CRITTENTON WOMEN10 PERTHSHIRE ROAD BOSTON,MA 02135	NONE	EXEMPT	UNRESTRICTED	10,000
DARTMOUTH ALUMNI FUND6066 DEVELOPMENT OFFICE HANOVER,NH 03755	NONE	EXEMPT	UNRESTRICTED	1,000
DARTMOUTH COLLEGE207 PARKHURST HALL HANOVER,NH 03755	NONE	EXEMPT	UNRESTRICTED	50,000
DAVID PROJECTPO BOX 52390 BOSTON,MA 02205	NONE	EXEMPT	UNRESTRICTED	25,000
DCF KIDS FUND38 MAIN STREET HANOVER,NH 03755	NONE	EXEMPT	UNRESTRICTED	10,000
DIMOCK COMMUNITY HEALTH CENTER55 DIMOCK STREET ROXBURY,MA 02119	NONE	EXEMPT	UNRESTRICTED	25,000
EAST BOSTON ADULT EDPO BOX 544 EAST BOSTON,MA 02128	NONE	EXEMPT	UNRESTRICTED	12,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FACING HISTORY & OURSELVES 16 HURD ROAD BROOKLINE,MA 02445	NONE	EXEMPT	UNRESTRICTED	100,000
FAMILIES FIRST99 BISHOP ALLEN DRIVE CAMBRIDGE,MA 02139	NONE	EXEMPT	UNRESTRICTED	15,000
FAMILY NURTURING CENTER200 BOWDOIN STREET DORCHESTER,MA 02122	NONE	EXEMPT	UNRESTRICTED	15,000
FAMILY SERVICE OF GREATER BOSTON31 HEATH STREET BOSTON,MA 02130	NONE	EXEMPT	UNRESTRICTED	15,000
FAMILY TO FAMILY14 BEACON STREET BOSTON,MA 02108	NONE	EXEMPT	UNRESTRICTED	10,000
FENWAY HIGH SCHOOL174 IPSWICH STREET BOSTON,MA 02215	NONE	EXEMPT	UNRESTRICTED	15,000
FOOD PROJECT10 LEWIS STREET LINCOLN,MA 01773	NONE	EXEMPT	UNRESTRICTED	10,000
FRIENDS OF MGH CANCER CENTER55 FRUIT STREET BOSTON,MA 02114	NONE	EXEMPT	UNRESTRICTED	1,000
FRIENDS OF YEMIN ORDE4501 CONNECTICUT AVE WASHINGTON,DC 20008	NONE	EXEMPT	UNRESTRICTED	125,000
FROM THE TOP295 HUNTINGTON AVE BOSTON,MA 02115	NONE	EXEMPT	UNRESTRICTED	50,000
FROSINA FOUNDATION162 BOYLSTON STREET BOSTON,MA 02116	NONE	EXEMPT	UNRESTRICTED	2,500
GEORGE WILEY CENTER32 EAST AVE PAWTUCKET,RI 02860	NONE	EXEMPT	UNRESTRICTED	5,000
GILSON JCC EARLY LEARNING CENTER50 SUTHERLAND ROAD BRIGHTON,MA 02135	NONE	EXEMPT	UNRESTRICTED	2,000
GIRLS LEAP971 COMMONWEALTH AVENUE BOSTON,MA 02215	NONE	EXEMPT	UNRESTRICTED	10,000
GIVAT HAVIVA EDUCAITON FOUNDATION114 WEST 26TH STREET NEW YORK,NY 10001	NONE	EXEMPT	UNRESTRICTED	10,000
GOOD SHEPHERD SEVICES305 SEVENTH AVE NEW YORK,NY 10001	NONE	EXEMPT	UNRESTRICTED	85,000
GREATER BOSTON FOOD BANK99 ATKINSON ST BOSTON,MA 02118	NONE	EXEMPT	UNRESTRICTED	50,000
GREATER BOSTON LEGAL SERVICES197 FRIEND STREET BOSTON,MA 02114	NONE	EXEMPT	UNRESTRICTED	50,000
HALE RESERVATION80 CARBY STREET WESTWOOD,MA 02090	NONE	EXEMPT	UNRESTRICTED	5,000
HEALTH CARE FOR ALL30 WINTER STREET BOSTON,MA 02108	NONE	EXEMPT	UNRESTRICTED	5,000
HEBREW SENIOR LIFE1200 CENTRE STREET BOSTON,MA 02131	NONE	EXEMPT	UNRESTRICTED	50,000
HOLOCAUST MUSEUM100 RAOUL WALLENBERG PLACE WASHINGTON,DC 20024	NONE	EXEMPT	UNRESTRICTED	50,000
HORIZONS FOR HOMELESS1705 COLUMBUS AVE ROXBURY,MA 02119	NONE	EXEMPT	UNRESTRICTED	50,000
HOSPICE OF GOOD SHEPARD 2042 BEACON STREET NEWTON,MA 02468	NONE	EXEMPT	UNRESTRICTED	1,000
HULL LIFE SAVING MUSEUM1117 NANTASKET AVENUE HULL,MA 02045	NONE	EXEMPT	UNRESTRICTED	15,000
HYDE SQUARE TASK FORCEPO BOX 301871 JAMAICA PLAIN,MA 02130	NONE	EXEMPT	UNRESTRICTED	25,000
INQUILINOS BORICUAS EN ACCION405 SHAWMUT AVE BOSTON,MA 02108	NONE	EXEMPT	UNRESTRICTED	15,000
ISRAEL PROJECT2020 K STREET NW WASHINGTON,DC 20006	NONE	EXEMPT	UNRESTRICTED	10,000
JEWISH COMMUNITY CENTERS OF GREATER BOSTON333 NAHANTON STREET NEWTON,MA 02459	NONE	EXEMPT	UNRESTRICTED	50,000
JEWISH COMMUNITY HOUSING FOR ELDERLY30 WALLINGFORD ROAD BRIGHTON,MA 02135	NONE	EXEMPT	UNRESTRICTED	25,000

