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Form **990-PF** 

## Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0052 Open to public Inspection

		it of the Treasury	New The females	Treated as a Privat	te Foundation		
	~	venue Service   Idar year 2012 or tax y		be able to use a copy of this		orting requirements.	Open to public Inspection
		f foundation	rear negimining		, and ending	A Francous identification	
			Y STAVIS CHAF	ንተሞልዩተ.ፑ		A Employer identification	1 number
		NDATION	I DIAVID CIM	TIADUU		04-2942784	!
			ber if mail is not delivered to stree	t address)	Room/suite	B Telephone number	<u> </u>
56	7	BOYLSTON	STREET	·		(617)482-6	349
		own, state, and ZIP cod		19 11		C If exemption application is p	. [
BR	O	OKLINE, MA	02445			The exemption application is p	bending, check here
G Ch	eck	all that apply:	Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organization	s, check here
			Final return	Amended return			,
			Address change	Name change		Foreign organizations me check here and attach co	eeting the 85% test, pmputation
H Ch	eck	type of organization;	X Section 501(c)(3) e	xempt private foundation		E If private foundation sta	tus was terminated
	Se	ection 4947(a)(1) nonex		Other taxable private foundation	ation	under section 507(b)(1	
		arket value of all assets	, , , , , , , , , , , , , , , , , , , ,	ing method: X Cash	Accrual	F If the foundation is in a	60-month termination
		Part II, col. (c), line 1		ther (specify)		under section 507(b)(1	)(B), check here 🕨 🔛
<b>▶</b> \$			33,940. (Part I, colu	T	basis.)		T
Par	τ !	Analysis of Revenue (The total of amounts in	columns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
	_	necessarily equal the am		· · · · · · · · · · · · · · · · · · ·	ıncome		(cash basis only)
	1	Contributions, gifts, g	• •	58,951.		N/A	-
- 1	2	interest on savings and te	dation is not required to attach Sch. B	-			
	3	cash investments	•	0 554	0 554		CM2 MENTEN O
- 1	4	Dividends and interest Gross rents	t from securities	8,554.	8,554.	· · · · · · · · · · · · · · · · · · ·	STATEMENT 2
İ		Net rental income or (loss)	,		***		
	_	Net gain or (loss) from sale		15,404.			STATEMENT 1
Je	b	Gross sales price for all	205,608.	13,404.			DIRIEMENI I
Revenue	7	Capital gain net income (fi			111,305.	· · · · · · · · · · · · · · · · · · ·	
æ	8	Net short-term capital					
	9	Income modifications					
1	10a	Gross sales less returns and allowances					
	þ	Less Cost of goods sold			Įć.		
	C	Gross profit or (loss)			R		
1	11	Other income		-263.	<b>72</b> 63.		STATEMENT 3
	12	Total. Add lines 1 thro	ough 11	82,646.		FP 9 9 2013  O	
	13	Compensation of officers,		0.	Lo.	, s	0.
- 1	14	Other employee saları	<del>-</del>			DEN, UT	
g ]	15	Pension plans, employ	yee benefits				
I SE		Legal fees		·		<u> </u>	
×pg		Accounting fees Other professional fee	ne.	77.00			
e le	ن 17	Interest	io		· · · · · · · · · · · · · · · · · · ·		
·= 1	1 <i>1</i>	Taxes	STMT 4	34,168.	167.		0.
ist 1	19	Depreciation and depl		3±,100•	107.	-	<u></u>
틸일	20	Occupancy			.,.	† <del></del>	
P   2	21	Travel, conferences, a	ind meetings				
	22	Printing and publication	<del>-</del>				
<u>ව</u> 2	23	Other expenses	STMT 5	2,421.	2,421.		0.
Operating	24	Total operating and a	administrative				
per		expenses Add lines	13 through 23	36,589.	2,588.		0.
0 2	25	Contributions, gifts, gi	rants paid	23,774.			23,774.
2	26	Total expenses and d	lisbursements.				
		Add lines 24 and 25		60,363.	2,588.		23,774.
2	27	Subtract line 26 from	line 12:				
			penses and disbursements	22,283.	447 000		ļ
		Net investment incom			117,008.		
223501 12-05-1	C	Adjusted net income		instructions.		N/A	F 000 DE (00.10
12-05-1	12	LHA FOT Paperwor	rk Reduction Act Notice, see	INSTRUCTIONS.			Form <b>990-PF</b> (2012

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)			11	368,143.
2	Enter amount from Part I, line 27a			2	22,283.
3	Other increases not included in line 2 (itemize)	SEE	STATEMENT 6	3	4,791.
4	Add lines 1, 2, and 3			4	395,217.
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), lir	ne 30		6	395,217.

