

# See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



#### DLN: 93491280001024

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

# **Return of Private Foundation** or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter Social Security numbers on this form as it may be made public. By law, the IRS cannot redact the information on the form.
► Information about Form 990-PF and its instructions is at <a href="https://www.irs.gov/form990pf">www.irs.gov/form990pf</a>.

Open to Public Inspection

|                |                | ndar year 2013, or tax year beginning 01-                                                                                    | 01-2013 , and                                         | lend  | ling 12-31-                                  |                                               |                                                |  |  |
|----------------|----------------|------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|-------|----------------------------------------------|-----------------------------------------------|------------------------------------------------|--|--|
|                |                | indation<br>S FAMILY FOUNDATION                                                                                              |                                                       |       | A Employer identification number  04-3523698 |                                               |                                                |  |  |
|                |                |                                                                                                                              |                                                       |       |                                              |                                               |                                                |  |  |
|                |                | street (or P O box number if mail is not delivered to street address<br>IES AVE NO 740                                       | s) Room/suite                                         |       | ·                                            | ımber (see ınstructıoı                        | ns)                                            |  |  |
|                |                |                                                                                                                              |                                                       |       | (617) 933-3620                               | )                                             |                                                |  |  |
|                |                | , state or province, country, and ZIP or foreign postal code<br>A 02116                                                      | C If exemption application is pending, check here ▶ 「 |       |                                              |                                               |                                                |  |  |
| <b>.</b> .     | heck a         | all that apply                                                                                                               | f a former public chai                                | atv   | <b>D 1</b> Foreign of                        | rganizations, check h                         | ere L                                          |  |  |
| G C            | neek a         | Final return Amended retu                                                                                                    | •                                                     | icy   |                                              | rganizations, check in                        | •                                              |  |  |
|                |                | Address change Name change                                                                                                   |                                                       |       | check her                                    | e and attach comput                           | ation                                          |  |  |
| _              |                | pe of organization Section 501(c)(3) exempt prival 4947(a)(1) nonexempt charitable trust Other taxa                          |                                                       | n     |                                              | undation status was t<br>n 507(b)(1)(A), chec | . —                                            |  |  |
|                |                | xet value of all assets at end  J Accounting method                                                                          |                                                       |       | F If the found:                              | ation is in a 60-mont                         | h termination                                  |  |  |
| of '           | year <i>(f</i> | From Part II, col. (c),  \$ 2,751,393  Chart I, column (d) must                                                              |                                                       |       |                                              | n 507(b)(1)(B), chec                          | . —                                            |  |  |
| Pa             | rt I           | Analysis of Revenue and Expenses (The                                                                                        |                                                       |       |                                              |                                               | (d) Disbursements                              |  |  |
|                |                | total of amounts in columns (b), (c), and (d) may not<br>necessarily equal the amounts in column (a) (see<br>instructions) ) | (a) Revenue and<br>expenses per<br>books              | (b) N | let investment<br>income                     | (c) Adjusted net<br>income                    | for chantable<br>purposes<br>(cash basis only) |  |  |
|                | 1              | Contributions, gifts, grants, etc , received (attach schedule)                                                               | 500,000                                               |       |                                              |                                               |                                                |  |  |
|                | 2              | Check ► ☐ If the foundation is <b>not</b> required to attach                                                                 |                                                       |       |                                              |                                               |                                                |  |  |
|                | 3              | Sch B Interest on savings and temporary cash investments                                                                     |                                                       |       |                                              |                                               |                                                |  |  |
|                | 4              | Dividends and interest from securities                                                                                       | 44,603                                                |       | 44,603                                       |                                               |                                                |  |  |
|                | 5a             | Gross rents                                                                                                                  |                                                       |       |                                              |                                               |                                                |  |  |
|                | ь              | Net rental income or (loss)                                                                                                  |                                                       |       |                                              |                                               |                                                |  |  |
| Φ.             | 6a             | Net gain or (loss) from sale of assets not on line 10                                                                        | 23,970                                                |       |                                              |                                               |                                                |  |  |
| Revenue        | ь              | Gross sales price for all assets on line 6a<br>1,761,752                                                                     |                                                       |       |                                              |                                               |                                                |  |  |
| \$             | 7              | Capital gain net income (from Part IV, line 2)                                                                               |                                                       |       | 258,458                                      |                                               |                                                |  |  |
|                | 8              | Net short-term capital gain                                                                                                  |                                                       |       |                                              |                                               |                                                |  |  |
|                | 9              | Income modifications                                                                                                         |                                                       |       |                                              |                                               |                                                |  |  |
|                | 10a            | Gross sales less returns and allowances                                                                                      |                                                       |       |                                              |                                               |                                                |  |  |
|                | ь              | Less Cost of goods sold                                                                                                      |                                                       |       |                                              |                                               |                                                |  |  |
|                | c              | Gross profit or (loss) (attach schedule)                                                                                     |                                                       |       |                                              |                                               |                                                |  |  |
|                | 11             | Other income (attach schedule)                                                                                               |                                                       |       |                                              |                                               |                                                |  |  |
|                | 12             | Total. Add lines 1 through 11                                                                                                | 568,573                                               |       | 303,061                                      |                                               |                                                |  |  |
|                | 13             | Compensation of officers, directors, trustees, etc                                                                           | 0                                                     |       | 0                                            |                                               | 0                                              |  |  |
|                | 14             | Other employee salaries and wages                                                                                            |                                                       |       |                                              |                                               |                                                |  |  |
| Š.             | 15             | Pension plans, employee benefits                                                                                             |                                                       |       |                                              |                                               |                                                |  |  |
| Ψ              | 16a            | Legal fees (attach schedule)                                                                                                 |                                                       |       |                                              |                                               |                                                |  |  |
| Expenses       | l              | Accounting fees (attach schedule)                                                                                            | Ø <b>⊆</b> 20.640                                     |       | 20.640                                       |                                               |                                                |  |  |
|                |                | Other professional fees (attach schedule)                                                                                    | 20,640                                                |       | 20,640                                       |                                               | 0                                              |  |  |
| ē.             | 17             | Interest                                                                                                                     | <b>₩</b> 500                                          |       | 500                                          |                                               | 0                                              |  |  |
|                | 18             | Taxes (attach schedule) (see instructions)                                                                                   | 500                                                   |       | 300                                          |                                               | , o                                            |  |  |
| 틀              | 19<br>20       | Depreciation (attach schedule) and depletion Occupancy                                                                       |                                                       |       |                                              |                                               |                                                |  |  |
| Administrative | 21             | Travel, conferences, and meetings                                                                                            |                                                       |       |                                              |                                               |                                                |  |  |
| and            | 22             | Printing and publications                                                                                                    |                                                       |       |                                              |                                               |                                                |  |  |
|                | 23             | Other expenses (attach schedule)                                                                                             | <b>%</b> 8,517                                        |       | 8,517                                        |                                               | 0                                              |  |  |
| Ħ.             | 24             | Total operating and administrative expenses.                                                                                 | · ·                                                   |       | •                                            |                                               |                                                |  |  |
| Operating      |                | Add lines 13 through 23                                                                                                      | 29,657                                                |       | 29,657                                       |                                               | 0                                              |  |  |
| ô              | 25             | Contributions, gifts, grants paid                                                                                            | 1,492,500                                             |       |                                              |                                               | 1,492,500                                      |  |  |
|                | 26             | Total expenses and disbursements. Add lines 24 and 25                                                                        | 1,522,157                                             |       | 29,657                                       |                                               | 1,492,500                                      |  |  |
|                | 27             | Subtract line 26 from line 12                                                                                                |                                                       |       |                                              |                                               |                                                |  |  |
|                | a              | Excess of revenue over expenses and disbursements                                                                            | -953,584                                              |       |                                              |                                               |                                                |  |  |
|                | ь              | Net investment income (If negative, enter -0-)                                                                               |                                                       |       | 273,404                                      |                                               |                                                |  |  |
|                | c              | Adjusted net income (If negative, enter -0-)                                                                                 |                                                       |       |                                              |                                               |                                                |  |  |