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JEWISH FAMILY AND CHILDREN'S SERVICES1430 MAINE STREET WALTHAM,MA 02451	NONE	EXEMPT	UNRESTRICTED	25,000
JEWISH GUILD FOR THE BLIND15 WEST 65 STREET NEWYORK,NY 10023	NONE	EXEMPT	UNRESTRICTED	1,000
JEWISH ORGANIZING INITIATIVE359 BOYLSTON STREET 4 BOSTON,MA 02116	NONE	EXEMPT	UNRESTRICTED	10,000
JOY OF ATHLETICSP.O BOX 216 RICHMOND,MA 01254	NONE	EXEMPT	UNRESTRICTED	2,000
JULIE'S FAMILY LEARNING133 DORCHESTER STREET SOUTH BOSTON,MA 02127	NONE	EXEMPT	UNRESTRICTED	25,000
KAROFF CENTER CO TP1160 FEDERAL STREET 8TH FL BOSTON,MA 02110	NONE	EXEMPT	UNRESTRICTED	50,000
KISHORIT VILLAGEMP BIKAAT BEITHAKEREM IS	NONE	EXEMPT	UNRESTRICTED	25,000
MASS ALLIANCE8 BEACON STREET BOSTON,MA 02108	NONE	EXEMPT	UNRESTRICTED	15,000
MASS COLLEGE OF ART621 HUNTINGTON AVE BOSTON,MA 02115	NONE	EXEMPT	UNRESTRICTED	75,000
MASS GENERAL165 CAMBRIDGE STREET BOSTON,MA 02114	NONE	EXEMPT	UNRESTRICTED	5,000
MASS GENERAL MARATHON TEAM165 CAMBRIDGE STREET BOSTON,MA 02114	NONE	EXEMPT	UNRESTRICTED	1,000
MASSACHUSETTS MELANOMA FOUNDATION66 COMMONWEALTH AVE CONCORD,MA 01742	NONE	EXEMPT	UNRESTRICTED	1,000
METROPOLITAN WIND SYMPHONY62 MOSSDALE ROAD JAMAICA PLAIN,MA 02130	NONE	EXEMPT	UNRESTRICTED	2,000
MISSION GRAMMAR SCHOOL94 SAINT ALPHONSUS ST ROXBURY,MA 02120	NONE	EXEMPT	UNRESTRICTED	5,000
MOTHER CAROLINE ACADEMY515 BLUE HILL AVE DORCHESTER,MA 02121	NONE	EXEMPT	UNRESTRICTED	35,000
MUSICAL TRADITIONS333 VALENCIA STREET SAN FRANCISCO,CA 94103	NONE	EXEMPT	UNRESTRICTED	2,000
NATIONAL BRAILLE PRESS88 ST STEPHEN STREET BOSTON,MA 02115	NONE	EXEMPT	UNRESTRICTED	10,000
NATIONAL MULTIPLE SCELORIS101A FIRST AVE WALTHAM,MA 02451	NONE	EXEMPT	UNRESTRICTED	2,500
NEIGHBORHOOD HOUSE CHARTER SCHOOL21 QUEEN STREET DORCHESTER,MA 02122	NONE	EXEMPT	UNRESTRICTED	10,000
NEW ART CENTER61 WASHINGTON PARK NEWTONVILL,MA 02460	NONE	EXEMPT	UNRESTRICTED	20,000
NEW ENGLAND AQUARIUM CENTRAL WHARF BOSTON,MA 02110	NONE	EXEMPT	UNRESTRICTED	5,000
NEW ENGLAND CONSERVATORY290 HUNTINGTON AVE BOSTON,MA 02115	NONE	EXEMPT	UNRESTRICTED	50,000
NEW REPETORY THEATER200 DEXTER AVE WATERTOWN,MA 02472	NONE	EXEMPT	UNRESTRICTED	7,500
NEW SCHOOL66 WEST 12TH STREET NEWYORK,NY 10011	NONE	EXEMPT	UNRESTRICTED	50,000
NEWTON COMMUNITY SERVICES CENTER492 WALTHAM STREET WEST NEWTON,MA 02465	NONE	EXEMPT	UNRESTRICTED	25,000
NEWTON FREE PUBLIC LIBRARY330 HOMER STREET NEWTON CENTER,MA 02459	NONE	EXEMPT	UNRESTRICTED	2,500
NEWTON WELLESLEY HOSPITAL2014 WASHINGTON STREET NEWTON,MA 02462	NONE	EXEMPT	UNRESTRICTED	10,000
NORTH AMERICAN CONGRESS LATIN AMERICA38 GREEN STREET NEWYORK,NY 10013	NONE	EXEMPT	UNRESTRICTED	5,000
NORTH AMERICAN FRIENDSP.O BOX 699 BABYLON,NY 11702	NONE	EXEMPT	UNRESTRICTED	25,000
NOTRE DAME EDUCATION CENTER200 OLD COLONY AVENUE BOSTON,MA 02127	NONE	EXEMPT	UNRESTRICTED	15,000