Part IV Capital Gains a	and Losses for Tax on In	vestment	Income						
(a) List and descr 2-story brick wai	ibe the kind(s) of property sold (e.g. rehouse; or common stock, 200 shs	., real estate, s. MLC Co.)		I, b	low acq - Purcha - Donati	ise l	(c) Date (mo., d	acquired lay, yr.)	(d) Date sold (mo., day, yr.)
1a MORGAN STANLEY				ا ا	P		VARI	OUS	VARIOUS
b ALLIANCEBERNSTI	EIN HOLDING LP				<u>-</u>		<u> </u>	<del></del>	VIERTEOD
С				1					
d					-				
e									
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale			•		ain or (loss s (f) minus	
a 205,562.			94,30	3.				_	111,259.
<u>b</u> 46.									46.
<u>c</u>									
<u>d</u>								_	<del>_</del>
<u>e</u>									
Complete only for assets showing	g gain in column (h) and owned by t							ol. (h) gain not less tha	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i)			COI		(from col.	
	as 01 12/3 1/09	UVEI	col. (j), if any					•	111 050
<u>a</u>									111,259.
<u>b</u>				-					46.
<u>c</u>									
<u>d</u>									
<u>e</u>				$\overline{}$	<del>`</del>				
2 Capital gain net income or (net cap	pital loss) $ \begin{cases} \text{If gain, also enter} \\ \text{If (loss), enter -0-} \end{cases} $				2				111,305.
3 Net short-term capital gain or (los		ıd (6):		١ , ١					
if gain, also enter in Part I, line 8, o	column (c).								
If (loss), enter -0- in Part I, line 8	nder Section 4940(e) for	Doduced	Toy on Not		3			N/A	
						ent inc	ome		
(For optional use by domestic private	foundations subject to the section 4	1940(a) tax on	net investment in	icome	9.)				
If section 4940(d)(2) applies, leave th	us part blank.								
Man the foundation lights for the cost	von 4040 tov on the distributeble on								Yes X No
Was the foundation liable for the sect If "Yes," the foundation does not quali			•	100					Yes _ANo
	each column for each year; see the in			ntries	<u> </u>			<del></del>	
(a)	(b)	1041 40410110 504	ioro making arry o	(c)					(d)
Base periód years Calendar year (or tax year beginnir	المراب أعلى مناها أنا مناه المعامل الم	tributions	Net value of no			se assets		Distrit (col. (b) div	bution ratio vided by col. (c))
2011	·9 ···/	2,776.			225	,262		(00.1 (2) 0.1	.367465
2010		8,999.				,841			.248340
2009		1,658.				,804			.267576
2008		8,039.				,313			.363966
2007		0,541.				,158			.217564
	- · · · · · · · · · · · · · · · · · · ·								
2 Total of line 1, column (d)							2		1.464911
3 Average distribution ratio for the 5	5-year base period - divide the total o	on line 2 by 5,	or by the number	of ye	ars				
the foundation has been in exister	nce if less than 5 years						3		.292982
4 Enter the net value of noncharitab	le-use assets for 2012 from Part X,	line 5					4		377,622.
									<del>-</del>
5 Multiply line 4 by line 3							5		110,636.
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)						6		1,170.
7 Add lines 5 and 6							7		111,806.
8 Enter qualifying distributions from							8		23,774.
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Part VI, line	1b, and comp	lete that part usin	ıg a 1	% tax ra	te.			

