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SCANNED WAY 2 1 2013

Form 990-PF

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

Treated as a Private Foundation

OMB No. 1545-0052

2012

Department of the Treasury Internal Revenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

Öpen to Public Inspection

For	cale	ndar year 2012, or tax year beginning		, 2	012, and en		<u>, 20</u>		
Nan	ne of	foundation				A Employer identif	fication number		
<u>AM</u>	ER]	<u>ICO J FRANCISCO CHARI</u>	TABLE TRUST			03-0541650			
Nun	iber a	and street (or P O. box number if mail is not deliv	vered to street address)		Room/suite	B Telephone number	er (see instructions)		
1	POF	RTER AVE				(781) 273-5478			
City	or to	wn, state, and ZIP code				C If exempt. applicatio	n is pending, check here		
		ington MA 01803							
		all that apply. Initial return	Initial return	of a former p	ublic charity	D 1. Foreign organi	zations, check here		
		Final return	Amended ret				_		
		Address change	H				ions meeting the 85% and attach computation		
H	heck		c)(3) exempt private foun			E If private foundati	on status was		
\Box		on 4947(a)(1) nonexempt charitable trust	Other taxable priva		•	terminated under 507(b)(1)(A), che	section		
			Accounting method:	Cash X	Accrual	307 (b)(1)(A), che	SK liele		
		om Part II, col (c), line 16)	Other (specify)	, Ous., <u>Fi</u>	7100144	F If the foundation i	s in a 60-month		
⊳ s	ω. (art I, column (d) must be	on cash has	<u>-</u>	termination under 507(b)(1)(B), check			
Pa	rt (Analysis of Revenue and Expenses	1	On Cash Dasi	3.)		(d) Disbursements		
1; 44		(The total of amounts in columns (b),	(a) Revenue and	(b) Net in	vestment	(c) Adjusted net	for charitable		
		(c), & (d) may not necessarily equal the amounts in column (a) (see instructions).)	expenses per books	inco	me	income	purposes (cash basis only)		
	1	Contributions, gifts, grants, etc., received	DOORS	St. 145 11-1 44	*************	Managara (C. 7)	The second secon		
	2	(attach schedule)	\$1 58555 4 \$8	CELEGO 2714			The state of the s		
	3	Check to attach Sch. B	57	C. W. C. Marie Text Some	57	80 . Y 43 / \$2 . C. S. A. T. A.	2000 - 10		
	4	Interest on savings and temp. cash investments	66,053		1,710		311 A47 A47 A44 A44 A44 A44 A44 A44 A44 A44		
		Dividends and interest from securities	00,033		1,710				
R	_ :	Gross rents · · · · · · · · · · · · · · · · · · ·		7. 7.	3 30 - 1 30 3 3 3 3 3 3	\$\$55 * *\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$	1		
E		income or (loss)	[[] [] [] [] [] [] [] [] [] []	7 2 2	ة الإمن بيماطرين الأ الامن الأمام الأمام الاستادات	erratters :	100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
٧	_	Net gain/(loss) from sale of assets not on line 10 Gross sales price for 95,000	1000	4 3mg mgm 6 2 2 3	1 1 1	5737,576399997735353 117377755,58866496687	2 2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3		
E N U	7	all assets on line 6a		1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	0	<u></u>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	,	Capital gain net income (from Part IV, line 2)		, ,			1 1 2 2 2 2 2 2 3 2 4 3 4 3 5 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		
E	9	Net short-term capital gain	> %		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		
		Income modifications · · · · · · · · · · · · · · · · · · ·	**	* * * * * * * * * * * * * * * * * * *	·		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	_	rtns. & allowances Less Cost of	3 86 7 7 7		and the state of the	Line to the second seco	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
		goods sold · L	, , , , , , , , , , , , , , , , , , , ,						
	11	Gross profit or (loss) (attach schedule)					28.1 / high y 74 h h h h h h h h h h		
	12	Other income (attach schedule)	66,110		1,767				
0		Total. Add lines 1 through 11	6,000	}	6,000		<u> </u>		
Р	13	directors, trustees, etc · · ·	0,000		0,000		 		
E R	14	Other employee salanes and wages							
A	15	Pension plans, employee benefits · · · ·							
T		Legal fees (attach schedule)	710		710				
I N		Accounting fees (attach schedule) - #.1 Other professional fees (attach schedule)	/10		/10				
G		· · · · · · · · · · · · · · · · · · ·	DECEIVED				 		
&	17	Interest	TINCLIVED				 		
A	18	Depreciation (attach sch) and depleus		<u> </u>			 		
D M	19		MAY 1 5 2013	S			<u> </u>		
- 1	20	Occupancy		(A)			 		
N	21	Travel, conferences, and meetings	DODEN UT	7 <u>8</u>					
E	22	Printing and publications	<u> Padem, Ut</u>				 		
X P	23	Other expenses (attach schedule)							
E	24	Total operating and administrative	6,710		6 710	(1		
N S	ar.	expenses. Add lines 13 through 23	95,000		6,710				
E S	25	Contributions, gifts, grants paid·····			6 710		95,000		
S	26	Total exp & disbursements Add lines 24 and 25	101,710		6,710	(95,000		
	27 a	Subtract line 26 from line 12: Excess of revenue over expenses	2E COO			`	· · · · ·		
		and disbursements	-35,600			· · · · · · · · · · · · · · · · · · ·	<u> </u>		
		Net investment income (if neg., enter -0-)				`			
	<u>c</u>	Adjusted net income (if neg, enter -0-)	<u> </u>	`			<u>. </u>		

......