| Pa                   | rt II | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions) | (a) Book Value          | (b) Book Value   | (c) Fair Market Value |
|----------------------|-------|-----------------------------------------------------------------------------------------------------------------------------------|-------------------------|------------------|-----------------------|
|                      | 1     | Cash—non-interest-bearing                                                                                                         | 606,326                 |                  |                       |
|                      | 2     | Savings and temporary cash investments                                                                                            | ·                       | ,                | <u> </u>              |
|                      | _     |                                                                                                                                   | 75,070                  | 30,333           | 30,333                |
|                      | 3     | Accounts receivable -                                                                                                             |                         |                  |                       |
|                      |       | Less allowance for doubtful accounts -                                                                                            |                         |                  |                       |
|                      | 4     | Pledges receivable                                                                                                                |                         |                  |                       |
|                      |       | Less allowance for doubtful accounts -                                                                                            |                         |                  | _                     |
|                      | 5     | Grants receivable                                                                                                                 |                         |                  |                       |
|                      | 6     | Receivables due from officers, directors, trustees, and other                                                                     |                         |                  |                       |
|                      |       | disqualified persons (attach schedule) (see instructions)                                                                         |                         |                  |                       |
|                      | 7     | Other notes and loans receivable (attach schedule) 🟲                                                                              |                         |                  |                       |
|                      |       | Less allowance for doubtful accounts 🕨                                                                                            |                         |                  |                       |
| v.                   | 8     | Inventories for sale or use                                                                                                       |                         |                  | _                     |
| sets                 | 9     | Prepaid expenses and deferred charges                                                                                             |                         |                  |                       |
| Д5.                  |       | Investments—U S and state government obligations (attach schedule)                                                                |                         |                  |                       |
| •                    |       | Investments—corporate stock (attach schedule)                                                                                     |                         |                  | _                     |
|                      |       | Investments—corporate bonds (attach schedule)                                                                                     |                         |                  |                       |
|                      |       | Investments—land, buildings, and equipment basis                                                                                  |                         |                  |                       |
|                      | 11    |                                                                                                                                   |                         |                  |                       |
|                      |       | Less accumulated depreciation (attach schedule)                                                                                   |                         |                  |                       |
|                      |       | Investments—mortgage loans                                                                                                        |                         |                  |                       |
|                      |       | Investments—other (attach schedule)                                                                                               |                         |                  |                       |
|                      | 14    | Land, buildings, and equipment basis 🟲                                                                                            |                         |                  |                       |
|                      |       | Less accumulated depreciation (attach schedule) -                                                                                 |                         |                  |                       |
|                      | 15    | Other assets (describe 🟲)                                                                                                         | 2,635,076               | 1,978,470        | 2,163,955             |
|                      | 16    | <b>Total assets</b> (to be completed by all filers—see the                                                                        |                         |                  |                       |
|                      |       | ınstructions Also, see page 1, item I)                                                                                            | 3,320,072               | 2,565,908        | 2,751,393             |
|                      | 17    | Accounts payable and accrued expenses                                                                                             |                         |                  |                       |
|                      | 18    | Grants payable                                                                                                                    |                         |                  |                       |
| S.                   | 19    | Deferred revenue                                                                                                                  |                         |                  |                       |
| Ittes                | 20    | Loans from officers, directors, trustees, and other disqualified persons                                                          |                         |                  |                       |
| ā                    | 21    | Mortgages and other notes payable (attach schedule)                                                                               |                         |                  |                       |
|                      | 22    | Other liabilities (describe 🟲)                                                                                                    |                         |                  |                       |
|                      |       |                                                                                                                                   |                         |                  |                       |
|                      | 23    | Total liabilities (add lines 17 through 22)                                                                                       | 0                       | 0                |                       |
|                      |       | Foundations that follow SFAS 117, check here 🕨 🦵                                                                                  |                         |                  |                       |
|                      |       | and complete lines 24 through 26 and lines 30 and 31.                                                                             |                         |                  |                       |
| ě                    | 24    | Unrestricted                                                                                                                      |                         |                  |                       |
| an(                  | 25    | Temporarily restricted                                                                                                            |                         |                  |                       |
| 33                   | 26    | Permanently restricted                                                                                                            |                         |                  |                       |
| <b>Fund Balances</b> |       | Foundations that do not follow SFAS 117, check here 🕨 🔽                                                                           |                         |                  |                       |
| Ξ                    |       | and complete lines 27 through 31.                                                                                                 |                         |                  |                       |
| or F                 | 27    | Capital stock, trust principal, or current funds                                                                                  | 0                       | 0                |                       |
|                      | 28    | Paid-in or capital surplus, or land, bldg, and equipment fund                                                                     | 0                       | 0                |                       |
| Assets               | 29    | Retained earnings, accumulated income, endowment, or other funds                                                                  | 3,320,072               | 2,565,908        |                       |
| 455                  | 30    | Total net assets or fund balances (see page 17 of the                                                                             | 3,320,072               | 2,303,300        |                       |
| Net                  | 30    | Instructions)                                                                                                                     | 3,320,072               | 2,565,908        |                       |
| Ż                    | 24    | Total liabilities and net assets/fund balances (see page 17 of                                                                    | 3,320,072               | 2,303,300        |                       |
|                      | 31    |                                                                                                                                   | 3,320,072               | 2,565,908        |                       |
|                      |       | the instructions)                                                                                                                 | 3,320,072               | 2,303,300        |                       |
| Pa                   | rt II | Analysis of Changes in Net Assets or Fund Balances                                                                                |                         |                  |                       |
| 1                    |       | Total net assets or fund balances at beginning of year—Part II, column                                                            | (a), line 30 (must a    | gree             |                       |
|                      |       | with end-of-year figure reported on prior year's return)                                                                          |                         | 1                | 3,320,072             |
| 2                    |       | Enter amount from Part I, line 27a                                                                                                |                         | 2                | -953,584              |
| 3                    |       | Other increases not included in line 2 (itemize)                                                                                  |                         |                  | 199,420               |
| 4                    |       | Add lines 1, 2, and 3                                                                                                             |                         | 4                | 2,565,908             |
| 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)—l                                                          | Part II, column (b), lı | ne 30 . <b>6</b> | 2,565,908             |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ne kınd(s) of property sold (e g , re<br>use, or common stock, 200 shs M                                                                                                                                                                                          | (b) How acquired P—Purchase D—Donation                                                                                            | (c) Date acquire<br>(mo , day, yr )                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | d (d) Date sold<br>(mo , day, yr )                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                      |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|
| 1a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | See Additional Data Ta                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | able                                                                                                                                                                                                                                                              |                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                      |
| b                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                   |                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                      |
| С                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                   |                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                      |
| d                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                   |                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                      |
| e                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                   |                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <u> </u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                      |
| (€                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | e) Gross sales price                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | (f) Depreciation allower (or allowable)                                                                                                                                                                                                                           | 1 1-1                                                                                                                             | or other basis<br>pense of sale                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ın or (loss)<br>(f) mınus (g)                                                                        |
| а                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | See Additional Data Ta                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | able                                                                                                                                                                                                                                                              |                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                      |
| b                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                   |                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                      |
| С                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                   |                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                      |
| d                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                   |                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                      |
| е                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                   |                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                      |
| Со                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | mplete only for assets sh                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | owing gain in column (h) and owne                                                                                                                                                                                                                                 |                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ol (h) gain minus                                                                                    |
| (i)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | FM V as of 12/31/69                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <b>(j)</b> A djusted basis<br>as of 12/31/69                                                                                                                                                                                                                      |                                                                                                                                   | ess of col (1)<br>ol (j), if any                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | t less than -0-) <b>c</b><br>from col (h))                                                           |
| а                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | See Additional Data Ta                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                   |                                                                                                                                   | 377                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                      |
| b                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                   |                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                      |
| С                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                   |                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                      |
| d                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                   |                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                      |
| e                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                   |                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ·                                                                                                                                                                                                                                                                 | If gaın, also enter                                                                                                               | ın Part I, lıne 7 🗎                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                      |
| 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Capital gain net income                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | e or (net capital loss)                                                                                                                                                                                                                                           | If (loss), enter -0-                                                                                                              | in Part I, line 7                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 258,4                                                                                                |
| 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Net short-term capital                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | gain or (loss) as defined in sectio                                                                                                                                                                                                                               | ns 1222(5) and (6)                                                                                                                | )                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | If gain, also enter in Pa                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | art I, line 8, column (c) (see instru                                                                                                                                                                                                                             | ctions) If (loss), e                                                                                                              | nter-0- ]                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | (0) (00.0                                                                                                                                                                                                                                                         |                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | nder Section 4940(e) for R                                                                                                                                                                                                                                        |                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                      |
| or opt                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Qualification Unconal use by domestic prion 4940(d)(2) applies, lea                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | vate foundations subject to the se                                                                                                                                                                                                                                | ection 4940(a) tax                                                                                                                | on net investment                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ent Income                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Γ Yas <b>∀</b> N                                                                                     |
| or opt                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Qualification Unconal use by domestic prion 4940(d)(2) applies, lead to the second street of  | vate foundations subject to the se                                                                                                                                                                                                                                | ection 4940(a) tax                                                                                                                | on net investment                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ent Income                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Γ Yes <b>Γ</b> Ν                                                                                     |
| or opt<br>sections<br>the<br>'Yes,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Qualification Unconal use by domestic prion 4940(d)(2) applies, lead to the foundation liable for the substitute the foundation does not                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | vate foundations subject to the se<br>ave this part blank<br>section 4942 tax on the distributa                                                                                                                                                                   | ection 4940(a) tax<br>able amount of any<br>o not complete this                                                                   | on net investment<br>year in the base p<br>part                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ent Income Income ) eriod?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                      |
| sections the Yes,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Qualification Unconal use by domestic price on 4940(d)(2) applies, lead to the foundation does not ter the appropriate amount (a)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | vate foundations subject to the se<br>ave this part blank<br>section 4942 tax on the distribute<br>qualify under section 4940(e) Do                                                                                                                               | ection 4940(a) tax<br>able amount of any<br>o not complete this                                                                   | on net investment<br>year in the base p<br>part<br>istructions before                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | ent Income  income )  eriod?  making any entrie                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | s<br>I)<br>Ion ratio                                                                                 |
| r opto                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Qualification Unconal use by domestic prion 4940(d)(2) applies, lead to the foundation liable for the substitute the appropriate amount (a)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | vate foundations subject to the seave this part blank section 4942 tax on the distribute qualify under section 4940(e) Do not in each column for each year, se                                                                                                    | ection 4940(a) tax<br>able amount of any<br>o not complete this<br>ee page 18 of the ir                                           | on net investment<br>year in the base p<br>part<br>istructions before                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | ent Income  income )  eriod?  making any entrie                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | s i) ion ratio ed by col (c))                                                                        |
| r optocation of the second sec                                                                                                                                                                                                                                                                                                                                                                                                                        | Qualification Unconal use by domestic prison 4940(d)(2) applies, lead to the foundation liable for the state the appropriate amount (a)  experience (a) experience years Calendar or tax year beginning in)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | vate foundations subject to the se<br>ave this part blank<br>section 4942 tax on the distributa<br>qualify under section 4940(e) Do<br>nt in each column for each year, se<br>(b)<br>Adjusted qualifying distributions                                            | ection 4940(a) tax<br>able amount of any<br>o not complete this<br>ee page 18 of the ir                                           | on net investment year in the base p part istructions before                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | ent Income  income )  eriod?  making any entrie                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | s<br>i)<br>ion ratio<br>ed by col (c))<br>0 55075                                                    |
| sections the Yes,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Qualification Unconal use by domestic prison 4940(d)(2) applies, lead to the second to the foundation does not ter the appropriate amount (a) spenod years Calendar or tax year beginning in) 2012 2011 2010                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | vate foundations subject to the seave this part blank section 4942 tax on the distribute qualify under section 4940(e) Do not in each column for each year, seating the section 4940(e) Adjusted qualifying distributions  1,785,772 1,244,579 1,415,879          | ection 4940(a) tax<br>able amount of any<br>o not complete this<br>ee page 18 of the ir                                           | year in the base p part structions before stable-use assets 3,242,389 3,290,162 4,219,907                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | ent Income  income )  eriod?  making any entrie                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | s (i) Ion ratio (c)) 0 55075 0 37827 0 33552                                                         |
| sections the Yes,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Qualification Unconal use by domestic prison 4940(d)(2) applies, lead to the foundation liable for the set the foundation does not the ter the appropriate amount (a) the period years Calendar for tax year beginning in) 2012 2011 2010 2009                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | vate foundations subject to the seave this part blank section 4942 tax on the distribute qualify under section 4940(e) Do not in each column for each year, seat (b) Adjusted qualifying distributions  1,785,772 1,244,579 1,415,879 904,741                     | ection 4940(a) tax<br>able amount of any<br>o not complete this<br>ee page 18 of the ir                                           | year in the base p part instructions before itable-use assets 3,242,389 3,290,162 4,219,907 4,137,631                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | ent Income  income )  eriod?  making any entrie                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | s i) ion ratio ed by col (c))  0 55075  0 37827  0 33552  0 21866                                    |
| sections the 'Yes,  Base                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Qualification Unconal use by domestic prison 4940(d)(2) applies, lead to the second to the foundation does not ter the appropriate amount (a) spenod years Calendar or tax year beginning in) 2012 2011 2010                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | vate foundations subject to the seave this part blank section 4942 tax on the distribute qualify under section 4940(e) Do not in each column for each year, seating the section 4940(e) Adjusted qualifying distributions  1,785,772 1,244,579 1,415,879          | ection 4940(a) tax<br>able amount of any<br>o not complete this<br>ee page 18 of the ir                                           | year in the base p part structions before stable-use assets 3,242,389 3,290,162 4,219,907                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | ent Income  income )  eriod?  making any entrie                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | s i) ion ratio ed by col (c))  0 55075  0 37827  0 33552  0 21866                                    |
| sections the "Yes,  1 En                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Qualification Unconal use by domestic prison 4940 (d)(2) applies, lead to the foundation liable for the set the foundation does not ter the appropriate amount (a) the period years Calendar for tax year beginning in)  2012  2011  2010  2009  2008                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | vate foundations subject to the seave this part blank section 4942 tax on the distribute qualify under section 4940(e) Do not in each column for each year, seave (b) Adjusted qualifying distributions  1,785,772 1,244,579 1,415,879 904,741 1,319,682          | able amount of any o not complete this ee page 18 of the ir                                                                       | year in the base p part instructions before stable-use assets 3,242,389 3,290,162 4,219,907 4,137,631 7,047,682                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ent Income  income )  eriod?  making any entrie                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | s (c) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (ed) (d) (ed) (e                                       |
| or opto<br>sections the<br>'Yes,<br>1 En<br>Base                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Qualification Unconal use by domestic prison 4940 (d)(2) applies, lead of foundation liable for the set of the foundation does not ter the appropriate amount of the foundation does not ter the appropriate amount of tax years Calendar for tax year beginning in)  2012  2011  2010  2009  2008  Total of line 1, column                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | vate foundations subject to the seave this part blank section 4942 tax on the distribute qualify under section 4940(e) Do not in each column for each year, seat (b) Adjusted qualifying distributions  1,785,772 1,244,579 1,415,879 904,741                     | able amount of any o not complete this ee page 18 of the ir                                                                       | year in the base p part structions before stable-use assets 3,242,389 3,290,162 4,219,907 4,137,631 7,047,682                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ent Income  Income )  eriod?  making any entrie  (col (b) divident                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | s (c) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d                                                     |
| s the<br>section<br>s the<br>Yes,<br>1 En<br>Base<br>ear (                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Qualification Unconal use by domestic prison 4940 (d)(2) applies, lead of foundation liable for the set of the foundation does not ter the appropriate amount of tax year beginning in)  2012  2011  2010  2009  2008  Total of line 1, column A verage distribution ra                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | vate foundations subject to the seave this part blank section 4942 tax on the distribute qualify under section 4940(e). Do nt in each column for each year, sea.  (b) Adjusted qualifying distributions  1,785,772  1,244,579  1,415,879  904,741  1,319,682      | able amount of any o not complete this ee page 18 of the in (c)  Net value of nonchain (c)                                        | year in the base p part instructions before intable-use assets 3,242,389 3,290,162 4,219,907 4,137,631 7,047,682                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | ent Income  Income )  eriod?  making any entrie  (col (b) divident                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | s si) non ratio ed by col (c))  0 55075  0 37827  0 33552  0 21866  0 18725                          |
| s the<br>section of the | Qualification Unconal use by domestic price on 4940 (d)(2) applies, lead of the foundation liable for the set of the foundation does not ter the appropriate amount (a) appropriate amount (a) appropriate amount (a) appropriate amount (b) appropriate amount (b) appropriate amount (b) appropriate amount (c) appropriate amount (c) appropriate amount (c) appropriate amount (c) applies ( | vate foundations subject to the seave this part blank section 4942 tax on the distribute qualify under section 4940(e). Do nt in each column for each year, sea  (b) Adjusted qualifying distributions  1,785,772 1,244,579 1,415,879 904,741 1,319,682  (d)      | able amount of any o not complete this ee page 18 of the ir  (c) Net value of nonchar  vide the total on line if less than 5 year | year in the base propert structions before structions before 3,242,389 3,290,162 4,219,907 4,137,631 7,047,682 1 2 by 5, or by see 3 by 5, or by 5, | ent Income  income )  eriod?  making any entrie  (col (b) divid                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | s si) non ratio ed by col (c)) 0 55075 0 37827 0 33552 0 21866 0 18725 1 6704                        |
| or options the state of the sta                                                                                                                                                                                                                                                                                                                                                                                                                        | Qualification Unconal use by domestic prison 4940 (d)(2) applies, lead to the foundation liable for the set of the foundation does not the set of the set of the foundation does not the foundation does not the set of the set o | vate foundations subject to the seave this part blank section 4942 tax on the distribute qualify under section 4940(e). Do nt in each column for each year, seating distributions  1,785,772 1,244,579 1,415,879 904,741 1,319,682  (d)                           | able amount of any o not complete this ee page 18 of the ir  (c) Net value of nonchar  vide the total on line if less than 5 year | year in the base propert structions before structions before 3,242,389 3,290,162 4,219,907 4,137,631 7,047,682 1 2 by 5, or by see 3 by 5, or by 5, | ent Income  Income )  eriod?  making any entrie  (col (b) dividence (b) dividence (col (b) dividence (col (b) dividence (col (col (col (col (col (col (col (col                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | s (c) (c) (c) (d) (c) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d                                     |
| por option of the section of the sec                                                                                                                                                                                                                                                                                                                                                                                                                        | Qualification Unconal use by domestic prison 4940 (d)(2) applies, lead of foundation liable for the set of the foundation does not the foundation does not the set of the appropriate amount (a) applies (a) applies (a) applies (b) appli | vate foundations subject to the seave this part blank section 4942 tax on the distribute qualify under section 4940(e). Do not in each column for each year, sea  (b) Adjusted qualifying distributions  1,785,772 1,244,579 1,415,879 904,741 1,319,682  (d)     | able amount of any o not complete this ee page 18 of the in Net value of nonchard in the infless than 5 years from Part X, line 5 | year in the base p part istructions before itable-use assets 3,242,389 3,290,162 4,219,907 4,137,631 7,047,682                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ent Income Incom | s si) non ratio ed by col (c))  0 55075  0 37827  0 33552  0 21866  0 18725  1 6704  0 3340  3,023,1 |
| sective years the Bases years (                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Qualification Unconal use by domestic prison 4940 (d)(2) applies, lead of foundation liable for the set of the foundation does not the foundation does not the set of the appropriate amount (a) applies (a) applies (a) applies (b) appli | vate foundations subject to the seave this part blank section 4942 tax on the distribute qualify under section 4940(e). Do not in each column for each year, sea  (b) Adjusted qualifying distributions  1,785,772  1,244,579  1,415,879  904,741  1,319,682  (d) | able amount of any o not complete this ee page 18 of the in Net value of nonchard in the infless than 5 years from Part X, line 5 | year in the base p part istructions before itable-use assets 3,242,389 3,290,162 4,219,907 4,137,631 7,047,682                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ent Income Incom | i)<br>ion ratio                                                                                      |