EDWARD & NANCY STAVIS CHARITABLE

	990-PF (2012) FOUNDATION 04-294 TVI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	2784	otio	Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.	IIISIIU	Clibi	13)
ıa	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
h	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%		2.3	40.
	of Part I. line 27b	-		
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
	Add lines 1 and 2		2,3	40.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		2.3	40.
	Credits/Payments:			
	2012 estimated tax payments and 2011 overpayment credited to 2012 6a 840.			
	Exempt foreign organizations - tax withheld at source 6b			
	Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld  6d 34,001.			
	Total credits and payments. Add lines 6a through 6d	3	4,8	41.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	-		
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	3	2.5	01.
	Enter the amount of line 10 to be: Credited to 2013 estimated tax			41.
	rt VII-A Statements 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		Yes	No
	any political campaign?	1a	-	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		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			
c	Did the foundation file Form 1120-POL for this year?	1c		x
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
٠	(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			
Ī	managers. ► \$ 0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
_	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
	o If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?	7	X	
	If "Yes," complete Part II, col. (c), and Part XV			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	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	X	<u> </u>
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," complete Part XIV	9	ļ	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	L	<u> </u>
	Fr	orm <b>990</b>	-PF	(2012)

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valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach

b 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 period? (Use Schedule C,

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

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

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

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

Form 4720, to determine if the foundation had excess business holdings in 2012.)

had not been removed from leopardy before the first day of the tax year beginning in 2012?

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X

N/A

N/A

Yes X No

2b

3b

4a

statement - see instructions.)

during the year?

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

All other program-related investments. See instructions.

Total. Add lines 1 through 3

FOUNDATION

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	idations, s	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
•	Average monthly fair market value of securities	1a	366,849.
	Average of monthly cash balances	1b	16,524.
	Fair market value of all other assets	1c	
	Total (add lines 1a, b, and c)	1d	383,373.
	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	383,373.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	5,751.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	377,622.
6	Minimum investment return. Enter 5% of line 5	6	18,881.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here  and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	18,881.
	Tax on investment income for 2012 from Part VI, line 5 2, 340.		
	Income tax for 2012. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c _	2,340.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	16,541.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	16,541.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	16,541.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	<u>23,77</u> 4.
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:	1 1	
а	Suitability test (prior IRS approval required)	3a	<u> </u>
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	23,774
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	23,774.
	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

Part XIII Undistributed Income (see instructions)

		<del></del>	<del></del>	
	(a) Corpus	(b) Years prior to 2011	(c) 2011	( <b>d)</b> 2012
1 Distributable amount for 2012 from Part XI,				
line 7				16,541.
2 Undistributed income, if any, as of the end of 2012				
a Enter amount for 2011 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2012:				
a From 2007 70,495.				
b From 2008 103,005.				
c From 2009 58,422. d From 2010 55,699.				
e From 2011 71,695.				
f Total of lines 3a through e	359,316.			
4 Qualifying distributions for 2012 from	333,310.			<del></del>
Part XII, line 4: ▶\$ 23,774.				
a Applied to 2011, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2012 distributable amount			·	16,541.
e Remaining amount distributed out of corpus	7,233.			
5 Excess distributions carryover applied to 2012 (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	366,549.			
<b>b</b> Prior years' undistributed income. Subtract	300,3230			
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2011. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2012. Subtract				
lines 4d and 5 from line 1. This amount must				•
be distributed in 2013				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	0.			
section 170(b)(1)(F) or 4942(g)(3)				
8 Excess distributions carryover from 2007 not applied on line 5 or line 7	70,495.			
9 Excess distributions carryover to 2013				
Subtract lines 7 and 8 from line 6a	296,054.			
10 Analysis of line 9:				
a Excess from 2008 103,005.				_
b Excess from 2009 58, 422.	-			
c Excess from 2010 55,699.				
d Excess from 2011 71,695.				
e Excess from 2012 7, 233.				
				Form <b>990-PF</b> (2012)

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:

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04-2942784

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Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Foundation Purpose of grant or **Amount** status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year NONE ADRIENNE ARSHT CENTER 501(C)(3) UNRESTRICTED 500. ARSENAL CENTER FOR THE ARTS NONE 501(C)(3) UNRESTRICTED 350. NONE 501(C)(3) BEAVER COUNTRY DAY SCHOOL UNRESTRICTED 2,500. BETH ISRAEL DEACONSER MED NONE 501(C)(3) UNRESTRICTED 1,000. BOSTON SYMPHONY ORCHESTRA NONE 501(C)(3) UNRESTRICTED 550. CONTINUATION SHEET(S) Total ▶ 3a 23.774. b Approved for future payment NONE Total

Part XVI-A	Analysis of	Income-Producing	Activities

nter gross amounts unless otherwise indicated.	Unrelated b	ousiness income		ed by section 512, 513, or 514	(e)	
1 Program service revenue:	Business code	<b>(b)</b> Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income	
-	Code		-			
a	- <del> </del>	<del></del>	-	<del></del>		
					<del></del>	
<u> </u>	— <del>                                    </del>			<del></del>	<del></del>	
d						
e	— <del>                                    </del>				<del></del>	
g Fees and contracts from government agencies	-					
2 Membership dues and assessments						
3 Interest on savings and temporary cash investments		-				
4 Dividends and interest from securities			14	8,554.		
5 Net rental income or (loss) from real estate:						
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal						
property						
7 Other investment income	900099	-263.				
8 Gain or (loss) from sales of assets other than inventory			18	15,404.		
9 Net income or (loss) from special events						
O Gross profit or (loss) from sales of inventory						
1 Other revenue:						
a						
b						
c						
d						
e						
12 Subtotal. Add columns (b), (d), and (e)		-263.		23,958.	0	
13 Total. Add line 12, columns (b), (d), and (e)				13	23,695	
(See worksheet in line 13 instructions to verify calculations	s.)					

Part XVI-B	Relationship of Activities t	o the Accomplishment of	Exempt Purposes
------------	------------------------------	-------------------------	-----------------

ine No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).							
321		5 000 PC (00						

Form 99			ATION					942784		age 13
Part 2	XVII	Information Re Exempt Organ		nsfers To a	and Transactions a	nd Relations	ships With None	charitabl	е	
1 Did	the org	ganization directly or indi	rectly engage in any	of the following	ng with any other organization	n described in sec	tion 501(c) of		Yes	No
					27, relating to political organ	ızatıons?		]		
		from the reporting found	ation to a noncharita	able exempt or	ganization of:				i	
	Cash							1a(1)	<u> </u>	<u>  X</u>
	Other							1a(2)	ļ	X
4		sactions:	di t							
		of assets to a noncharita						1b(1)	<del> </del> -	X
		ases of assets from a no	•	organization				1b(2)		X
		I of facilities, equipment,						1b(3)		X
		oursement arrangements s or loan guarantees						1b(4) 1b(5)	-	X
		rmance of services or me	emhershin or fundra	usina salicitatio	nne			1b(6)		X
		facilities, equipment, ma						1c		X
					edule. Column (b) should alv	vays show the fair i	market value of the go		sets.	<u></u>
					ed less than fair market valu				,	
	<del>- `</del>	) the value of the goods,	<del></del>		·····	,				
(a) Line n	•	(b) Amount involved	(c) Name o	<del></del>	e exempt organization	(d) Description	n of transfers, transactions	, and sharing a	rangeme	ents
	_		<del>                                     </del>	N/A	<u> </u>	-		<del>.</del>		
		<del></del>			<del></del>					
			<del>                                     </del>							
	+		<del>                                     </del>							
	+					<del> </del>				
			<del>                                     </del>							
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	_		<u> </u>							
				1 . 1 .						
		idation directly or indirec 501(c) of the Code (othe	-		or more tax-exempt organiz	ations described			77	7 u.
		omplete the following sch	•	e)(3)) or in sec	11011 52 <i>1 r</i> .			Yes	LA	∐No
<u> </u>	163, 60	(a) Name of org			(b) Type of organization		(c) Description of rela	tionship		
		N/A	,		(-, ,,-		(0)			
							-			
					ng accompanying schedules and n taxpayer) is based <b>i</b> on all inform			May the IRS	discuss	this
Sign	and be	mer, it is true, correct, and cor		reparer (other tha	in taxpayer, is based pir all shorting	<b>A</b> 1	, -	return with the shown below	e prepar (see ins	er str)?
Here		2 U M	· 15/2/15		8/36/13	te	ρ	X Yes	: L_	_  No
-	Sign	ature of officer or trustee		Dronora-la -	Date '	Title	Chack	TIN		
		Print/Type preparer's na	ante	Preparer's s	ignature 1	Date	Check if P self- employed	TIN		
Paid		DAVID SWAN	T		1///	1/20/12	•	DUU 2 2 4	3 E O	1
Prepa	arer	Firm's name ► CBI		1 mon	(J ) (J#	10/10/12	Firm's EIN ► 26	<u> P00334</u> -37531		
Use (		THE STAINS P CD1	.d TOFTAB				THINIS EIN F 40	21221	J <del>'</del>	