Decreases not included in line 2 (itemize) ▶ See attachment #4

4

5

6

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Add lines 1, 2, and 3-

4

5

6

1,449,540

1,336,219

113,321

95,000

instructions

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Enter qualifying distributions from Part XII, line 4.....

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI

Pai	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 see	ins	tructio	ns)					
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	4		100	. 6. 6	ي واه مد . د د په			
	Date of ruling or determination letter (attach copy of letter if necessary see inst.)	4	<u> </u>						
D	Domestic foundations that meet the section 4940(e) requirements in Part V, check	+	ديد 2		. v >	. to.			
	and enter 1% of Parti, line 270	- 1	1	. %	5				
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	-	15. 6	F 30 F	<u> </u>	112			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) #6					0			
3	Add lines 1 and 2	+		_		<u>`</u>			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	+				0			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0	十				0			
6	Credits/Payments	- A	. " " og	(offer)	V 1 1 1 1 1	7 100			
а	2012 estimated tax payments and 2011 overpayment credited to 2012 6a	. L		ر د د. . معلمة مالي	少学 20 Marie				
b	Exempt foreign organizations tax withheld at source	~ ×		٠.	4. 44.4	g 4			
C	Tax paid with application for extension of time to file (Form 8868) · · · · · · · 6c		18 18 1 18 18 18	, t. ., x	or, ¥ griftara				
d	Backup withholding erroneously withheld · · · · · · · · ·	48 5	11 .	}	- 20 1	h 16 30			
7	Total credits and payments Add lines 6a through 6d · · · · · · · · · · · · · · · · · ·	\perp				0			
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached	4							
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	\bot							
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid								
11	Enter the amount of line 10 to be. Credited to 2013 estimated tax > Refunded 11		-						
	t VII-A Statements Regarding Activities		8						
ıa	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate of intervene in any political campaign?		-	a Ia	Yes	No			
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for		·	a		Х			
•	definition)? definition)?		. 1	ь		Х			
	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.			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		() () () () () () () () () ()			
С	Did the foundation file Form 1120-POL for this year?		<u> </u>	lc	****	Х			
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 . • \$		<u>0</u>	3 , 3	Proposition (No.	\$2.35 €			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		43	***	* *	8 2 % (+ *			
	on foundation managers · · · · · ▶ \$0			\$ pr.5 t	* *	40			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? · · · · · · · · · · · · · · · · · · ·			2	- 88	X			
_	If "Yes," attach a detailed description of the activities.		957	'4 +1	A AN	87 88°			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of		تنا	- 22 S	A. 27.	<u> </u>			
4.0	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X			
4a b	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			ia Ib	N/A	X			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		_	5	1/1	Х			
·	If "Yes," attach the statement required by General Instruction T.	•	•		<u>ş</u> t	^			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		,	· .					
	By language in the governing instrument, or				, .				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			. :: 5: .		,			
	conflict with the state law remain in the governing instrument?		.	6	Х				
7	Did the foundation have at least \$5,000 in assets at any time during the yr.? If "Yes," complete Part II, col. (c), & Part X	īV.		7	Χ				
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)		Γ,	آري.	, ,				
	<u>MA</u>		_ . `		3	- ^			
þ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or				154	٠,			
	designate) of each state as required by General Instruction G? If "No," attach explanation			3b	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 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," comple					_			
	Part XIV····		· _	9		X			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names					٠,,			
	and addresses		orm 9 9	10 20	<u></u>	X 2012)			
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AMERICO J FRANCISCO CHARIT 03-0541650