| Par    | t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst                                                                                              | ructio |     | age     |
|--------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|-----|---------|
| 1a     | Exempt operating foundations described in section 4940(d)(2), check here F and enter "N/A"                                                                                                                  |        |     |         |
|        | on line 1                                                                                                                                                                                                   |        |     |         |
|        | 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                                                                                                                            |        |     | 2,734   |
|        | here Fand 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-)                                                                                                    |        |     | 0       |
| 3      | Add lines 1 and 2                                                                                                                                                                                           |        |     | 2,734   |
| 4      | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others                                                                                                             |        |     |         |
| _      | enter -0-)  Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0                                                                                                          |        |     | 2 7 2 4 |
| 5      | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0                                                                                                                      |        |     | 2,734   |
| 6<br>a | 2013 estimated tax payments and 2012 overpayment credited to 2013   6a   6,788                                                                                                                              |        |     |         |
| b      | Exempt foreign organizations—tax withheld at source 6b                                                                                                                                                      |        |     |         |
| c      | Tax paid with application for extension of time to file (Form 8868)  6c 15,000                                                                                                                              |        |     |         |
| d      | Backup withholding erroneously withheld 6d                                                                                                                                                                  |        |     |         |
| 7      | Total credits and payments Add lines 6a through 6d                                                                                                                                                          |        | 21  | ,788    |
| 8      | Enter any <b>penalty</b> 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 <b>\rightarrow</b> 10                                                                                             |        | 19  | ,054    |
| 11     | Enter the amount of line 10 to be Credited to 2014 estimated tax 19,054 Refunded 11                                                                                                                         |        |     | 0       |
| Par    | t VII-A Statements Regarding Activities                                                                                                                                                                     |        |     |         |
| 1a     | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did                                                                                               |        | Yes | No      |
|        | it participate or intervene in any political campaign?                                                                                                                                                      | 1a     |     | No      |
| b      | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of                                                                                         |        |     |         |
|        | the instructions for definition)?                                                                                                                                                                           | 1b     |     | No      |
|        | If the answer is "Yes" to <b>1a</b> or <b>1b,</b> attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. |        |     |         |
| _      | Did the foundation file Form 1120-POL for this year?                                                                                                                                                        | 1c     |     | No      |
| d      | Enter the amount (If any) of tax on political expenditures (section 4955) imposed during the year                                                                                                           |        |     | 140     |
| -      | (1) On the foundation  \$\bigs\\$ 0 (2) On foundation managers  \$\bigs\\$ 0                                                                                                                                |        |     |         |
| e      | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed                                                                                               |        |     |         |
|        | on foundation managers 🕨 \$0                                                                                                                                                                                |        |     |         |
| 2      | Has the foundation engaged in any activities that have not previously been reported to the IRS?                                                                                                             | 2      |     | No      |
|        | 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      |     | No      |
| 4a     | Did the foundation have unrelated business gross income of \$1,000 or more during the year?                                                                                                                 | 4a     |     | No      |
| b      | If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?                                                                                                                                     | 4b     |     |         |
| 5      | Was there a liquidation, termination, dissolution, or substantial contraction during the year?                                                                                                              | 5      |     | No      |
|        | 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                                                                                                            |        |     |         |
|        | <ul> <li>By language in the governing instrument, or</li> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions</li> </ul>                              |        |     |         |
|        | that conflict with the state law remain in the governing instrument?                                                                                                                                        | 6      | Yes |         |
| 7      | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and                                                                                   |        | 103 |         |
| •      | Part XV.                                                                                                                                                                                                    | 7      | Yes |         |
| 8a     | Enter the states to which the foundation reports or with which it is registered (see instructions)                                                                                                          |        |     |         |
|        | <u>MA</u>                                                                                                                                                                                                   |        |     |         |
| b      | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney                                                                                                        |        |     |         |
|        | General (or designate) of each state as required by General Instruction G? If "No," attach explanation.                                                                                                     | 8b     | Yes |         |
| 9      | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)                                                                                                |        |     |         |
|        | or 4942(j)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)?                                                                                                 | _      |     | NI-     |
| 10     | If "Yes," complete Part XIV                                                                                                                                                                                 | 9      |     | No      |
| 10     | and addresses.                                                                                                                                                                                              | 10     | Yes |         |

