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Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust

Treated as a Private Foundation

OMB No 1545-0052

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

Open to Public Inspection

F	or ca	lendar year 2012 or tax year beginning			, 2012	and endi	ng		, 20
_		of foundation	-					A Employer identif	ication number
	KRU	PP FAMILY FOUNDATION						04-381287	'1
	Numb	er and street (or P O box number if mail is not delivere	d to street	address)		Room/suite	Ð	B Telephone numb	er (see instructions)
								(62	L7) 523-7722
	ONE	BEACON STREET, SUITE 1500				1500			
_	City o	r town, state, and ZIP code							
								C If exemption application pending, check here	ation is
	BOS	TON, MA 02108					_	, 3,	F
G	Che	ck all that apply: Initial return		Initial return	of a former p	ublic char	ıty	D 1 Foreign organiza	tions, check here . >
		Final return		Amended ref	turn		- 1	2. Foreign organiza	
_		Address change		Name chang	e			85% test, check loomputation	nere and attach
H	Che	eck type of organization X Section 501	· 					E If private foundation	n status was terminated
1	S	ection 4947(a)(1) nonexempt charitable trust		ther taxable pr				•	o)(1)(A), check here . D
I	Fair			method 🔀 Ca		rual		F If the foundation is	ın a 60-month termination
	-			ecify)				under section 507(b)(1)(B), check here . ►
_	,		· ·	(d) must be on	cash basis)				(d) Diaburaamanta
i	art	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)	(-, .	Revenue and	(b) Net inve	estment	(c) Adjusted net	(d) Disbursements for charitable
		may not necessarily equal the amounts in	ex	penses per books	incom		•	income	purposes
_		column (a) (see instructions))		_					(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule). If the foundation is not required to		500,000.					
	2	Check ► attach Sch B		76.		76.	_		AMCU 1
	3	Interest on savings and temporary cash investments		85,732	Q	5,732.			ATCH 1 ATCH 2
	4	Dividends and interest from securities		65,732.		3, 132.			AICH Z
		Gross rents							
		Net rental income or (loss)		60,003.					
ne		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 1 95 - 7 93.		60,003.					
/en		assets on line 6a				0,003.			
Revenue	7	Capital gain net income (from Part IV, line 2) .			0	0,003.			
	8	Net short-term capital gain							<u> </u>
	9 10 a	Income modifications · · · · · · · · · · · · · · · · · · ·							
		and allowances						·	
		Less Cost of goods sold .							<u>.</u>
	11	Gross profit or (loss) (attach schedule) Other income (attach schedule) EIVED.							
	12	Total. Add lines 1 through 11	10	645,811.	14	5,811.			
_	13	Compensation of officers, directors, trustees, etc.13	101	0					
		Other employee salaries and wages							
Ses	15	Pension plans, employee benefits:	12				-		
en	16 a	Pension plans, employee benefits: Legal fees (attach schedule DEN, U.T.						·	
Ĕ	b	Accounting fees (attach schedule)							
ve	c	Other professional fees (attach schedule)							
rati	17	Interest							
iist	18	Taxes (attach schedule) (see instructions) ATCH 3		1,625.					
nin	19	Depreciation (attach schedule) and depletion.		-					
۸d	20	Occupancy							
d	21	Travel, conferences, and meetings							
ğ	22	Printing and publications							
ŧΪ	23	Other expenses (attach schedule) $ATCH$, 4 ,		219.		219.			
3,5	24	Total operating and administrative expenses.							
ğ		Add lines 13 through 23		1,844.		219.			500 000
Ğ	25	Contributions, gifts, grants paid	<u></u>	500,000.					500,000
Ц	26_	Total expenses and disbursements Add lines 24 and 25		501,844.		219.			500,000.
2	14 15 16 a b c 17 18 19 20 21 22 23 24 25 26 27 a b	Subtract line 26 from line 12		140 000					
4	S a	Excess of revenue over expenses and disbursements $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	ļ	143,967.		E 500			
7		Net investment income (If negative, enter -0-)	<u></u>		14	5,592.			
1		Adjusted net income (if negative, enter -0-)	l						L