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Form	n 990-PF (2012)		P	age 5
	LVII-A Statements Regarding Activities (continued)			-g
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	Т		T
	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?	13	X	1
	Website address ►N/A			·
14	The books are in care of ► See attachment #7 Telephone no ►		-	
•	Located at ZIP+4			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 Check here			ightharpoons
	and enter the amount of tax-exempt interest received or accrued during the year			· L
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16	103	X
	See the instructions for exceptions and filling requirements for Form TD F 90–22.1. If "Yes," enter the name of the	· · · · · · · · · · · · · · · · · · ·	Nagari Paris	NAME:
	foreign country	₩ 35	1. No.	14.00
Dår	tVII-B Statements Regarding Activities for Which Form 4720 May Be Required	1.7	***	13 _ `fer-
<u>r ar</u>	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	कर जिल	Yes	No
1a		7 ft . (4.	V 794	20025
ıu	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	area.	Burgar	\$ 1 m
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		Merita Co	4.45
	a disqualified person?	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	15.50	it at the
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	20 S. 20 C.	34 44	5.0 y
		W 74 5	1000	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	12 (E)	والم الماء	362, 14
	for the benefit or use of a disqualified person)?	被感力感	1100	1
	(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	2	3 %	
	after termination of government service, if terminating within 90 days)		*	1
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in	ee A	يوسويد وتؤدد	1,1 (1913)
-	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	381 2	2 10
	Organizations relying on a current notice regarding disaster assistance check here	3/87 AF	神子學	N 186 '
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,		45, 1	Sur Fig.
	that were not corrected before the first day of the tax year beginning in 2012?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	, 14,775	્રત્કર 🐇	
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5)).	اري موي روا ان موي ر	. 3	3
а	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d	-129 A	25.34	1
	and 6e, Part XIII) for tax year(s) beginning before 2012?	小飲食	~4 E	133
	If "Yes," list the years . ▶ 20 , 20 , 20 , 20	i. 3/4 /	1.00	23
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	5 / At 1.8	~ 30 m	
-	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	Justine 4	\$ 3	4.5
	to all years listed, answer "No" and attach statement see instructions.)	2b	<u> </u>	v
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	7 (7)	E.,	1 · 🔨

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_ , 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? If "Yes," did it have excess business holdings in 2012 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 penod? (Use Schedule C, Form 4720, to determine If the foundation had excess business holdings in 2012)

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?

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, Form 990-PF (2012) AMERICO J FRANCISCO CHARIT 0	93-0541650	Page 7
Information About Officers, Directors, Trustees, Formation Contractors (continued)		
Five highest-paid independent contractors for professional services (see in	structions). If none, enter "NON	IE."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
See attachment #12		
otal number of others receiving over \$50,000 for professional services	· · · · · · · · · · · · · · · · · · ·	>
List the foundation's four largest direct charitable activities during the tax year. Include relevant sta of organizations and other beneficiaries served, conferences convened, research papers produced,		Expenses
2		
3		
4		
Part X=B Summary of Program-Related Investments (see instru	ctions)	
Describe the two largest program-related investments made by the foundation durin	g the tax year on lines 1 and 2.	Amount

2

All other program-related investments. See instructions 3

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Total. Add lines 1 through 3 12 990PF7