| 11  | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the                                                 |      |          |            |
|-----|-------------------------------------------------------------------------------------------------------------------------------------------------------------|------|----------|------------|
|     | meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)                                                                                 | 11   |          | No         |
| 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   |          | No         |
| 13  | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?                                         | 13   | Yes      |            |
|     | Website address ►N/A                                                                                                                                        |      |          |            |
| 14  | The books are in care of ►JACQUELINE MCCOY Telephone no ►(617)                                                                                              | 933- | 3620     |            |
|     | Located at ►31 ST JAMES AVENUE SUITE 740 BOSTON MA ZIP+4 ►02116                                                                                             |      |          |            |
| 4-  |                                                                                                                                                             |      |          |            |
| 15  | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here                                                   | • •  | '        |            |
|     | and enter the amount of tax-exempt interest received or accrued during the year                                                                             |      | <u> </u> |            |
| 16  | At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over                                        |      | Yes      | No         |
|     | a bank, securities, or other financial account in a foreign country?                                                                                        | 16   |          | No         |
|     | See instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes", enter the name of the                                               |      |          |            |
|     | foreign country 🕨                                                                                                                                           |      |          |            |
| Pai | t VII-B Statements Regarding Activities for Which Form 4720 May Be Required                                                                                 |      |          |            |
|     | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.                                                                     |      | Yes      | No         |
| 1a  | During the year did the foundation (either directly or indirectly)                                                                                          |      |          |            |
|     | (1) Engage in the sale or exchange, or leasing of property with a disqualified person?                                                                      |      |          |            |
|     | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)                                                                     |      |          |            |
|     | a disqualified person?                                                                                                                                      |      |          |            |
|     | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes V No                                                        |      |          |            |
|     | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?                                                                        |      |          |            |
|     | (5) Transfer any income or assets to a disqualified person (or make any of either available                                                                 |      |          |            |
|     | for the benefit or use of a disqualified person)?                                                                                                           |      |          |            |
|     | (6) A gree to pay money or property to a government official? (Exception. Check "No"                                                                        |      |          |            |
|     | If the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days ) |      |          |            |
| b   | If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations                               |      |          |            |
|     | section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?                                                | 1b   |          |            |
|     | Organizations relying on a current notice regarding disaster assistance check here                                                                          |      |          |            |
| c   | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,                                                     |      |          |            |
| _   | that were not corrected before the first day of the tax year beginning in 2013?                                                                             | 1c   |          | No         |
| 2   | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private                                                 |      |          |            |
|     | operating foundation defined in section 4942(j)(3) or 4942(j)(5))                                                                                           |      |          |            |
| а   | At the end of tax year 2013, did the foundation have any undistributed income (lines 6d                                                                     |      |          |            |
|     | and 6e, Part XIII) for tax year(s) beginning before 2013?                                                                                                   |      |          |            |
|     | If "Yes," list the years 🕨 20 , 20 , 20 , 20                                                                                                                |      |          |            |
| b   | Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)                                       |      |          |            |
|     | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)                                             |      |          |            |
|     | to <b>all</b> years listed, answer "No" and attach statement—see instructions )                                                                             | 2b   |          |            |
| c   | If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here                                      |      |          |            |
|     | ▶ 20, 20, 20                                                                                                                                                |      |          |            |
| 3a  | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at                                                            |      |          |            |
|     | any time during the year?                                                                                                                                   |      |          |            |
| b   | If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation                                                    |      |          |            |
|     | or disqualified persons after May 26, 1969, <b>(2)</b> the lapse of the 5-year period (or longer period approved                                            |      |          |            |
|     | by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)                                                    |      |          |            |
|     | the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine                                                  |      |          |            |
| _   | If the foundation had excess business holdings in 2013.).                                                                                                   | 3b   |          |            |
| 4a  | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?                                             | 4a   |          | No         |
| b   | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its                                              |      |          | <u>.</u> . |
|     | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013?                                          | 4b   |          | No         |