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<b>a</b> <i>Paid during the year</i>				
PARENT CHILD HOME1415 KELLUM PLACE GARDEN CITY,NY 11530	NONE	EXEMPT	UNRESTRICTED	10,000
PINE STREET INN444 HARRISON AVE BOSTON,MA 02118	NONE	EXEMPT	UNRESTRICTED	50,000
PMC JIMMY FUNDPO BOX 415590 BOSTON,MA 02241	NONE	EXEMPT	UNRESTRICTED	6,000
PROJECT HOPE550 DUDLEY STREET ROXBURY,MA 02119	NONE	EXEMPT	UNRESTRICTED	25,000
PROJECT STEP - BOSTON SYMPHONY301 MASSACHUSETTS AVE BOSTON,MA 02115	NONE	EXEMPT	UNRESTRICTED	30,000
RAFI-USAPO BOX 640 PITTSBORO,NC 27312	NONE	EXEMPT	UNRESTRICTED	10,000
REACH BEYOND DOMESTIC VIOLENCEPO BOX 540024 WALTHAM,MA 02454	NONE	EXEMPT	UNRESTRICTED	15,000
RECORDING FOR THE BLIND2067 MASSACHUSETTS AVE CAMBRIDGE,MA 02140	NONE	EXEMPT	UNRESTRICTED	1,000
REEL WORKS357 NINTH STREET BROOKLYN,NY 11215	NONE	EXEMPT	UNRESTRICTED	30,000
RIVERSIDE COMMUNITY HEALTH CENTER450 WASHINGTON STREET WALTHAM,MA 02452	NONE	EXEMPT	UNRESTRICTED	10,000
ROCA101 PARK STREET CHELSEA,MA 02150	NONE	EXEMPT	UNRESTRICTED	20,000
ROGERSON COMMUNITIESSONE FLORENCE STREET BOSTON,MA 02131	NONE	EXEMPT	UNRESTRICTED	50,000
ROSIES PLACE889 HARRISON AVE BOSTON,MA 02118	NONE	EXEMPT	UNRESTRICTED	50,000
ROULETTE INTERMEDIUMINC228 WEST BROADWAY NEWYORK,NY 10013	NONE	EXEMPT	UNRESTRICTED	3,000
SAMARITANS OF BOSTON141 TREMONT ST BOSTON,MA 02111	NONE	EXEMPT	UNRESTRICTED	10,000
SAVE THE BAYPO BOX 600488 PROVIDENCE,RI 02905	NONE	EXEMPT	UNRESTRICTED	1,000
SCHWARTZ CENTER226 S STATE STREET DOVER,DE 19901	NONE	EXEMPT	UNRESTRICTED	5,000
SECOND STEPPPO BOX 600213 NEWTONVILLE,MA 02460	NONE	EXEMPT	UNRESTRICTED	15,000
SENIOR CITIZENS FUND345 WALNUT STREET NEWTONVILLE,MA 02460	NONE	EXEMPT	UNRESTRICTED	2,000
SERVE RHODE ISLAND655 BROAD ST SUITE 202 PROVIDENCE,RI 02909	NONE	EXEMPT	UNRESTRICTED	15,000
SHAKE-A-LEG2620 SOUTH BAYSHORE DRIVE MIAMI,FL 33133	NONE	EXEMPT	UNRESTRICTED	30,000
SHAKESPEARE & CO70 KEMBLE STREET LENOX,MA 01240	NONE	EXEMPT	UNRESTRICTED	15,000
SHARED INTEREST121 WEST 27 TH STREET NEWYORK,NY 10001	NONE	EXEMPT	UNRESTRICTED	1,000
SOCIEDAD LATINA1530 TREMONT ST ROXBURY,MA 02120	NONE	EXEMPT	UNRESTRICTED	10,000
SOJOURNER HOUSE85 ROCKLAND STREET ROXBURY,MA 02119	NONE	EXEMPT	UNRESTRICTED	10,000
SOPHIA ACADEMY979 BRANCH AVE PROVIDENCE,RI 02904	NONE	EXEMPT	UNRESTRICTED	25,000
SPAULDING REHABILITAION HOSPITAL125 NASHUA STREET BOSTON,MA 02114	NONE	EXEMPT	UNRESTRICTED	5,000
ST FRANCIS HOUSEPO BOX 120499 BOSTON,MA 02112	NONE	EXEMPT	UNRESTRICTED	20,000
ST KATHARINE DREXEL AFTERSCHOOL PROGRAM175 RUGGLES STREET ROXBURY,MA 02120	NONE	EXEMPT	UNRESTRICTED	10,000
ST MARY'S WOMEN90 CUSHING AVE DORCHESTER,MA 02125	NONE	EXEMPT	UNRESTRICTED	40,000