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	art II	Balance Shoots	Attached schedules and amounts in the	Beginning of year			of year	
نا	art II	Dalatice Streets	amounts only (See instructions)	(a) Book Value	(b) Book Value			Market Value
	1	Cash - non-interest-beari	ing				1	406,730
	2	•		12,186.	42,9	939.	<u> </u>	42,939
	3	Accounts receivable						
	4							
					_			
	5							
	6							
	·		•					
	7		,, , , , , , , , , , , , , , , , , , , ,					
S				-				
set								
As								
			· · · · · · · · · · · · · · · · · · ·					
i		•						
	11	Investments - land, buildings						
		Less accumulated deprecia	ation					
	12	•	loans					
		Investments - other (atta		2,671,841.	2,762,4	194.		2,762,494
	14	Land, buildings, and	•					
i		Less accumulated deprecia	ition >					
Not Assets or Fund Balances Liabilities	15	Other assets (describe	>					
		Cash - non-interest-bearing						
		·	·	2,844,957.	3,212,1	63.		3,212,163
	17	Accounts payable and a	ccrued expenses					-
တ္ဆ			1					
ij				250,000.			ATCH	6
펿								
إت								
		•						
	23	Total liabilities (add line	s 17 through 22)	250,000.		0		
		Foundations that foll	low SFAS 117, check here					
္တ								
ë	24	Unrestricted						
lan	25							
ä	26							
핕								
띡		check here and com	plete lines 27 through 31.					
힛	27			2,594,957.	3,212,1	63.		
ë	28		· · · · · · · · · · · · · · · · · · ·					
138	29							
뒿	30	Total net assets or fund	balances (see instructions)	2,594,957.	3,212,1	63.		
Ž	31							
-		instructions)		2,844,957.	3,212,1	63.		
P				Balances				
					must agree with			
						1_		2,594,957.
2						2		143,967.
3	Othe	r increases not include	ed in line 2 (itemize) ATCH 7			3		629,739.
4	Add I	ines 1, 2, and 3	, , , , , , , , , , , , , , , , , , , ,			4		3,368,663.
5	Decr	eases not included in l	line 2 (itemize) ► ATCH 8			5		156,500.
6	Total	net assets or fund ba	lances at end of year (line 4 minus l	ine 5) - Part II, column (b)), line 30	6		3,212,163.

Part IV Capital Gains and Losses for Tax on Investment Income

	d describe the kind(s) of property sold (orick warehouse, or common stock, 200		acquired P - Purchase	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
1a SEE PART IV SCHE		SIIS WILC CO')	D - Donation	(, day, y.)	
b					
c					
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) minu	
_a	_				
b					
С					
<u>d</u>			-		
Complete only for consts	showing gain in column (h) and owne	d by the foundation on 12/31/69			
Complete only for assets	(j) Adjusted basis	(k) Excess of col (i)		Gains (Col. (h) ga (k), but not less t	
(i) F M V. as of 12/31/69	as of 12/31/69	over col (j), if any		Losses (from co	
_a					
<u>b</u>					
d d					.
e e					
Capital gain net income or Net short-term capital gair	n or (loss) as defined in sections 12		2		60,003.
Part I, line 8	rt I, line 8, column (c) (see insti	<u></u>	3		0
	Under Section 4940(e) for Recommendations subject to the				
	the section 4942 tax on the distrib not qualify under section 4940(e)		ase perioc	12	Yes X No
	ount in each column for each year.		any entre	es	
(a) Base period years	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		(d) Distribution ra	
Calendar year (or tax year beginning in)	498,888.	3,017,345.		(col (b) divided by	0.165340
2011 2010	490,574.	2,959,569.			0.165759
2010	550,000.	2,786,258.	 		0.197397
2009	499,101.	3,320,126.	-		0.150326
2007	513,405.	3,740,864.		_	0.137242
		· · · · · · · · · · · · · · · · · · ·			
2 Total of line 1, column (d) 3 Average distribution ratio	for the 5-year base period - divide		2		0.816064
<u>-</u>	dation has been in existence if less	-	3		0.163213
4 Enter the net value of nor	ncharitable-use assets for 2012 from	m Part X, line 5	4		873,716.
5 Multiply line 4 by line 3			5		469,028.
6 Enter 1% of net investme	nt income (1% of Part I, line 27b)		6		1,456.
7 Add lines 5 and 6			7		470,484.
8 Enter qualifying distribution If line 8 is equal to or great			8		500,000.
	IIS HUIH FAILAH, IIIG 4	. 			300,000.