|      | rt VIII-B Statements Rega                                 | rdi    | a Activities for                     | WŁ                       | nich Form 4720                        | May    | Re Required (cont                                | inue          | <del>/</del> ) | Page <b>G</b>        |
|------|-----------------------------------------------------------|--------|--------------------------------------|--------------------------|---------------------------------------|--------|--------------------------------------------------|---------------|----------------|----------------------|
| 5a   | During the year did the foundation                        |        | _                                    |                          | 110111 4720                           | i-iu y | be required (cont.                               | ,,,,,,,,,     |                |                      |
| Ju   | (1) Carry on propaganda, or othe                          |        |                                      |                          | uelation (eaction 49)                 | 45(0   | ))?                                              | - No          |                |                      |
|      | (2) Influence the outcome of any                          |        |                                      |                          |                                       |        |                                                  | 140           |                |                      |
|      | on, directly or indirectly, any                           |        |                                      |                          |                                       |        |                                                  | . No          |                |                      |
|      |                                                           |        |                                      |                          |                                       | •      | Yes ✓                                            |               |                |                      |
|      | (3) Provide a grant to an individu                        |        |                                      |                          |                                       |        | ·                                                | 140           |                |                      |
|      | (4) Provide a grant to an organiza                        |        |                                      |                          |                                       |        |                                                  | - N-          |                |                      |
|      | in section 509(a)(1), (2), or (                           |        |                                      |                          |                                       | •      | Yes                                              | NO            |                |                      |
|      | (5) Provide for any purpose other                         |        | = •                                  | -                        |                                       |        | ⊏ v □                                            |               |                |                      |
|      | educational purposes, or for t                            |        |                                      |                          |                                       |        |                                                  |               |                |                      |
| D    | <b>b</b> If any answer is "Yes" to 5a(1)-(                |        |                                      |                          |                                       |        |                                                  |               |                |                      |
|      | Regulations section 53 4945 or                            |        |                                      |                          |                                       |        | _                                                | _             | 5b             |                      |
|      | Organizations relying on a currer                         |        |                                      |                          |                                       |        |                                                  |               |                |                      |
| С    | If the answer is "Yes" to question                        | -      |                                      |                          | •                                     |        |                                                  | _             |                |                      |
|      | tax because it maintained expend                          |        |                                      |                          |                                       | •      | Yes                                              | No            |                |                      |
|      | If "Yes," attach the statement requ                       | ıred i | by Regulations section               | n 53.                    | .4945–5(d).                           |        |                                                  |               |                |                      |
| 6a   | Did the foundation, during the yea                        | ar, re | ceive any funds, dire                | ectly                    | or indirectly, to pay                 | pren   | niums on                                         |               |                |                      |
|      | a personal benefit contract?                              |        |                                      |                          |                                       |        |                                                  | No            |                |                      |
| b    | Did the foundation, during the yea                        | ar, pa | y premiums, directly                 | orı                      | ndirectly, on a perso                 | nal b  | benefit contract?                                |               | 6b             | No                   |
|      | If "Yes" to 6b, file Form 8870.                           |        |                                      |                          |                                       |        |                                                  |               |                |                      |
| 7a   | At any time during the tax year, v                        | vas t  | he foundation a party                | / to a                   | a prohibited tax shel                 | ter tr | ransaction? <b>TYes F</b>                        | No            |                |                      |
| Ь    | If yes, did the foundation receive                        | any    | proceeds or have an                  | y ne                     | t income attributable                 | e to t | the transaction?                                 |               | 7b             |                      |
|      | Information Abou                                          | t Of   | ficers, Directors                    | s, T                     | rustees, Founda                       | tior   | n Managers, Highly                               | Paid          | Emp            | loyees,              |
| Ра   | and Contractors                                           |        | ·                                    |                          | <u> </u>                              |        |                                                  |               |                |                      |
| _1_  | List all officers, directors, trustee                     | s, fo  | undation managers a                  | nd t                     | heir compensation (                   | see i  | nstructions).                                    |               |                |                      |
|      | (-) Name and address.                                     | (b)    | Title, and average                   | ٠ ،                      | (c) Compensation (d) Contributions to |        |                                                  | (e) E         | xpens          | e account,           |
|      | (a) Name and address                                      | ۱ م    | hours per week<br>evoted to position | (If not paid, enter -0-) |                                       |        | mployee benefit plans<br>I deferred compensation | other allowan |                | wances               |
| BRUC | E EVANS                                                   | _      | RUSTEE                               |                          | 0                                     |        | 0                                                |               |                | 0                    |
| 31 S | T JAMES AVE SUITE 740                                     | 0 0    |                                      |                          | · ·                                   |        | Ü                                                |               |                | J                    |
|      | TON, MA 02116                                             |        |                                      |                          |                                       |        |                                                  |               |                |                      |
| BRID | GITT EVANS                                                | TRL    | STEE                                 |                          | 0                                     |        | 0                                                |               |                | 0                    |
| 31 S | T JAMES AVE SUITE 740                                     | 0 0    | )                                    |                          |                                       |        |                                                  |               |                |                      |
| BOS  | TON,MA 02116                                              |        |                                      |                          |                                       |        |                                                  |               |                |                      |
| 2    | Compensation of five highest-paid                         | l em   | oloyees (other than                  | thos                     | e included on line 1–                 | -see   | instructions). If none, er                       | ter "N        | IONE."         |                      |
|      |                                                           |        | (b) Title, and aver                  | age                      |                                       |        | (d) Contributions to                             |               |                |                      |
| (a)  | Name and address of each emplo<br>paid more than \$50,000 | yee    | hours per week                       |                          | (c) Compensatio                       | n      | employee benefit<br>plans and deferred           |               |                | e account,<br>wances |
|      | para more than \$50,000                                   |        | devoted to positi                    | on                       |                                       |        | compensation                                     | Oti           | ici alic       | Wallees              |
| NON  | IE                                                        |        |                                      |                          |                                       |        | ·                                                |               |                |                      |
|      |                                                           |        |                                      |                          |                                       |        |                                                  |               |                |                      |
|      |                                                           |        |                                      |                          |                                       |        |                                                  |               |                |                      |
|      |                                                           |        | -                                    |                          |                                       |        |                                                  |               |                |                      |
|      |                                                           |        |                                      |                          |                                       |        |                                                  |               |                |                      |
|      |                                                           |        | -                                    |                          |                                       |        |                                                  |               |                |                      |
|      |                                                           |        |                                      |                          |                                       |        |                                                  |               |                |                      |
|      |                                                           |        | ]                                    |                          |                                       |        |                                                  |               |                |                      |
|      |                                                           |        |                                      |                          |                                       |        |                                                  |               |                |                      |
|      |                                                           |        |                                      |                          |                                       |        |                                                  |               |                |                      |
|      |                                                           |        |                                      |                          |                                       |        |                                                  |               |                |                      |
| Taka | I number of other employees hard                          |        | ± F O O O O                          |                          | •                                     |        |                                                  |               |                |                      |