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<b>a</b> <i>Paid during the year</i>				
STEPS TO SUCCESS1415 SE 122ND AVE PORTLAND,OR 97218	NONE	EXEMPT	UNRESTRICTED	15,000
SUMMER FUND55 COURT STREET BOSTON,MA 02108	NONE	EXEMPT	UNRESTRICTED	10,000
SUMMER SEARCH555 AMORY STREET JAMAICA PLAIN,MA 02130	NONE	EXEMPT	UNRESTRICTED	50,000
TENACITY367 WESTERN AVENUE BRIGHTON,MA 02135	NONE	EXEMPT	UNRESTRICTED	10,000
THE FAMILY CENTER315 WEST 36TH STREET NEWYORK,NY 10018	NONE	EXEMPT	UNRESTRICTED	10,000
THE FAMILY VAN1542 TREMONT STREET ROXBURY,MA 02120	NONE	EXEMPT	UNRESTRICTED	10,000
THE FLEA THEATER41 WHITE STREET NEWYORK,NY 10013	NONE	EXEMPT	UNRESTRICTED	15,000
THE GIFFORD SCHOOL177 BOSTON POST ROAD WESTON,MA 02493	NONE	EXEMPT	UNRESTRICTED	20,000
THE PHILANTHROPIC INITIATIVE12230 WILKINS AVENUE ROCKVILLE,MD 20852	NONE	EXEMPT	UNRESTRICTED	525,801
TREEHOUSE FOUNDATIONONE TREEHOUSE CIRCLE EASTHAMPTON,MA 01027	NONE	EXEMPT	UNRESTRICTED	15,000
UNITED NEGRO COLLEGE FUND15 BROAD STREET 2 BOSTON,MA 02109	NONE	EXEMPT	UNRESTRICTED	2,500
UNITED WAY OF MASSACHUSETTS BAYPO BOX 51381 BOSTON,MA 02205	NONE	EXEMPT	UNRESTRICTED	15,000
URBAN IMPROV8 ST JOHN STREET JAMAICA PLAIN,MA 02130	NONE	EXEMPT	UNRESTRICTED	5,000
URBAN SCHOLARS100 MORRISSEY BOULEVARD BOSTON,MA 02125	NONE	EXEMPT	UNRESTRICTED	20,000
VICTORY PROGRAMS PORTIS HOUSE965 MASSACHUSETTS AVE BOSTON,MA 02118	NONE	EXEMPT	UNRESTRICTED	10,000
WALKER HOME1968 CENTRAL AVE NEEDHAM,MA 02492	NONE	EXEMPT	UNRESTRICTED	25,000
WBUR890 COMMONWEALTH AVE BOSTON,MA 02215	NONE	EXEMPT	UNRESTRICTED	10,000
WELCOME PROJECT530 MYSTIC AVENUE SOMERVILLE,MA 02145	NONE	EXEMPT	UNRESTRICTED	10,000
WGBH EDUCATIONAL NETWORK125 WESTERN AVE BOSTON,MA 02134	NONE	EXEMPT	UNRESTRICTED	10,000
WOMEN EXPRESS67 NEWBURY STREET BOSTON,MA 02116	NONE	EXEMPT	UNRESTRICTED	10,000
YEAR UP93 SUMMER STREET BOSTON,MA 02110	NONE	EXEMPT	UNRESTRICTED	55,000
ZUMIX202 MAVERICK STREET EAST BOSTON,MA 02128	NONE	EXEMPT	UNRESTRICTED	12,500
ACTORS' SHAKESPEARE PROJECT191 HIGHLAND AVENUE SUITE 2B SOMERVILLE,MA 02143	NONE	EXEMPT	UNRESTRICTED	15,000
NANCY CAROLINE HOSPICE OF THE UPPER GALILEEPO BOX 603048 PROVIDENCE,RI 02906	NONE	EXEMPT	UNRESTRICTED	1,000
ARTISTIC NOISE315 FLATBUSH AVENUE 507 BROOKLYN,NY 11217	NONE	EXEMPT	UNRESTRICTED	15,000
BEACON HOSPICE529 MAIN STREET SUITE 101 CHARLESTOWN,MA 02129	NONE	EXEMPT	UNRESTRICTED	500
AGASSIZ VILLAGE CAMP238 BEDFORD ST SUITE 8 LEXINGTON,MA 02420	NONE	EXEMPT	UNRESTRICTED	1,000
BROOKLINE GREEN SPACE ALLIANCE370 WASHINGTON ST 1 BROOKLINE,MA 02445	NONE	EXEMPT	UNRESTRICTED	5,000
BROOKLYN YOUNG MOTHERS' COLLECTIVE388 ATLANTIC AVENUE SECOND FLOOR BROOKLYN,NY 11217	NONE	EXEMPT	UNRESTRICTED	25,000
COMMUNITY SERVINGS18 MARBURY TERRACE JAMAICA PLAIN,MA 02130	NONE	EXEMPT	UNRESTRICTED	25,000