				
1	990-PF(2012) KRUPP FAMILY FOUNDATION 04-381	2871		Page 4
	990-PF (2012) RROPP FAMILY FOUNDATION 04-381 t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in			
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
ıa	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check		1,4	456.
_	here X and enter 1% of Part I, line 27b			
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of			
·	Part I, line 12, col. (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2		1,4	456.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			ō
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		1,4	456.
6	Credits/Payments	_		
	2012 estimated tax payments and 2011 overpayment credited to 2012 6a 1,430.			
b	Exempt foreign organizations - tax withheld at source 6b			
С	Tax paid with application for extension of time to file (Form 8868) 6c 2,000.			
d	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d		3,4	<u>430.</u>
8	Enter any penalty for underpayment of estimated tax. Check here 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	_		
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10	_	1,9	974.
11	Enter the amount of line 10 to be Credited to 2013 estimated tax ▶ 1,974 · Refunded ▶ 11			
	t VII-A Statements Regarding Activities			
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate		Yes	No
	or intervene in 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 the	l		x
	definition)?	1b		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities			x
	Did the foundation file Form 1120-POL for this year?	1c		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation \$ (2) On foundation managers \$	ŀ		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	ľ		
_	foundation managers > \$	2		х
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			
	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,			
3	or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		х
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
4 a	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
b E	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
5	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			
6	By language in the governing instrument, or			1
	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	Х	
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	X	

8a Enter the states to which the foundation reports or with which it is registered (see instructions)

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)

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8b

10

addresses

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

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, Form 4720, to determine if the

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 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 2012?

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

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Х

Х

3 b

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

Form 990-PF (2012) Page 7 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE 0 Total number of others receiving over \$50,000 for professional services Part IX-A **Summary of Direct Charitable Activities** List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of Expenses organizations and other beneficianes served, conferences convened, research papers produced, etc Summary of Program-Related Investments (see instructions) Amount Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 NONE All other program-related investments. See instructions 3 NONE

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Total. Add lines 1 through 3.

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Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	gn found	ations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	2,853,200.
b	Average of monthly cash balances	1b	64,278.
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	2,917,478.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	2,917,478.
4	Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	43,762.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,873,716.
6	Minimum investment return. Enter 5% of line 5	6	143,686.
Pa	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 p	art)	
1	Minimum investment return from Part X, line 6	1	143,686.
	Tax on investment income for 2012 from Part VI, line 5 2a 1,456.		
b			
c	Add lines 2a and 2b	2c	1,456.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	142,230.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	142,230.
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	142,230.
Pa	Irt XII Qualifying Distributions (see instructions)		
		<u> </u>	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	10	500,000.
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a 1b	300,000.
b	Program-related investments - total from Part IX-B	10	
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	20	
a	Suitability test (prior IRS approval required)	3a	-,,
b 4	Cash distribution test (attach the required schedule) Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	500,000.
4	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		300,000.
5	· · ·	5	1,456.
e	Enter 1% of Part I, line 27b (see instructions) Adjusted qualifying distributions. Subtract line 5 from line 4	6	498,544.
6	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calc		
	qualifies for the section 4940(e) reduction of tax in those years	Julatiliy W	mether the roundation