| Form 990-PF (2013)                                                                           |                                               | Page /           |
|----------------------------------------------------------------------------------------------|-----------------------------------------------|------------------|
| Part VIII Information About Officers, Directors, True and Contractors (continued)            | stees, Foundation Managers, Highly            | Paid Employees,  |
| 3 Five highest-paid independent contractors for professional service                         | es (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                                                                                         |                                               |                  |
|                                                                                              |                                               |                  |
|                                                                                              |                                               |                  |
|                                                                                              |                                               |                  |
|                                                                                              |                                               |                  |
|                                                                                              |                                               |                  |
|                                                                                              |                                               |                  |
|                                                                                              |                                               |                  |
|                                                                                              |                                               |                  |
|                                                                                              |                                               |                  |
| Total number of others receiving over \$50,000 for professional service                      | s                                             | 0                |
| Part IX-A Summary of Direct Charitable Activities                                            |                                               |                  |
| List the foundation's four largest direct charitable activities during the tax year  Include |                                               | Expenses         |
| organizations and other beneficiaries served, conferences convened, research papers p        | roduced, etc                                  | Expenses         |
| 1                                                                                            |                                               |                  |
| 2                                                                                            |                                               |                  |
| 3                                                                                            |                                               |                  |
| Part IX-B Summary of Program-Related Investments                                             | e (caa instructions)                          |                  |
| Describe the two largest program-related investments made by the foundation duri             | -                                             | A mount          |
| 1                                                                                            | ,                                             |                  |
|                                                                                              |                                               |                  |
|                                                                                              |                                               |                  |
| 2                                                                                            |                                               |                  |
|                                                                                              |                                               |                  |
|                                                                                              |                                               |                  |
| All other program-related investments See page 24 of the instruction                         | ons                                           |                  |
| 3                                                                                            |                                               |                  |
|                                                                                              |                                               |                  |
|                                                                                              |                                               |                  |
| <b>Total.</b> Add lines 1 through 3                                                          |                                               | 0                |

| Pa      | rt X Minimum Investment Return (All domestic foundations must complete this part. Fo see instructions.)                  | reign   | foundations,    |
|---------|--------------------------------------------------------------------------------------------------------------------------|---------|-----------------|
| 1       | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,                        |         |                 |
|         | purposes                                                                                                                 |         |                 |
| а       | A verage monthly fair market value of securities                                                                         | 1a      | 2,475,923       |
| b       | A verage of monthly cash balances                                                                                        | 1b      | 387,533         |
| c       | Fair market value of all other assets (see instructions)                                                                 | 1c      | 205,761         |
| d       | <b>Total</b> (add lines 1a, b, and c)                                                                                    | 1d      | 3,069,217       |
| 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       | 0               |
| 3       | Subtract line 2 from line 1d                                                                                             | 3       | 3,069,217       |
| 4       | Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see                               |         |                 |
|         | ınstructions)                                                                                                            | 4       | 46,038          |
| 5       | Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4                      | 5       | 3,023,179       |
| 6       | Minimum investment return. Enter 5% of line 5                                                                            | 6       | 151,159         |
| Pai     | <b>Distributable Amount</b> (see instructions) (Section 4942(j)(3) and (j)(5) private operations                         | atıng   | foundations and |
| 1       | certain foreign organizations check here  and do not complete this part.)  Minimum investment return from Part X, line 6 | 1       | 151,159         |
| 1<br>2a | Tax on investment income for 2013 from Part VI, line 5                                                                   |         | 131,139         |
| za<br>b | Income tax for 2013 (This does not include the tax from Part VI) 2b                                                      |         |                 |
| c       | Add lines 2a and 2b                                                                                                      | 30      | 2,734           |
| 3       | Distributable amount before adjustments Subtract line 2c from line 1                                                     | 2c<br>3 |                 |
|         |                                                                                                                          | 4       | 148,425         |
| 4       | Recoveries of amounts treated as qualifying distributions                                                                |         |                 |
| 5       | Add lines 3 and 4                                                                                                        | 5<br>6  | 148,425         |
| 6       | Deduction from distributable amount (see instructions)                                                                   | -       | U               |
| 7       | Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,                                | _       | 140 425         |
|         | line 1                                                                                                                   | 7       | 148,425         |
| Par     | 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      | 1,492,500       |
| 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                                                      |         |                 |
| 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       | 1,492,500       |
| 5       | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment                             |         |                 |
|         | ıncome Enter 1% of Part I, line 27b (see instructions)                                                                   | 5       | 2,734           |
| 6       | Adjusted qualifying distributions. Subtract line 5 from line 4                                                           | 6       | 1.489.766       |