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CRISTO REY SCHOOL1852 W 22ND PL CHICAGO,IL 60608	NONE	EXEMPT	UNRESTRICTED	10,000
KEY STEPS INCPO BOX 300766 BOSTON,MA 02130	NONE	EXEMPT	UNRESTRICTED	15,000
MASSACHUSETTS HISTORICAL SOCIETY1154 BOYLSTON STREET BOSTON,MA 02215	NONE	EXEMPT	UNRESTRICTED	500
PEF ISRAEL ENDOWMENT FUNDS INC317 MADISON AVE SUITE 607 NEW YORK,NY 10017	NONE	EXEMPT	UNRESTRICTED	5,000
LUTHERAN IMMIGRATION AND REFUGEE SERVICE700 LIGHT STREET BALTIMORE,MD 21230	NONE	EXEMPT	UNRESTRICTED	1,000
ST PETER TEEN CENTER278 BOWDOIN STREET DORCHESTER,MA 02121	NONE	EXEMPT	UNRESTRICTED	10,000
THE BOTTOM LINE500 AMORY STREET SUITE 3 JAMAICA PLAIN,MA 02130	NONE	EXEMPT	UNRESTRICTED	89,500
YOUNG WOMEN EMPOWEREDPO BOX 1681 DUVALL,WA 98019	NONE	EXEMPT	UNRESTRICTED	5,000
<b>Total . . . . .</b>			<b>3a</b>	4,827,313