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	irt XIII Undistributed Income (see instri	ictions)			Page 3
Pa	Tr XIII Ondistributed income (see instit	(a)	(b)	(c)	(d)
1	Distributable amount for 2012 from Part XI,	Corpus	Years prior to 2011	2011	2012
	line 7				
2	Undistributed income, if any, as of the end of 2012				1
	Enter amount for 2011 only				
b	Total for prior years 20 10 ,20 09 ,20 08				
3	Excess distributions carryover, if any, to 2012 From 2007 321,755.				
а	From 2007				
b	From 2008				
С	From 2009				
d					
	710111 2011	1 704 214			
f	Total of lines 3a through e	1,764,314.			
4	Qualifying distributions for 2012 from Part XII,				
	line 4 ▶ \$ 500,000.				
а	Applied to 2011, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required - see instructions)				
C	Treated as distributions out of corpus (Election required - see instructions)				
d	Applied to 2012 distributable amount				142,230.
	Remaining amount distributed out of corpus	357,770.		· ·	
5	Excess distributions carryover applied to 2012				
	(If an amount appears in column (d), the same				
c	amount must be shown in column (a)) Enter the net total of each column as				
6	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,122,084.			
	Prior years' undistributed income Subtract				
D	line 4b from line 2b				
С	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				
a	Subtract line 6c from line 6b Taxable amount - see instructions				
е	Undistributed income for 2011 Subtract line				
	4a from line 2a Taxable amount - see		1		
	Instructions				
f	Undistributed income for 2012 Subtract lines				
	4d and 5 from line 1. This amount must be				
_	distributed in 2013				
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	321,755.			
	applied on line 5 or line 7 (see instructions)	321,733.			
9	Excess distributions carryover to 2013.	1,800,329.			
	Subtract lines 7 and 8 from line 6a	1,000,329.			
	Analysis of line 9 Excess from 2008 334,893.	ŀ	}		1
	411 072				
	Excess from 2009 411, 973.	Ī			
	Excess from 2010 345, 448.				
	Excess from 2011 350, 245.				
<u>e</u>	Excess from 2012				
					Form 990-PF (2012)

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Part XV Supplementary Information				
3 Grants and Contributions Paid Dur	Ing the rear or Appi	Foundation		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year SEE ATTACHEMENT #10				500,000
Total			▶ 3a	500,000
b Approved for future payment				
Total				
Total	 	<u></u>		<u> </u>

Part XVI-A Analysis of Income-Produ			T=		(0)
Enter gross amounts unless otherwise indicated	(a)	business income (b)	(c)	/ section 512, 513, or 514 (d)	(e) Related or exempt function income
1 Program service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
a	<u> </u>				
b	ļ		-		
c					
d				- 	
e					· ·
					
g Fees and contracts from government agencies	- -				
2 Membership dues and assessments	522100	76.			
3 Interest on savings and temporary cash investments	522100	85,732.			
4 Dividends and interest from securities5 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	523000	60,003.	T		
8 Gain or (loss) from sales of assets other than inventory		<u> </u>			
Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory.	 				
11 Other revenue a			-		
b				· · · · · · · · · · · · · · · · · · ·	
c	 				
d					 -
e					
12 Subtotal Add columns (b), (d), and (e)		145,811.	 		
Line No. Explain below how each activit accomplishment of the foundation					
	_ 				
			·		
					
				· - · ·· -	
					
					
		- <u></u>			
		<u> </u>			
		- <u>-</u>			
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Information Regarding Transfers To and Transactions and Relationships With Noncharitable