617-761-0600

Firm's address ▶ 500 BOYLSTON STREET

BOSTON, MA 02116

## Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

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

OMB No 1545-0047

2012

Name of the organization

EDWARD & NANCY STAVIS CHARITABLE

FOUNDATION

Employer identification number

04-2942784

Organization type (check one):											
Filers of:		Section:									
Form 990	or 990-EZ	501(c)( ) (enter number) organization									
		494	17(a)(1) n	onexempt charitable	trust not trea	ted as a priv	ate founda	ation			
		527	politica	lorganization							
Form 990-	PF	<b>X</b> 501	(c)(3) ex	empt private foundat	tion						
		494	17(a)(1) n	onexempt charitable	trust treated	as a private	foundation	1			
		<u> </u>	I(c)(3) ta	xable private foundat	ion						
				eneral Rule or a Spe		the General	Rule and a	Special Rule	e. See inst	tructions	
General R	Rule										
	or an organization contributor Compl	_		90-EZ, or 990-PF that	received, dur	ing the year	, \$5,000 or	more (in mo	ney or pro	perty) from	any one
Special R	ules										
5	609(a)(1) and 170(b	b)(1)(A)(vi) a	and rece	ing Form 990 or 990- ived from any one co II, line 1h, or (ii) Form	ntributor, dur	ng the year,	a contribu	ition of the gi			
t	otal contributions	of more tha	an \$1,00	anization filing Form 00 for use exclusively r animals. Complete	for religious, o	charitable, so					
i Ii	contributions for us f this box is check ourpose Do not co	se <i>exclusive</i> sed, enter he omplete any	ely for re nere the t ny of the	anization filing Form bligious, charitable, et total contributions the parts unless the <b>Gen</b> is of \$5,000 or more to	c , purposes, at were receiv eral Rule app	but these co ed during th blies to this o	ontributions ie year for a	s did not tota an <i>exclusivel</i> j	al to more y religious,	than \$1,000 , charitable, nonexclusive	0 , etc.,
but it mus	st answer "No" on	Part IV, line	e 2, of it	by the General Rule a s Form 990; or check ents of Schedule B (F	the box on li	ne H of its Fo	orm 990-EZ				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization

EDWARD & NANCY STAVIS CHARITABLE

FOUNDATION

Employer identification number

04-2942784

L COMP	RIION		<u> </u>
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	EDWARD STAVIS  567 BOYLSTON STREET  BROOKLINE, MA 02445	\$58,951.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Name of organization

EDWARD & NANCY STAVIS CHARITABLE

**Employer identification number** 

art II	Noncash Property (see instructions) Use duplicate copies of Part II if	additional space is needed	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	125 SHARES OF INTL BUSINESS MACHINES CORP, 50 SHARES OF KIMBERLY CLARK CORP, 200 SHARES OF VISA INC	\$ 58,951.	12/31/12
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		-   -   \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		-   - -	
		\$	