TY 2011 Accounting Fees Schedule

Name: JANEY FUND CHARITABLE TRUST

EIN: 11-2836564

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	7,000	7,000		0

**TY 2011 Investments Corporate  
Bonds Schedule**

**Name:** JANEY FUND CHARITABLE TRUST  
**EIN:** 11-2836564

Name of Bond	End of Year Book Value	End of Year Fair Market Value
CORPORATE BONDS	3,946,397	4,355,220

**TY 2011 Other Expenses Schedule****Name:** JANEY FUND CHARITABLE TRUST**EIN:** 11-2836564

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INSURANCE	35,738	17,869		17,869
OFFICE	35	0		0
BANK CHARGES	54	0		0

TY 2011 Other Professional Fees Schedule

**Name:** JANEY FUND CHARITABLE TRUST

**EIN:** 11-2836564

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROFESSIONAL SERVICES	823	0		0

# TY 2011 Substantial Contributors Schedule

**Name:** JANEY FUND CHARITABLE TRUST

**EIN:** 11-2836564

Name	Address
DANIEL E ROTHENBERG	173 OTIS STREET NEWTON, MA 02460



**TY 2011 Taxes Schedule****Name:** JANEY FUND CHARITABLE TRUST**EIN:** 11-2836564

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
STATE FILING FEE	500	0		500
FEDERAL TAX	2,015	0		0
PAYROLL	24,232	0		0