		Exempt Organ	nzations											
1	Did the	organization direct	ly or indirectly	engage in any	of the followin	g wi	th any othe	er orga	ınızatıd	on des	cribed		Yes	No
	ın secti	ion 501(c) of the Co	de (other than	section 501(c)(3) organization	ns) oi	r in section	527, 1	relating	g to po	olitical			
		zations?	•											
	_	ers from the reportin	a foundation to	a noncharitat	ole exempt organ	nizatı	on of							
											1a(1)		Х	
		ner assets										1a(2)		Х
	• •	ransactions				• • •								
			naharitahla ayar	nnt organizatio	ND.							1b(1)		х
		es of assets to a no												x
		chases of assets fro										1b(2)		X
		ntal of facilities, equi										1b(3)	-	X
		mbursement arrange										1b(4)		X
		ans or Ioan guarantee										1b(5)		X
		rformance of service		•	-									
		g of facilities, equipn												Х
d	If the a	answer to any of th	e above is "Ye	s," complete ¹	the following so	ched	ule Colum	n (b) s	should	alway	s show	the	fair m	arket
	value c	of the goods, other	assets, or servi	ces given by	the reporting fo	unda	ition If the	found	lation	receive	ed less	than	fair m	arket
	value 11	n any transaction or	sharing arrang	ement, show	ın column (d) t	he v	alue of the	goods	s, othe	r asset	ts, or se	ervice	s rece	eived
(a) Lı	ne no	(b) Amount involved	(c) Name of n	oncharitable exem	npt organization	(0	d) Description	of transf	ers, tran	sactions	, and shan	ng arra	ngemer	nts
		N/A				N	/A				_			
	[-				 -									
								_						
	<u> </u>					 								
	<u> </u>													
-	-													
								_						
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						<u> </u>								
2a	Is the	foundation directly	or indirectly aff	iliated with, c	or related to, on	e or	more tax-	exempl	t orga	nizatio	ns _			_
		ped in section 501(c)										Ye	es 🛚 X	No
		," complete the follow	•											
	. , , , , ,	(a) Name of organization		(b) Ty	pe of organization			((c) Desc	ription o	f relations	hip		
		· · · · · · · · · · · · · · · · · · ·												
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	T.,,,,,,		use that I have evenue	and thus roturn und	luding accompanying s	chodule	as and statemen	te and t	o the he	est of my	knowledo	e and h	elief it	is thie
Sian	correc	penalties of penury, I declar t, and complete Declaration of	preparer (other than ta	ed this return, ind	all information of which	prepar	er has any knowl	edge	o the be	,3t or my	Kilowicag		Clioi, it	15 (140,
Sign		7411	←	- · · · · · //	15/12		1.1	_		May	the IRS			
dere		()())//			7/10		() again	<u> </u>		_ with	•		shown	
	Sign	nature of officer of trustee		Date	-	Title				(see	instructions	i)? <u> </u>	Yes	N ₀
							150		-		1 1-	TIN		
Paid		Print/Type preparer's	name	Preparers	signature	<u> </u>	Date Maria	ÿ 16		Check	111	TIN	06	
		Claire	1 manzi			_	• 1A	, , ,	7013 3	self-em	ployed I	013	<u>8943</u>	31
	arer	1 111110 1101110	E BERKSHIR			_			Firm's	EIN ▶				
Jse	Only	Firm's address ▶ ON	E BEACON S	TREET, SU	ITE 1500									
		02108 Ph				Phone no 617-556-1513								

Schedule B

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

Department of the Treasury
Internal Revenue Service
Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

201**2**

Employer identification number

KRUPP FAMILY FOUNDATION 04-3812871 Organization type (check one) Filers of: Section: 501(c)() (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 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 1/3 % 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, total 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 ill 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 total 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 on line H of its Form 990-EZ or on Part I, 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)

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 KRUPP FAMILY FOUNDATION

Employer identification number 04-3812871

Part I	Contributors (see instructions) Use duplicate copies of	Part I if additional space is need	ded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1 _	SEE ATTACHEMENT #11	\$ <u>500,000.</u>	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)
(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 KRUPP FAMILY FOUNDATION

Employer identification number 04-3812871

Part II	Noncash Property (see instructions) Use duplicate copies of P	art II if additional space is ne	eded
(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
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Employer identification number 04-3812871

Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total 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. (c) Use of gift (d) Description of how gift is held from (b) Purpose of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (c) Use of gift from (b) Purpose of gift (d) Description of how gift is held Part 1 (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

KRUPP FAMILY FOUNDATION

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

<i>UI</i>	APITAL GA	INS AND LO	22E2 FOI	R IAX UN	INAE21		ENT INCOM	
Kind of Property		Description					Date acquired	Date sold
Gross sale	Depreciation	Cost or	FMV	Adj basis	Excess of	Н	Gain	
price less expenses of sale	allowed/ allowable	other	as of	as of 12/31/69	FMV over		or	
expenses of sale	allowable	basis	12/31/69	12/31/69	adı basıs	H	(loss)	
		MOMAT CART	אד כאדאי הדכ	mp t primt \No			55,089.	
		TOTAL CAPIT	AL GAIN DIS	TRIBUTIONS		П	55,069.	
ļ		J				П		
						П		
		TIFF_MULTI A				P	01/03/2006	12/21/2012
		PROPERTY TY	PE: SECURIT	'IES				
140,704.		135,790.					4,914.	
						11		
] [
						$\ \ $		
OTAL GAIN(I	oss)					П	60,003.	•
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- INTEREST ON TEMPORARY CASH INVESTMENTS PART I FORM 990PF,

NET INVESTMENT INCOME	76.	76.
REVENUE AND EXPENSES PER BOOKS	76.	76.
DESCRIPTION	CITIZENS BANK MONEY MARKET ACCOUNT	TOTAL

ATTACHMENT 1

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

	NET	INVESTMENT	INCOME	85,732.	85,732.
REVENUE	AND	EXPENSES	PER BOOKS	85,732.	85,732.
					TOTAL
			DESCRIPTION	TIFF FUND	

ATTACHMENT 2

FORM 990PF, PART I - TAXES

REVENUE

AND

EXPENSES

PER BOOKS

DESCRIPTION

125.