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Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign found see instructions.)	lations,	
1	Fair market value of assets not used (or held for use) directly in carrying out chantable, etc.,		
	purposes.		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	2,000
С	Fair market value of all other assets (see instructions)	1c	1,734,396
d	Total (add lines 1a, b, and c)	1d	1,736,396
е	Reduction claimed for blockage or other factors reported on lines 1a and	\$ 2.3	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	1,736,396
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	26,046
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,710,350
6	Minimum investment return. Enter 5% of line 5	6	85,518
Pa	TXI 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	85,518
2a	Tax on investment income for 2012 from Part VI, line 5		
b	Income tax for 2012. (This does not include the tax from Part VI)	- S-24	
С	Add lines 2a and 2b.		
3	Distributable amount before adjustments Subtract line 2c from line 1	3	85,518
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	85,518
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	85,518
Pa	Qualifying Distributions (see instructions)	-	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.	100	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	95,000
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 chantable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the	7 X X	
а	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	95,000
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	95,000
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	e foundatio	n
	qualifies for the section 4940(e) reduction of tax in those years.		
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Form	990-PF (2012) AMERICO J FRANCISCO CHA	ARIT 03-0541650			Page 9
Par	XIII Undistributed Income (see	instructions)			·
		(a)	(b)	(c)	(d)
1	Distributable amount for 2012 from Part XI,	Corpus	Years prior to 2011	2011	2012
	line 7		~ ; · 4 × · 2 × 5 * 4 * 5	· · · · · · · · · · · · · · · · · · ·	85,518
2	Undistributed income, if any, as of the end of 2012	, , ,		* , , , , , , , , * * 4 * *	. "
а	Enter amount for 2011 only	, * ,			, ,
b	Total for prior years 20, 20, 20				" , " , , 12 / 4, 2
3	Excess distributions carryover, if any, to 2012	4 4 4	* * * * * * * * * * * * *		** - * 4 * *
а	From 2007			existed the	, , , , , , , , , , , , , , , , , , ,
	From 2008	1 , , , , , , , , , , , , , , , , , , ,			37 2
	From 2009			, , , , , , , , , , , , , , , , , , ,	
_	From 2010	· · · · · · · · · · · · · · · · · · ·		3 7 8 8 5 8 8 8 8 8 8 8	and the second s
	From 2011	1 t + 1 t +	3 5 2 4 4 8 4 5 7 4 4 5 4 2 7 1 2 8 8 4 1 1 7 4 8	4 · · · · · · · · · · · · · · · · · · ·	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Total of lines 3a through e	<u> </u>			· 这个
Δ.	Qualifying distributions for 2012 from Part XII,	5 / 3 * . / 4	/ 5 × 3 × 4		· · · · · · · · · · · · · · · · · · ·
7	line 4 > \$ 95,000	1 . 4 1 2 v w *	, , , ,		J
	Applied to 2011, but not more than line 2a	*****	, , , , , , , , , , , , , , , , , , , ,	1 2 2 1 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2	,
	,,	· * * * * * * * * * * * * * * * * * * *	, , , , , , , , , , , , , , , , , , ,		* * * * * * * * * * * * * * * * * * *
b	Applied to undistributed income of prior years	2 4 7 4 7 7		, , , , , , , ,	
-	(Election required see instructions)			5 A 3 4 A 4 A 4 A 4 A 4 A 4 A 4 A 4 A 4 A	· * * * * * * * * * * * * * * * * * * *
C	· ·	Ì	* * ' ;	*****	3 4 4 5 4 5 6 6 7 4 6 7 6 7
	(Election required see instructions)		* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * *	
	Applied to 2012 distributable amount	· • • · · · · · · · · · · · · · · · · ·	3 8 4 4 4 5 1 4 2 1 4 2 1 4 4 4 4 4 4 4 4 4 4 4 4 4	2) 4 (The comment of the section
	Remaining amount distributed out of corpus		A 61 M 81 A		are mineral desired of the
5	Excess distributions carryover applied to 2012	*** *** * * * * * * * * * * * * * * *	**************************************	· % % 4. /* \$ 4	12 3 % 2 7 4 1
	(If an amount appears in column (d), the same	-A &		" 9 g g & + M - 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1	1 1 2 2 2 3 4 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	amount must be shown in column (a).)	1. 4 1		an i prographet with me it	1、12、多数量量次分类。
6	Enter the net total of each column as	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	1.4.4	· · · · · · · · · · · · · · · · · · ·	A March 1 gar
	indicated below:		»	\$ \$	in the second second
	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5		· ********		*
b	Prior years' undistributed income. Subtract			2 · 1 · 2 · 2 · 4 · 4 · 4 · 4 · 4 · 4 · 4 · 4	* * * * * * * * * * * * * * * * * * *
	line 4b from line 2b			11-842844	, * , * * * · , · `
C	Enter the amount of prior years' undistributed				8 9 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	income for which a notice of deficiency has been	,		* , * * * * * * * * * * * * * * * * * *	. * * * * * * * * * * * * * * * * * * *
	issued, or on which the section 4942(a) tax has			n # 5	
	been previously assessed	*		* * * * * * * * *	ر · هرد.
d	Subtract line 6c from line 6b. Taxable	, *		, , , ,	
	amount see instructions			5 7 4 7	
е	Undistributed income for 2011. Subtract	,	e		* * *
	line 4a from line 2a. Taxable amount		,		1 A
	see instructions				, , , , , , , , , , , , , , , , , , ,
f	Undistributed income for 2012. Subtract	,			
	lines 4d and 5 from line 1 This amount			,	
	must be distributed in 2013	,			85,518
7	Amounts treated as distributions out of				* *-
	corpus to satisfy requirements imposed				
	by section 170(b)(1)(F) or 4942(g)(3) (see				•
	instructions)				
8	Excess distributions carryover from 2007		•		
	not applied on line 5 or line 7 (see				
	instructions)				
9	Excess distributions carryover to 2013.				•
	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:				
а	Excess from 2008				
b	Excess from 2009				,
С	Excess from 2010]			
	Excess from 2011				
	Excess from 2012	Ī			

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	990-PF (2012)				· - · · · · · · · · · · · · · · · · · ·	Page 10
₋ Rar	t XIV Private Operating Found	iations (see instru	ctions and Part VII-A	, question 9)		
1a	If the foundation has received a ruling or			-		
	foundation, and the ruling is effective for	•	•			
þ	Check box to indicate whether the found	ation is a private op-	erating foundation de	scribed in section	4942(j)(3) or	4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year				(e) Total
	income from Part I or the minimum investment return from Part X for each	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
	year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII,	-				
	line 4 for each year listed					
d	Amounts included in line 2c not used					
	directly for active conduct exempt act					
е	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:					:
а	"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				1	
	2/3 of min investment return shown in Part X, line 6 for each year listed					
С	"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				ļ	
	as provided in section 4942(j)(3) (B)(iii)					
	(3) Largest amount of support from an					
	exempt organization			1		
	(4) Gross investment income					
Par	t XV Supplementary Informat	ion (Complete	this part only if	the foundation	had \$5,000 or 1	more in assets
	at any time during the y	ear see inst	tructions.)		•	
1	Information Regarding Foundation Ma	nagers:				
а	List any managers of the foundation who	have contributed m	ore than 2% of the to	tal contributions rece	erved by the foundate	on before the
	close of any tax year (but only if they have	e contributed more	than \$5,000) (See se	ction 507(d)(2))		
	None		,			
b	List any managers of the foundation who	own 10% or more of	of the stock of a corpo	oration (or an equally	large portion of the	ownership
	of a partnership or other entity) of which	the foundation has a	a 10% or greater inter	est		
	None	_			_	
2	Information Regarding Contribution, C			-		
	Check here ▶ 🛚 if the foundation only	makes contribution	s to preselected char	ntable organizations	and does not accept	unsolicited
	requests for funds If the foundation mak	es gifts, grants, etc.	(see instructions) to ii	ndıvıduals or organız	ations under other co	onditions,
	complete items 2a, b, c, and d.	 				
а	The name, address, and telephone numl	per or e-mail of the p	person to whom appl	ications should be a	ddressed:	
				<u> </u>		
b	The form in which applications should be	submitted and info	rmation and matenals	s they should include	•	
	 					