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

the section 4940(e) reduction of tax in those years

| For    | m 990-PF (2013)                                                            |                                       |           |                     |      | Page <b>9</b> |
|--------|----------------------------------------------------------------------------|---------------------------------------|-----------|---------------------|------|---------------|
| Р      | art XIII Undistributed Inc                                                 | come (see instruc                     | tions)    |                     |      |               |
|        |                                                                            |                                       | (a)       | (b)                 | (c)  | (d)           |
|        | Distributable amount for 2013 from                                         | n Bart VI Juno 7                      | Corpus    | Years prior to 2012 | 2012 | 2013          |
|        | Undistributed income, if any, as of                                        | · —                                   |           |                     |      | 110,123       |
| a<br>a | Enter amount for 2012 only                                                 |                                       |           |                     | 0    |               |
|        |                                                                            |                                       |           | 0                   |      |               |
| b      | · · · · · · · · · · · · · · · · · · ·                                      |                                       |           | , ,                 |      |               |
| 3      | Excess distributions carryover, if a From 2008                             | 979,833                               |           |                     |      |               |
| a<br>h | From 2009                                                                  | 703,341                               |           |                     |      |               |
|        | From 2010                                                                  | 1,212,798                             |           |                     |      |               |
| d      | From 2011                                                                  | 1,082,937                             |           |                     |      |               |
| e      | From 2012                                                                  | 1,624,109                             |           |                     |      |               |
|        | <b>Total</b> of lines 3a through e                                         |                                       | 5,603,018 |                     |      |               |
|        | Qualifying distributions for 2013 fro                                      |                                       |           |                     |      |               |
| •      | XII, line 4 <b>&gt;</b> \$                                                 |                                       |           |                     |      |               |
| а      | Applied to 2012, but not more than                                         | II                                    |           |                     | o    |               |
|        | Applied to undistributed income of                                         |                                       |           |                     |      |               |
| _      | (Election required—see instructions                                        |                                       |           | 0                   |      |               |
| c      | Treated as distributions out of corp                                       |                                       |           |                     |      |               |
|        | required—see instructions)                                                 | . `                                   | 0         |                     |      |               |
| d      | Applied to 2013 distributable amou                                         | unt                                   |           |                     |      | 148,425       |
| е      | Remaining amount distributed out o                                         | of corpus                             | 1,344,075 |                     |      |               |
| 5      | Excess distributions carryover app                                         | olied to 2013                         | 0         |                     |      | 0             |
|        | (If an amount appears in column (d),                                       |                                       |           |                     |      |               |
|        | same amount must be shown in colu                                          | mn (a).)                              |           |                     |      |               |
| 6      | Enter the net total of each column                                         | as                                    |           |                     |      |               |
|        | indicated below:                                                           |                                       | 6.047.000 |                     |      |               |
|        | Corpus Add lines 3f, 4c, and 4e St                                         |                                       | 6,947,093 |                     |      |               |
| b      | Prior years' undistributed income S                                        |                                       |           | 0                   |      |               |
| _      | line 4b from line 2b                                                       |                                       |           | , ,                 |      |               |
| C      | Enter the amount of prior years' und income for which a notice of deficien |                                       |           |                     |      |               |
|        | been issued, or on which the section                                       |                                       |           |                     |      |               |
|        | tax has been previously assessed.                                          |                                       |           | 0                   |      |               |
| d      | Subtract line 6c from line 6b Taxal                                        | II                                    |           |                     |      |               |
|        | —see instructions                                                          |                                       |           | 0                   |      |               |
| е      | Undistributed income for 2012 Sul                                          |                                       |           |                     |      |               |
|        | 4a from line 2a Taxable amount—s                                           | ee                                    |           |                     | o    |               |
| f      | Undistributed income for 2013 Sub                                          | htract                                |           |                     |      |               |
| •      | lines 4d and 5 from line 1 This amo                                        | II                                    |           |                     |      |               |
|        | be distributed in 2014                                                     |                                       |           |                     |      | 0             |
| 7      | A mounts treated as distributions or                                       | ut of                                 |           |                     |      |               |
|        | corpus to satisfy requirements impo                                        |                                       |           |                     |      |               |
|        | section 170(b)(1)(F) or 4942(g)(3)                                         | · ·                                   | 0         |                     |      |               |
| 0      | instructions) Excess distributions carryover from                          |                                       |           |                     |      |               |
| 0      | applied on line 5 or line 7 (see instr                                     | II                                    | 979,833   |                     |      |               |
| 9      | Excess distributions carryover to 20                                       | · · · · · · · · · · · · · · · · · · · |           |                     |      |               |
|        | Subtract lines 7 and 8 from line 6a                                        |                                       | 5,967,260 |                     |      |               |
| 10     | Analysis of line 9                                                         |                                       |           |                     |      |               |
|        | Excess from 2009                                                           | 703,341                               |           |                     |      |               |
| b      | Excess from 2010                                                           | 1,212,798                             |           |                     |      |               |
| C      | Excess from 2011                                                           | 1,082,937                             |           |                     |      |               |
| d      | Excess from 2012                                                           | 1,624,109                             |           |                     |      |               |
| е      | Excess from 2013                                                           | 1,344,075                             |           |                     |      |               |

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

c Any submission deadlines

factors

Form **990-PF** (2013)

| Part XV Supplementary Inform<br>3 Grants and Contributions Paid | l During the Year or Ani                           | proved for F                         | uture Payment                    |          |
|-----------------------------------------------------------------|----------------------------------------------------|--------------------------------------|----------------------------------|----------|
|                                                                 | If recipient is an individual,                     |                                      |                                  |          |
| Recipient  Name and address (home or business)                  | show any relationship to<br>any foundation manager | Foundation<br>status of<br>recipient | Purpose of grant or contribution | A mount  |
| a Paid during the year                                          | or substantial contributor                         |                                      |                                  |          |
| See Additional Data Table                                       |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
| Total                                                           |                                                    |                                      |                                  | 1,492,50 |
| <b>b</b> Approved for future payment                            |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      |                                  |          |
|                                                                 |                                                    |                                      | h. al-                           |          |