MA STATE FEE

FEDERAL TAXES

1,500.

TOTALS

1,625.

- OTHER EXPENSES PART I FORM 990PF,

DESCRIPTION BANK FEES CITIZEN BANK

REVENUE AND EXPENSES PER BOOKS

NET INVESTMENT INCOME

TOTALS

219.

219.

ATTACHMENT 4

TIFF MUTUAL FUND

ENDING BOOK VALUE

ENDING

2,762,494. 2,762,494.

2,762,494.

2,762,494.

TOTALS

GK 04-3812871

ATTACHMENT 5

FORM 990PF, PART II - LOANS FROM OFFICERS, DIRECTORS, ETC.

LENDER: GEORGE KRUPP

ORIGINAL AMOUNT: 250,000.

REPAYMENT TERMS:

ON DEMAND PAYMENT

BEGINNING BALANCE DUE

250,000.

TOTAL BEGINNING LOANS FROM OFFICERS, DIRECTORS, ETC.

<u> 250,000.</u>

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

DESCRIPTION		AMOUNT
CONTRIBUTIONS PAID NOT CLEARED UNREALIZED GAIN - TIFF		404,000. 225,739.
	TOTAL	629,739.

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

<u>DESCRIPTION</u> <u>AMOUNT</u>

PRIOR PERIOD CONTRIBUTION CLEARED

156,500.

TOTAL

156,500.

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I	ME
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l	ATT

	0	0	0
	0	0	0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	TRUSTEE	TRUSTEE	TRUSTEE
NAME AND ADDRESS	GEORGE KRUPP ONE BEACON STREET, SUITE 1500 BOSTON, MA 02108	LIZBETH KRUPP ONE BEACON STREET, SUITE 1500 BOSTON, MA 02108	LAWRENCE I. SILVERSTEIN 150 FEDERAL STREET BOSTON, MA 02110

GRAND TOTALS

ATTACHMENT 9

SCHEDULE D (Form 1041)

Capital Gains and Losses

OMB No 1545-0092

Employer identification number

Department of the Treasury Internal Revenue Service Name of estate or trust

► Attach to Form 1041, Form 5227, or Form 990-T.
► Information about Schedule D (Form 1041) and its separate instructions is at www.irs.gov/form1041.

	KRUPP FAMILY FOUNDATION				04-38128	71	
Note	e: Form 5227 filers need to complete only Pa						-
Pa	t I Short-Term Capital Gains and Lo	sses - Assets	Held One Ye	ear or Less	<u> </u>		
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo, day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other (see instruction		(f) Gain or (loss) for the entire year Subtract (e) from (d)
1a							
		<u> </u>					<u> </u>
			· · · · · · · · · · · · · · · · · · ·				
b	Enter the short-term gain or (loss), if any,	from Schedule D	-1, line 1b			1b	
2	Short-term capital gain or (loss) from Forr	ns 4684, 6252, (6781, and 882	4		2	
3	Net short-term gain or (loss) from partners	ships. S corporat	tions, and other	estates or trusts		3	
4	Short-term capital loss carryover Enter	the amount, if	f any, from li	ne 9 of the 2011	Capital Loss		(
5	Carryover Worksheet Net short-term gain or (loss). Combine	lines 1a throug	jh 4 in colum	n (f) Enter here an	d on line 13,	4	,
	column (3) on the back		Hold More T	han One Veer	<u></u> ▶	5	
Pa	· · · · · · · · · · · · · · · · · · ·	1		nan One Year	1		(f) Gain or (loss) for
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo, day, yr)	(c) Date sold (mo , day, yr)	(d) Sales pnce	(e) Cost or other to (see instruction		the entire year Subtract (e) from (d)
6a							
	···						· · · · · · · · · · · · · · · · · · ·
b	Enter the long-term gain or (loss), if any, fr	om Schedule D-	1, line 6b			6b	4,914.
7	Long-term capital gain or (loss) from Form	ns 2439, 4684, 6	3252, 6781, an	d 8824		7	
8	Net long-term gain or (loss) from partnersl					8	
							FF 000
9	Capital gain distributions					9	55,089.
10 11	Gain from Form 4797, Part I Long-term capital loss carryover Enter	the amount of	any from lin		Capital Loss	10	
• •	Carryover Worksheet Net long-term gain or (loss). Combine liii		any, 110111 1111		Capital LOSS	11	()
12	Net long-term gain or (loss). Combine lin column (3) on the back				I	12	60,003.
For F	Paperwork Reduction Act Notice, see the Instru	ctions for Form 10)41.				D (Form 1041) 2012