С	Any submission deadlines:					
	And an analysis of the second		had sand 1 2 1 1	- Balaia Inc. 1 - 65		
đ	Any restrictions or limitations on awards,	such as by geograp	nicai areas, charitable	e neids, kinds of insti	tutions, or other facto	ors:

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Part XV Supplementary Information (continued)

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year	3. 55 55 tall 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.			
See attachment #13				
			-	
		,		
Total····································			▶ 3a	95 , 0
b Approved for future payment				
			ļ	
]		
Total···· · · · · · · · · · · · · · · · · ·	<u> </u>	<u> </u>		

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Page 12

Part XVI-	A Analysis of Income-Prod	ucing Activ	ities			
Enter gross a	amounts unless otherwise indicated.	Unrelate	ed business income	Excluded	l by section 512, 513, or 514	(e)
		(a)	(b)	(c)	(d)	Related or exempt
		Business	Amount	Excl	Amount	function income (See instructions.)
1 Program	service revenue.	code		code		(,
a			,			
b						
С						· -
d						
е						
f						
9 Fees	& contracts from government agencies					
2 Members	ship dues and assessments					
3 Interest or	savings and temporary cash investments					57
4 Dividend	s and interest from securities		_			66,053
5 Net renta	al income or (loss) from real estate	A 13 th Broke Spec	the first continue to the same	产型以代码		
	financed property					
	ebt-financed property					
6 Net rental	income or (loss) from personal property					
	vestment income					
8 Gain or (lo:	ss) from sales of assets other than inventory					
	me or (loss) from special events					
10 Gross pr	ofit or (loss) from sales of inventory					
	venue: a					
b		,			•	
c						
d			•			
е						
12 Subtotal	Add columns (b), (d), and (e)	A The second	0	arither of	0	66,110
					13	66,110
See worksh	eet in line 13 instructions to verify calcula	ations)				
	B Relationship of Activities		omplishment of Ex	cempt	Purposes	
Line No.	Explain below how each activity for					intly to the
▼	accomplishment of the foundation's	exempt purpos	es (other than by provid	ing funds	for such purposes). (Se	e instructions.)

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[/Fai	L.AVI	Exempt Orga		ansiers to and	ransacuc	ons ar	io Relation	isnips v	with Non	cnariu	abie	
1	Did th	e organization directly	-	ge in any of the follow	ving with any	other or	rganization de	scribed in	section		Yes	No
	501(c)	of the Code (other that	an section 501(c)(3) organizations) or i	n section 527,	relating	to political or	ganization	s?		科的	**************************************
а	Transf	ers from the reporting	foundation to a no	onchantable exempt	organization o	of.						
	(1) C	ash	· · · · · · · · · · · · · · · · · · ·							1a(1)		Χ
	(2) 0	ther assets · · · · ·								1a(2)		Χ
b	Other	transactions:								****	111 KAN	
	(1) S	ales of assets to a nor	nchantable exempt	organization						1b(1)		X
		urchases of assets fro								1b(2)		X
		ental of facilities, equip								1b(3)		Χ
	(4) R	eimbursement arrange	ements							1b(4)		Χ
	(5) L	oans or loan guarante	es · · ·							1b(5)		Χ
		erformance of services								1b(6)		X
С		ng of facilities, equipme								1c		X
(a) Lin	goods or sha	answer to any of the a s, other assets, or servi uring arrangement, sho (b) Amount involved	ices given by the row in column (d) t	eporting foundation	If the foundati	ion rece s, or ser	eived less than	n fair mark d.	et value in a	iny trans	action	
	Is the	foundation directly or	indirectly affiliated	with, or related to, o	ne or more tax	~-exemį	pt organizatio	ns describ	ed ın			
		n 501(c) of the Code (cs," complete the follow		501(c)(3)) or in section	on 527? · · · ·					Yes	X	No
		(a) Name of organiza	tion	(b) Type of o	organization		(c) Descrip	tion of relat	onship		
											-	
٥.	l b	Inder penalties of perjury, eliof, it is true, correct, and	i declare that i have e d complete. Declarati	xamined this return, incl on of preparer (other tha	uding accompan n taxpayer) is ba	ying sche ised on al	edules and state Il information of	ments, and t which prepa	o the best of irer has any ki	my knowle rowledge.	edge an	d
Sign Here		Signature of officer of	Rao or trustee	15[3] Date	13	TRUS	STEE		May the IR: with the pro (see instruc	eparer sho	wn bel	
Paid		Print/Type prepare	r's name	Preparer's signatur	Charolso		Date 4-25-20	Che self-	ck if employed	PTIN P000	931	76
_	arer	Firm's name ► HR	RB TAX GRO	OUP INC				Firm's EIN	▶43-1	$87\overline{18}$	40	
use	Only	Firm's address ▶ C	COLONIAL	SHOPPING CE	ENTER			Phone no.	78189	9381	1	