EDWARD	&	NANCY	STAVIS	CHARITABLE

lame of organ			Employer identification number
	& NANCY STAVIS CHARITY	ABLE	
' <u>OUNDA'I</u> Part III	<b>LION</b> Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc. Use duplicate copies of Part III if additional discountry.	., contributions of \$1,000 or less for t	7), (8), or (10) organizations that total more than \$1,000 for the s completing Part III, enter the year. (Enter this information once)
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_	Transferee's name, address, an	(e) Transfer of gift	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	Transferee's name, address, ar	(e) Transfer of gift	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-  -  -		(e) Transfer of gift	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gift	
_	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee

Part XV **Supplementary Information** Grant's and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount contribution status of any foundation manager Name and address (home or business) recipient or substantial contributor CAPE COD CENTER CENTER FOR THE ARTS NONE 501(C)(3) UNRESTRICTED 250. 501(C)(3) CAPE COD CHAMBER MUSIC FESTIVAL NONE UNRESTRICTED 770, NONE 501(C)(3) UNRESTRICTED CAPE CODE OPERA 100. UNRESTRICTED NONE 501(C)(3) CCFA 100. NONE 501(C)(3) UNRESTRICTED CELEBRITY SERIES OF BOSTON 3,000, 501(C)(3) UNRESTRICTED CHATHAM ORPHEUM THEATER NONE 100. 501(C)(3) UNRESTRICTED NONE FLORIDA GRAND OPERA 3,000. UNRESTRICTED NONE 501(C)(3) FRIENDS OF THE DENNIS PUBLIC LIBRARY 50. KEY BISCAYNE WOMEN'S GIVI NONE 501(C)(3) UNRESTRICTED 125. UNRESTRICTED LOWE CENTER FOR THORACIC NONE 501(C)(3) 200. 18 874. Total from continuation sheets

FOUNDATION

04-2942784

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to Amount any foundation manager status of Name and address (home or business) or substantial contributor recipient MGH DEVELOPMENT OFFICE NONE 501(C)(3) UNRESTRICTED 5,000. MIAMI CITY BALLET NONE 501(C)(3) UNRESTRICTED 350, NONE MUSEUM OF FINE ARTS, BOSTON 501(C)(3) UNRESTRICTED 3,190. NONE NEW REPIRTORY THEATRE 501(C)(3) UNRESTRICTED 500. NEW WORLD SYMPHONY NONE 501(C)(3) UNRESTRICTED 1,500. PHI BETA KAPPA SOCIETY NONE 501(C)(3) UNRESTRICTED <u>39.</u> SPEAKEASY STAGE CO NONE 501(C)(3) UNRESTRICTED 500. TEMPLE BETH ELOHIM NONE 501(C)(3) UNRESTRICTED 100. Total from continuation sheets

	90-PF G	AIN OR (LOS	S) F	ROM SALE	OF .	ASSETS		STA	TEMENT	1
DESCRI	(A) PTION OF PROPERTY					MANNER CQUIRED	DA ACQU		DATE :	SOLD
MORGAN	STANLEY	_			PU	RCHASED	VARI	ous	VARI	ວບຣ
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASI	S	(D) EXPENSE SALE	OF	(E) DEPRE	C.	GATN	(F)	SS
	205,562.	190,2			0.		0.		<del></del> -	358.
	(A) PTION OF PROPERTY CEBERNSTEIN HOLDI	<del></del>			A	MANNER CQUIRED RCHASED	DA' ACQU		DATE :	SOLD
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASI	s	(D) EXPENSE SALE	OF	(E) DEPRE	c.		(F)	ss
	46.		0.		0.		0.			46.
	GAINS DIVIDENDS						-		15,	0. 404.
	FORM 990-PF, F		6A	EREST FRO	OM S	ECURITIE	:	STA	15,	
TOTAL 1	FORM 990-PF, F	ART I, LINE	6A INT	EREST FRO		ECURITIE CAPITAL DIVIDE	GAINS	CO		2
FORM 99	FORM 990-PF, F	VIDENDS AND	6A INT	SS AMOUNT		CAPITAL	GAINS	CO	TEMENT LUMN (A	2