Pa	rt III Summary of Parts I and II		(1) Beneficiaries'	(2) Es		(3) Total
	Caution: Read the instructions before completing this par	rt	(see instr)	or tr	ust's	(0) Total
13	Net short-term gain or (loss)1	3			_	
14	Net long-term gain or (loss):					60,000
а	Total for year 14					60,003.
	Unrecaptured section 1250 gain (see line 18 of the wrksht)	$\overline{}$			-	
	28% rate gain					60,003.
	Total net gain or (loss). Combine lines 13 and 14a ▶ 11 e: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or		m 990-T Part I line	(a) If lines	14a ai	
gains	s, go to Part V, and do not complete Part IV If line 15, column (3), is a net l	loss	complete Part IV an	d the Capi	tal Los	s Carryover Worksheet, a
	ssary					
	rt IV Capital Loss Limitation Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part	Llo	o 40 if a trust), the ex	maller of		
					16	()
Note	e: If the loss on line 15. column (3), is more than \$3,000. or if Form 1041, pag	je i	, line 22 (or Form 99	0-T, line 34), <i>is</i> a	loss, complete the Capital
	Carryover Worksheet in the instructions to figure your capital loss carryover					
	Tax Computation Using Maximum Capital Gains Rates	- "	3)		4	d in Dant Lan Dant II and
	n 1041 filers. Complete this part only if both lines 14a and 15 in column			mount is e	entere	o in Part I or Part II and
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more th tion: Skip this part and complete the Schedule D Tax Worksheet in the insti					
	ither line 14b, col (2) or line 14c, col (2) is more than zero, or					
B	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero					
	n 990-T trusts. Complete this part only if both lines 14a and 15 are o					
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part and	d co	emplete the Sched u	ile D Tax \	Vorks	heet in the instructions
if eit	her line 14b, col (2) or line 14c, col (2) is more than zero					
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)		. 17			
18	Enter the smaller of line 14a or 15 in column (2)					
	but not less than zero		_			
19	Enter the estate's or trust's qualified dividends					
	from Form 1041, line 2b(2) (or enter the qualified					
	dividends included in income in Part I of Form 990-T) . 19		-			
20	Add lines 18 and 19					
21	If the estate or trust is filing Form 4952, enter the					
22	amount from line 4g, otherwise, enter -0 ▶ 21 Subtract line 21 from line 20 If zero or less, enter -0				}	
22 23	Subtract line 21 from line 20 if zero or less, enter -0-		23			
23	Subtract line 22 from line 17 in zero or less, enter 20	• •	. 23			
24	Enter the smaller of the amount on line 17 or \$2,400		24			
- · 25	Is the amount on line 23 equal to or more than the amount on line 24?	• •	·			
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box					
	No. Enter the amount from line 23		25			
26	Subtract line 25 from line 24			-		
27	Are the amounts on lines 22 and 26 the same?					
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line 22		27			
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		. 28			
					i	
29	Subtract line 28 from line 27		. 29		ĺ	
30	Multiply line 29 by 15% (15)	•. •		: : -	30	
31	Figure the tax on the amount on line 23 Use the 2012 Tax Rate So					
	(see the Schedule G instructions in the instructions for Form 1041)				31	
	Add lines 20 and 21				20	
32	Add lines 30 and 31	 cho	dule for Estatos or	d Truete	32	
33	(see the Schedule Ginstructions in the instructions for Form 1041)				33	
34	Tax on all taxable income. Enter the smaller of line 32 or line 33 here				33	
· - •	G, line 1a (or Form 990-T, line 36)				34	
					U-7 I	