990 SCHEDULE OF ACCOUNTING FEES

Attachment 1: page 1 - 990-PF Page 1, Part I, Line 16b Open to Public Inspection For calendar year 2012, or tax penod beginning , and ending Name of Organization Employer Identification Number AMERICO J FRANCISCO CHARITABLE TRUST 03-0541650 Net Investment Adjusted Disbursements for **Accounting Category** Amount Net Income Income Chanty 675 675 HR BLOCK ATTORNEY GENERAL FEE 35 35 710 Total: 710

990 SCHEDULE OF INVESTMENTS - CORPORATE BONDS

Attachment 2: page 1 - 990-PF Page 2, Part II, Line 10c Open to Public Inspection , and ending For calendar year 2012, or tax penod beginning Name of Organization Employer Identification Number AMERICO J FRANCISCO CHARITABLE TRUST 03-0541650 FMV at **Description of Property** Cost Book Value Fair Market Value Year End 1,310,561 1,736,396 MUNICIPAL DEBT 1,310,561 1,736,396 Total:

990 SCHEDULE OF OTHER INCREASES

Attachment Open to Public	3: pag	ge 1 - 9	990- PF	Page 2,	Part	III, I	ine 3		
Inspection	1	year 2012, or					nd ending		
Name of Organizatio	i For calendar In	year 2012, or	tax period be	eginning		, aı	id ending	Employer	Identification Number
AMERICO J		SCO CHAF	RITABLE	TRUST				03-05	
			Description of						Total Amount
-									
									•
								,	
L						-		Total:	

990 SCHEDULE OF OTHER DECREASES

Attachment Open to Public	- 4: r	page 1	- 990-	PF Page	2, Part III	, Line	5	
Inspection	For cale	endar year 20	012, or tax peno	d beginning		, and endi	ng	
	on							r Identification Number
<u>AMERICO J</u>	FRANC	CISCO_(03-05	
			Descripti	on of Decrease		<u>.</u>		Total Amount
Name of Organization	on FRANC	CISCO (CHARITAB Descripti	LE TRUST	12-31-2012		Employe 03-05	41650 Total Amount
		•					Total:	113,321

990 PART IV CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

n to Public				<u>ge 3, Part I</u>	· / <u> </u>		
ection	For calendar	voar 2012 o	tax penod beginnı	20	, and ending		
		year 2012 0	tax period beginni	ng	, and ending	Employer Identifi	ication Number
RICO J	FRANCIS	CO CHA	RITABLE T	RUST		03-054165	
					(b) How Acquired ((d) Date Sold
			Common Stock, 200) shs. MLC Co)		(mo., day, yr.)	(mo., day, yr.)
MA ST H MA ST H MA ST T	EALTH E EALTH E PK AUTH	DL FAC DL FAC		P P P P		01-03-2012 01-09-2012 08-10-2012 01-03-2012 08-01-2012	
(e) Gross S.	ales Price			, , ,	l.	(h) Gain o	
	25 000	or all	owable)	Plus Exper		(e) Plus (f) Minus (g)
	25,000 10,000				25,000 10,000 5,000 30,000		
Complete on	ly for accets ch	04400 000	n column (h) and o	wood by the foundation	on 12/21/60	(I) Going (Col. (h) Coin Musus
							n) Gain Minus :Less Than -0-) or
.,		=-					om col. (h))
	(a) Lis 2 MA ST D MA ST H MA ST H MA ST I MA ST W (e) Gross S	(a) List and Describe 2-story Brick War MA ST DEV FIN MA ST HEALTH E MA ST HEALTH E MA ST TPK AUTH MA ST WTR POLL (e) Gross Sales Price 25,000 25,000 10,000 5,000 30,000	(a) List and Describe the Kind(s) 2-story Brick Warehouse; or () MA ST DEV FIN AGY MA ST HEALTH EDL FAC MA ST HEALTH EDL FAC MA ST TPK AUTH MA ST WTR POLLU (e) Gross Sales Price (f) Depre (or alle 25,000 10,000 5,000 30,000 Complete only for assets showing gain in (i) F.M.V. as of 12/31/69 (j) A	(a) List and Describe the Kind(s) of Property Sold (e 2-story Brick Warehouse; or Common Stock, 200 MA ST DEV FIN AGY MA ST HEALTH EDL FACS MA ST HEALTH EDL FACS MA ST TPK AUTH MA ST WTR POLLU (e) Gross Sales Price (f) Depreciation Allowed (or allowable) 25,000 25,000 10,000 5,000 30,000 Complete only for assets showing gain in column (h) and o	(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.) MA ST DEV FIN AGY MA ST HEALTH EDL FACS MA ST TPK AUTH MA ST WTR POLLU (e) Gross Sales Price (f) Depreciation Allowed (g) Cost or O Plus Expert 25,000 25,000 10,000 5,000 30,000 Complete only for assets showing gain in column (h) and owned by the foundation (l) F.M.V. as of 12/31/69 (j) Adjusted Basis (k) Excess in Common Stock, 200 shs. MLC Co.)	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) Fin. V. as of 12/31/69 (j) Adjusted Basis (k) Excess if Col. (i)	(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.) MA ST DEV FIN AGY MA ST HEALTH EDL FACS MA ST HEALTH EDL FACS MA ST HEALTH EDL FACS MA ST THEALTH EDL FACS MA ST WITR POLLU (b) Gross Sales Price (c) Depreciation Allowed (or allowable) (c) Gross Sales Price (d) Depreciation Allowed (or allowable) (e) Gross Sales Price (f) Depreciation Allowed (or allowable) 25,000 25,000 25,000 10,000 5,000 30,000 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (d) F.M.V. as of 12/31/69 (d) Adjusted Basis (k) Excess if Col. (i) (d) Gains (Col. (Col (k), But Not