FORM 990-PF	OTHER	INCOME		STATEMENT	3
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTEI NET INCOI	
ALLIANCE BERNSTEIN HLDG LP	_	-263.	-263.		
TOTAL TO FORM 990-PF, PART I,	LINE 11 =	-263.	-263.		
FORM 990-PF	TA	XES		STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITA PURPOS	
FOREIGN TAXES FEDERAL INCOME TAXES	167 34,001				0.
TO FORM 990-PF, PG 1, LN 18	34,168	167	•		0.
FORM 990-PF	OTHER	EXPENSES		STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITA PURPOS	
MANAGEMENT FEES	2,421	2,421	•	· · ·	0.
TO FORM 990-PF, PG 1, LN 23	2,421	2,421	•		0.
FORM 990-PF OTHER INCREASE	S IN NET AS	SSETS OR FUND	BALANCES	STATEMENT	6
DESCRIPTION				AMOUNT	
PRIOR YEAR ADJUSTMENT - BASI	S ADJUSTME	٧T	_	4,7	91.
TOTAL TO FORM 990-PF, PART I	_		_		91.

FORM 990-PF CORE	PORATE STOCK		STATEMENT 7
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
INVESTMENT IN COMMON STOCKS	-	359,429.	
TOTAL TO FORM 990-PF, PART II, LINE	10B	319,578.	359,429.
FORM 990-PF OTHER	R INVESTMENTS		
	· INVESTMENTS		STATEMENT 8
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
DESCRIPTION	VALUATION	BOOK VALUE  0. 62,834. 4,541.	FAIR MARKET

Form 8868 (Rev. 1-2013)					Page 2	
● If you are filing for an Additional (Not Automatic) 3-Month Ex	tension. c	complete only Part II and check this	box		<b>▶</b> X	
Note. Only complete Part II if you have already been granted an a				3868.		
If you are filing for an Automatic 3-Month Extension, complete						
Part II Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no co	pies need	ied).	
					ee instructions	
Type or Name of exempt organization or other filer, see instru	ctions				n number (EIN) or	
print EDWARD & NANCY STAVIS CHARIT						
File by the FOUNDATION	04-294	12784				
	e date for Number, street, and room or suite no. If a P.O. box, see instructions.					
filing your return See 567 BOYLSTON STREET						
Instructions City, town or post office, state, and ZIP code For a fo	oreign add	lress, see instructions				
BROOKLINE, MA 02445						
Enter the Return code for the return that this application is for (file	a separa	te application for each return)			0 4	
				. <u> </u>	<u></u>	
Application	Return	Application			Return	
Is For	Code	Is For			Code	
Form 990 or Form 990-EZ	01					
Form 990-BL	02	Form 1041-A			08	
Form 4720 (individual)	03	Form 4720			09	
Form 990-PF	04	Form 5227			10	
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
Form 990-T (trust other than above)	06	Form 8870			12	
STOP! Do not complete Part II if you were not already granted	d an autor	matic 3-month extension on a prev	iously file	d Form 8868	3	
EDWARD & NANCY						
<ul> <li>The books are in the care of ► <u>567 BOYLSTON S</u></li> </ul>	TREET		2445			
Telephone No ► 617-482-6349		FAX No. ►			. —	
<ul> <li>If the organization does not have an office or place of busines</li> </ul>					<b>L</b>	
• If this is for a Group Return, enter the organization's four digit						
box ▶		ach a list with the names and EINs o	<u>f all memb</u>	ers the exten	ision is for	
<u> </u>	NOVEM	BER 15, 2013				
5 For calendar year $2012$ , or other tax year beginning		, and endin				
6 If the tax year entered in line 5 is for less than 12 months, o	check reas	son.	Final r	eturn		
Change in accounting period						
7 State in detail why you need the extension	~~		DECIT	DDD 80		
	GAT'HE	R THE INFORMATION	KEOOT	RED TO	FILE A	
COMPLETE AND ACCURATE RETURN.						
					<del></del>	
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, 6	enter the tentative tax, less any			2,433.	
nonrefundable credits. See instructions.			8a	\$	2,433.	
<b>b</b> If this application is for Form 990-PF, 990-T, 4720, or 6069,						
tax payments made. Include any prior year overpayment a	llowed as	a credit and any amount paid	01-		34,131.	
previously with Form 8868		the three formers of more recovered by the second	8b	\$	34,131.	
c Balance due. Subtract line 8b from line 8a Include your pa	-	th this form, ii required, by using	8c	\$	0.	
EFTPS (Electronic Federal Tax Payment System). See instructional Signature and Verifica		st be completed for Part II		Ι Φ		
Under penalties of perjury, I declare that I have examined this form, included it is true, correct, and complete, and that I am authorized to prepare this form.	dina accom	-	_	of my knowledg	je and belief,	
	Oi III.		_	_		
Signature Title		<del> </del>	Date			
				Form 8	<b>868</b> (Rev 1-2013)	