Schedule D (Form 1041) 2012

Schedule D (Form 1041) 2012

Page 2

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

Employer identification number 04-3812871

Part II	Long-Term Capital Gains and Losses - Assets Held More Than One Year						
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)	
———— 6а ТТГ	F MULTI ASSET FUND	01/03/2006	12/21/2012	140,704.	135,790.	4,914	
	1_110B1_1100B1_1010	01/03/2000	12/21/2012	140,704.	133,730.	4,514	
			<u> </u>				
	· · · · · · · · · · · · · · · · · · ·						

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= ::				-		 	
ib Total	. Combine the amounts in column	(f) Enter here and	on Schedule D, line	e 6b		4,914.	

Form **8868**

(Rev January 2013)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

File a separate application for each return.

internal Revenue	e Service	ocparate a	pphoanon for caon return.		_	
	filing for an Automatic 3-Month Extension,				► X	
-	filing for an Additional (Not Automatic) 3-M				_	
•	plete Part II unless you have already been gra					
a corporation 8868 to req Return for instructions)	ling (e-file). You can electronically file Form n required to file Form 990-T), or an addition puest an extension of time to file any of the Transfers Associated With Certain Personal For more details on the electronic filing of the	nal (not au forms liste al Benefit nis form, vi	tomatic) 3-month exter ed in Part I or Part II w Contracts, which mus sit www.irs.gov/efile an	nsion of time You can electronical with the exception of Form 8870, it be sent to the IRS in paper of a click on e-file for Charities & Non	lly file Form Information format (see	
Part I Au	tomatic 3-Month Extension of Time. Or	nly submit	original (no copies n	eeded).		
A corporatio	n required to file Form 990-T and requesting	an automa	atıc 6-month extension	- check this box and complete		
Part I only .					▶∐	
All other cor	porations (including 1120-C filers), partnersh	ips, REMIC	Cs, and trusts must use i	Form 7004 to request an extension (of time	
to file incom		- Atrications		Enter filer's identifying number, se		
Type or	Name of exempt organization or other filer, see in	istructions		Employer identification number (EIN)	or	
print	KRUPP FAMILY FOUNDATION			04-3812871		
File by the	Number, street, and room or suite no. If a P.O. bo	x see instru	ctions	Social security number (SSN)		
due date for	ONE BEACON STREET, SUITE 150		500000	Social security number (SSN)		
filing your return See	City, town or post office, state, and ZIP code For		dress, see instructions	1		
instructions	BOSTON, MA 02108	J				
Enter the Re	eturn code for the return that this application	is for (file a	separate application for	or each return)	. 0 4	
Application		Return	Application		Return	
Is For		Code	ls For		Code	
Form 990 or	Form 990-EZ	01	Form 990-T (corporat	ion)	07	
Form 990-BL		02	Form 1041-A		08	
Form 4720-	(ındıvıdual)	03	Form 4720	Form 4720		
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	
Telephone If the orga If this is for the whole a list with the until for the	e names and EINs of all members the extensions and automatic 3-month (6 months for a cor	ousiness in ur digit Gro it is for pa on is for poration reexempt org	rup Exemption Number (int of the group, check to a second control of the group, check to a second control of the group and ending	(GEN)	ach	
3a If this a	hange in accounting period application is for Form 990-BL, 990-PF, 99			tentative tax, less any		
	indable credits. See instructions	4700	0000	3a \$	3,430.	
estimat	application is for Form 990-PF, 990-T, ed tax payments made. Include any prior yea	r overpaym	ent allowed as a credit	3b \$	1,430.	
	e due. Subtract line 3b from line 3a. Include		ent with this form, if re		2 000	
	onic Federal Tax Payment System) See instruit in are going to make an electronic fund withdrawal		orm 8868 see Form 9452	EO and Form 8879-EO for payment in	2,000.	
	ct and Paperwork Reduction Act Notice, see Instr		ліп 0000, з ес гонії 0453-		(Rev 1-2013)	
	• • • • • • • • • • • • • • • • • • • •				,	