990 TAX UNDER SECTION 511 STATEMENT

Open to Public	6: page 1 - 990-PF Page 4, Part		
nspection	For calendar year 2012, or tax period beginning	, and ending .	
ne of Organizati		Employer Identification Num	iber
<u>ERICO J</u>	FRANCISCO CHARITABLE TRUST	03-0541650	
	Section 511 Statement	nt	

990 BOOKS ARE IN CARE OF

	chment 7 - 990-PF Page 5, Part VII-A, Line 14	
Open to	o Public	
Inspect	For calendar year 2012, or tax penod beginning , ar	nd ending .
Name of	Organization	Employer Identification Number
	ICO J FRANCISCO CHARITABLE TRUST	03-0541650
Part VII-	A - Line 14	
	I Name ANGELA RAC)
or	Mana	
Business	name	
Street Ad	ldress <u>1 PORTER </u> /	AVE
US Add	ress	
7	Up code 01803 City Burlington	Out M7
0		State <u>MA</u>
Foreign A		
i oreigii A	nutros	
C	City	
P	Province or State	
C	Country	····· ···· · · · · · · · · · · · · · ·
Б	Postal code	
r	Ostal code	
P	Phone Number	(781) 273-5478
•		<u> </u>
F	ax Number	

ED BY REGULATION SECTION 53.4945-5(d)	990-PF Page 6, Part VII-B, Line 5c	
990 STATEMENT REQUIRED I	Attachment 8: page 1 -	

	03-05/1650	Amounts Expended by Grantee		12_EOPFGR66L
and ending	Employer Identification Number	Purpose of Grant	Results of Verification	
ning	E		Date of Verification	
FOIL VII-D, FOIL VII-D, FOI CAIL VII-D, FOIL VII-D, FOIL CAIL VIII VIII VIII VIII VIII VIII VIII V	THARTT TRITCH	Amount of Grant	Dates of Reports by Grantee	
or Calendar year 2012	CHO COSTONAGE		Dates by (V L0615F
Accacimient o: page 1 - Open to Public Thspection F	T T COLOURNA		Diversion by Grantee	JVA Copyright Forms (Software Only) - 2012 TW

990 CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

Attachment 9: page 1 - 990-PF Page 6, Part VIII
Open to Public Inspection For calendar year 2012, or tax period beginning , and ending Name of Organization **Employer Identification Number** AMERICO J FRANCISCO CHARITABLE TRUST 03-0541650 (A) Name and Address (B) Title and Average (C) Compensation (If (D) Cont. to Employee (E) Expense Account Hrs per Week not paid, enter 0) Ben Plans & Def. Comp. & Other Allowances ANGELA RAO TRUSTEE 10.00 1 PORTER AVE 6,000 Burlington, MA 01803 See Comp. Expl. #1

990 COMPENSATION EXPLANATION

•									12_EOPFGR119L
Officer Compensation Explanation	and ending	Employer Identification Number 03-0541650	Explanation						
6, Part VIII,	tax year penod beginning			NONE					
- 990-PF Page	For Calendar year 2012, or tax year penod beginning	CHARITABLE TRUST		#1					112 TW L0615F
Attachment 10: page 1	Open to Public Inspection	Name of Organization AMERICO J FRANCISCO C		Officer Comp. Expln. ANGELA RAO					JVA Copyright Forms (Software Only) - 2012 TW

990 COMPENSATION OF THE FIVE HIGHEST PAID EMPLOYEES

Attachment 11: page 1 990-PF Page 6, Part VIII, Line 1 Open to Public							
Inspection For calendar year 2012, or tax period	od beginning	, and endi					
Name of Organization			Employer Identification Number				
AMERICO J FRANCISCO CHARITAE	· · · · — · · · · ·		03-0541650				
PartsVIII Compensation of the Five Highest Paid	1	ers, Directors, and		(a) Evaces			
(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 Empl. Benefit Plans &	(e) Expense Account and Other Allowances			
NONE	rei week Devoted to Position		Deferred Compensation	Other Allowances			
NONE							
,							
•							
	!						
		,					