223842 01-21-13

Form 8868 (Rev 1-2013)					Page 2	
If you are filing for an Additional (Not Automatic) 3-Month Extended in the second secon	tension, c	complete only Part II and check this	s box		▶ X	
Note. Only complete Part II if you have already been granted an a				8868.	-	
• If you are filing for an Automatic 3-Month Extension, complet						
Part II Additional (Not Automatic) 3-Month Ex	xtensio	n of Time. Only file the origin	al (no c	opies need	led).	
		Enter filer's	identifyir	ng number, s	ee instructions	
Type or Name of exempt organization or other filer, see instruction	ctions		Employe	r identification	number (EIN) or	
print EDWARD & NANCY STAVIS CHARIT	<b>TABLE</b>					
File by the FOUNDATION		04-2942784				
due date for filing your Number, street, and room or suite no If a P.O. box, se	Social se	Social security number (SSN)				
eturn See 567 BOYLSTON STREET						
City, town or post office, state, and ZIP code For a form	oreign add	ress, see instructions.				
					<del> </del>	
Enter the Return code for the return that this application is for (file	e a separa	te application for each return)	-		0 4	
Application	Return	Application			Return	
ls For	Code	Is For			Code	
Form 990 or Form 990-EZ	01					
Form 990-BL	02	Form 1041-A	_		08	
Form 4720 (individual)	03	Form 4720			09	
Form 990-PF	04	Form 5227	<u> </u>		10	
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11			
Form 990-T (trust other than above)	06	Form 8870			12	
STOP! Do not complete Part II if you were not already granted			iously file	ed Form 8868	·	
EDWARD & NANCY						
• The books are in the care of • 567 BOYLSTON ST	<u> </u>		2445			
Telephone No. ► 617-482-6349		FAX No. >				
If the organization does not have an office or place of business					<b>P</b>	
If this is for a Group Return, enter the organization's four digit (     If the former of the group absolutes how become a fine or the first organization).	1	· · · · · · · · · · · · · · · · · · ·				
box If it is for part of the group, check this box If request an additional 3-month extension of time until		BER 15, 2013.	r all memb	ers the extens	SION IS TOY.	
4 I request an additional 3-month extension of time until		-	_			
6 If the tax year entered in line 5 is for less than 12 months, c			9 Final r	return		
Change in accounting period	HECK TEAS	on minarretum		etam		
7 State in detail why you need the extension						
	GATHE	R THE INFORMATION	REOUI	RED TO	FILE A	
COMPLETE AND ACCURATE RETURN.						
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069, e	nter the tentative tax, less any				
nonrefundable credits. See instructions.			8a	\$	2,433.	
b If this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated			_	
tax payments made. Include any prior year overpayment all	lowed as a	a credit and any amount paid				
previously with Form 8868.			8b	\$	34,131.	
c Balance due. Subtract line 8b from line 8a. Include your pa	ıyment wıt	h this form, if required, by using				
EFTPS (Electronic Federal Tax Payment System) See instru			8c	\$	0.	
		st be completed for Part II o	-			
Under penalties of perjury, I declare that I have examined this form, includ it is true, correct, and complete, and that I am authorized to prepare this for	ing accomp orm.	panying schedules and statements, and to	o the best o	of my knowledge	e and belief,	
Signature > Steph P. Houle Title >		PA	Date	× 8/1.	2//3	
				•	368 (Rev. 1-2013)	

223842 01-21-13