990 COMPENSATION OF THE FIVE HIGHEST PAID INDEPENDENT CONTRACTORS FOR PROFESSIONAL SERVICES

Attachment 12: page 1 990-PF Page 6, Part V Open to Public	III, Line 2			
Inspection For calendar year 2012, or tax period beginning	, and ending			
Name of Organization	<u>!</u>	ntification Number		
AMERICO J FRANCISCO CHARITABLE TRUST PartWill Compensation of the Five Highest Paid Independent Contractors for	03-0541650			
		16.5		
(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation		
NONE				
•				
	-			
	:			

990 GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

Attachment 13: page 1 990-PF Page 11, Part XV Line 3a

Open to Pu

Inspection For calendar year 2012, or tax period beginning

, and ending

Name of Organization	Employer Identification Number		
AMERICO J FRANCISCO CHARITABLE TRUST	03-0541650		
If December 1 and Individual Inc.			

AMERICO J FRANCISCO CHARIT	If Recipient is an Individual,	Caus dation	<u> </u>	-030 	
Recipient	Show any Relationship to Any Foundation Manager	Status of	Purpose of Grant or Contribution	Amount	
Name and Address (home or business) SOMR/CAMB ELDER SERV 61 MEDFORD ST SOMERVILLE, MA 02143	or Substantial Contributor		FOR ELDERLY SERVICES	19,500	
MAPS 1046 CAMBRIDGE STREET CAMBRIDGE, MA 02139		ACTIVE	ELDERLY FOOD	4,000	
CAMBRIDGE HEALTH ALLIANCE 1493 CAMBRIDGE STREET CAMBRIDGE, MA 02139		ACTIVE	ELDER SERVICE PLAN	5,000	
EAST END HOUSE 105 SPRING STREET CAMBRIDGE, MA 02140		ACTIVE	ELDERLY FOOD	15,000	
CATHOLIC RELEAF PO BOX 17152 BALTIMORE, MD 21298		ACTIVE	ELDERLY RELIGION	5,000	
ST ANTHONY CHURCH 400 MEDEIROS AVE CAMBRIDGE MA 02141		ACTIVE	CHURCH UPKEEP	4,000	
ITIALIAN HOME 1125 CENTRE ST JAMAICA PLAIN, MA 02130		ACTIVE	FOR CHILDREN	5,000	
CATHOLIC TELEVISION 34 CHESTNUT STREET WATERTOWN, MA 02471			FOR RELIGIOUS PROGRAMS	3,000	
LITTLE SISTERS OF POOR 186 HAIGLAND AVE SOMERVILLE MA 02143			FOR ELDERLY RELIGION	5,000	
ST FRANCIS HOUSE 39 BOYLSTON ST BOSTON, MA 02116			FOR CHILDREN	4,000	
ST JOSEPH INDIAN HOUSE 1301 N MAIN ST CHAMBERLAIN, SD 57325			ELDERLY RELIGION	1,000	
	<u> </u>	l	Total:	70,500	

990 GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

Attachment 13: page 2 990-PF Page 11, Part XV Line 3a

Open to Pu

Inspection For calendar year 2012, or tax p	period beginning	, and ending .					
Name of Organization	· · · · · · · · · · · · · · · · · · ·		Employer Identification Number				
AMERICO J FRANCISCO CHARIT			03-0541650				
Recipient	If Recipient is an Individual, Show any Relationship to Any Foundation Manager	Foundation Status of	Purpose of Grant or Contribution	Amount			
Name and Address (home or business)	or Substantial Contributor	Recipient					
HOME FOR LITTLE WANDERERS			FOR CHILDRENS HOME				
271 HUNTINGTON AVE BOSTON, MA 02115				5 000			
BOSION, MA UZIII				5,000			
CHRISTIAN APPLACHIAN			FOR CHILDREN				
PROJECT							
322 CRAB ORCHARD ST							
LANCASTER, KENTUCKY 40444				1,000			
PINE STREET INN			FOR HOMELESS				
444 HARRISON AVE BOSTON MA 02118				4 500			
BOSION MA UZIIO				4,500			
ROSIES PLACE			FOR HOMELESS				
889 HARRISON AVE							
BOSTON, MA 02118				4,500			
SISTERS OF ST JOSEPH			FOR ELDERLY				
34 LOWER WESTFIELD ROAD HOLYOKE, MA 01040			RELIGION	2 500			
HOLIOKE, MA 01040				2,500			
DAUGHTERS OF ST PAUL			RELIGIOUS				
50 ST PAULS AVE			EDUCATION				
JAMAICA PLAIN, MA 02130				2,000			
COND. ACTIVE DELICATORS							
SOAR AGING RELIGIOUS 3025 FOURTH ST			FOR ELDERLY				
WASHINGTON, DC 20017			SERVICES	5,000			
Wishington, be 20017				5,000			
	I		1				

Total:

24,500 12_EOPFGR152