| Form 990-1                                  |                                                                                                 |                  |                       |                         |                    | Page <b>12</b>                                     |
|---------------------------------------------|-------------------------------------------------------------------------------------------------|------------------|-----------------------|-------------------------|--------------------|----------------------------------------------------|
|                                             | -A Analysis of Income-Produci                                                                   |                  |                       | T                       |                    |                                                    |
| Enter gross                                 | s amounts unless otherwise indicated                                                            | (a)              | usiness income<br>(b) | Excluded by section (c) | (d)                | <b>(e)</b><br>Related or exempt<br>function income |
| _                                           | n service revenue                                                                               | Business<br>code | A mount               | Exclusion code          | A mount            | (See<br>instructions)                              |
| ·                                           |                                                                                                 |                  |                       |                         |                    |                                                    |
|                                             |                                                                                                 |                  |                       |                         |                    |                                                    |
|                                             |                                                                                                 |                  |                       |                         |                    |                                                    |
| f                                           |                                                                                                 |                  |                       |                         |                    |                                                    |
| <ul><li>2 Membe</li><li>3 Interes</li></ul> | and contracts from government agencies rship dues and assessments                               |                  |                       |                         |                    |                                                    |
| <b>4</b> Dividen                            | nds and interest from securities                                                                |                  |                       | 14                      | 44,603             |                                                    |
|                                             | ntal income or (loss) from real estate                                                          |                  |                       |                         |                    |                                                    |
|                                             | financed property ebt-financed property                                                         |                  |                       |                         |                    |                                                    |
|                                             | ntal income or (loss) from personal<br>ty                                                       |                  |                       |                         |                    |                                                    |
|                                             | nvestment income                                                                                |                  |                       | 14                      |                    |                                                    |
| 8 Gain or                                   | r (loss) from sales of assets other than                                                        |                  |                       |                         |                    |                                                    |
|                                             | ory                                                                                             |                  |                       | 18                      | 23,970             |                                                    |
| <b>10</b> Gross p                           | profit or (loss) from sales of inventory                                                        |                  |                       |                         |                    |                                                    |
|                                             | revenue a                                                                                       |                  |                       |                         |                    |                                                    |
|                                             |                                                                                                 |                  |                       |                         |                    |                                                    |
| d                                           |                                                                                                 |                  |                       |                         |                    |                                                    |
|                                             | al Add columns (b), (d), and (e).                                                               |                  |                       | )<br>)                  | 68,573             | 0                                                  |
| 13 Total.                                   | Add line 12, columns (b), (d), and (e)                                                          |                  |                       | 1                       | 13                 |                                                    |
|                                             | rorksheet in line 13 instructions to verify correct Relationship of Activities to               |                  | plishment of E        | Exempt Purpos           | <br>es             |                                                    |
| Line No.                                    | Explain below how each activity for whice the accomplishment of the foundation's instructions ) | h income is re   | ported ın column (    | (e) of Part XVI-A c     | ontributed importa |                                                    |
|                                             |                                                                                                 |                  |                       |                         |                    |                                                    |
|                                             |                                                                                                 |                  |                       |                         |                    |                                                    |
|                                             |                                                                                                 |                  |                       |                         |                    |                                                    |
|                                             |                                                                                                 |                  |                       |                         |                    |                                                    |
|                                             |                                                                                                 |                  |                       |                         |                    |                                                    |
|                                             |                                                                                                 |                  |                       |                         |                    |                                                    |
|                                             |                                                                                                 |                  |                       |                         |                    |                                                    |
|                                             |                                                                                                 |                  |                       |                         |                    |                                                    |
|                                             |                                                                                                 |                  |                       |                         |                    |                                                    |
|                                             |                                                                                                 |                  |                       |                         |                    |                                                    |
|                                             |                                                                                                 |                  |                       |                         |                    |                                                    |
|                                             |                                                                                                 |                  |                       |                         |                    |                                                    |
|                                             |                                                                                                 |                  |                       |                         |                    |                                                    |
|                                             |                                                                                                 |                  |                       |                         |                    |                                                    |
|                                             |                                                                                                 |                  |                       |                         |                    |                                                    |
|                                             |                                                                                                 |                  |                       |                         |                    |                                                    |
|                                             |                                                                                                 |                  |                       |                         |                    |                                                    |

| Part XVI           | Information R<br>Noncharitable                                                              |                  |         |            |                   | sactio    | ns and I   | Relationships                | With               |                   |              | <u>,</u>  |
|--------------------|---------------------------------------------------------------------------------------------|------------------|---------|------------|-------------------|-----------|------------|------------------------------|--------------------|-------------------|--------------|-----------|
|                    | organization directly or i<br>501(c) of the Code (oth                                       |                  |         |            |                   |           |            |                              |                    |                   | Yes          | No        |
| organıza           | tions?                                                                                      |                  |         |            |                   |           |            |                              |                    |                   |              |           |
| <b>a</b> Transfer  | s from the reporting fou                                                                    | ndation to a     | nonch   | arıtable e | exempt organi:    | zatıon of |            |                              |                    |                   |              |           |
| <b>(1)</b> Cas     | h                                                                                           |                  |         |            |                   |           |            |                              |                    | 1a(1)             |              | No        |
| <b>(2)</b> Oth     | erassets                                                                                    |                  |         |            |                   |           |            |                              |                    | 1a(2)             |              | No        |
| <b>b</b> Other tra | ansactions                                                                                  |                  |         |            |                   |           |            |                              |                    |                   |              |           |
| <b>(1)</b> Sale    | es of assets to a noncha                                                                    | arıtable exer    | npt org | ganızatıor | n                 |           |            |                              |                    | 1b(1)             |              | No        |
| <b>(2)</b> Pur     | chases of assets from a                                                                     | noncharital      | ole exe | empt orga  | nızatıon          |           |            |                              |                    | 1b(2)             |              | No        |
| <b>(3)</b> Ren     | tal of facilities, equipme                                                                  | ent, or other    | assets  | s          |                   |           |            |                              |                    | 1b(3)             |              | No        |
| <b>(4)</b> Reir    | mbursement arrangemei                                                                       | nts              |         |            |                   |           |            |                              |                    | 1b(4)             |              | No        |
|                    | ns or loan guarantees.                                                                      |                  |         |            |                   |           |            |                              |                    | 1b(5)             |              | No        |
|                    | ormance of services or r                                                                    |                  |         |            |                   |           |            |                              |                    | 1b(6)             |              | No        |
|                    | of facilities, equipment,                                                                   |                  |         |            |                   |           |            |                              |                    | 1c                |              | No        |
| _                  | swer to any of the above                                                                    | _                |         |            |                   |           |            |                              |                    |                   | LLLLI<br>Jue |           |
|                    | ods, other assets, or se<br>ansaction or sharing arr<br>(b) Amount involved                 | rangement, s     | show ir | n column   |                   | of the go | ods, othei |                              | ces receive        | ed                |              | nts       |
|                    |                                                                                             |                  |         |            |                   | 1         |            |                              |                    |                   |              |           |
|                    |                                                                                             |                  |         |            |                   |           |            |                              |                    |                   |              |           |
| -                  |                                                                                             |                  |         |            |                   |           |            |                              |                    |                   |              |           |
|                    |                                                                                             |                  |         |            |                   |           |            |                              |                    |                   |              |           |
|                    |                                                                                             |                  |         |            |                   |           |            |                              |                    |                   |              |           |
|                    |                                                                                             |                  |         |            |                   |           |            |                              |                    |                   |              |           |
|                    |                                                                                             |                  |         |            |                   |           |            |                              |                    |                   |              |           |
|                    |                                                                                             |                  |         |            |                   |           |            |                              |                    |                   |              |           |
|                    |                                                                                             |                  |         |            |                   |           |            |                              |                    |                   |              |           |
|                    |                                                                                             |                  |         |            |                   |           |            |                              |                    |                   |              |           |
|                    |                                                                                             |                  |         |            |                   |           |            |                              |                    |                   |              |           |
|                    |                                                                                             |                  |         |            |                   |           |            |                              |                    |                   |              |           |
|                    |                                                                                             |                  |         |            |                   |           |            |                              |                    |                   |              |           |
|                    |                                                                                             |                  |         |            |                   |           |            |                              |                    |                   |              |           |
| describe           | undation directly or indied in section 501(c) of to complete the following                  | he Code (ot      |         | -          | · ·               |           | •          | =                            |                    | .Г <sub>Ү</sub> є | es F         | -<br>No   |
|                    | (a) Name of organizatio                                                                     | n                |         | (b         | ) Type of organiz | ation     |            | (c) Descrip                  | otion of relati    | onship            |              |           |
|                    |                                                                                             |                  |         |            |                   |           |            |                              |                    |                   |              |           |
|                    |                                                                                             |                  |         |            |                   |           |            |                              |                    |                   |              |           |
|                    |                                                                                             |                  |         |            |                   |           |            |                              |                    |                   |              |           |
|                    |                                                                                             |                  |         |            |                   |           |            |                              |                    |                   |              |           |
| the                | der penalties of perjury,<br>e best of my knowledge a<br>sed on all information of<br>***** | and belief, it   | ıs tru  | e, correct | , and complete    | e Declar  |            |                              | n taxpaye  May the |                   | s this reti  | IS<br>urn |
|                    | Signature of officer or t                                                                   | trustee          |         |            | Date              |           | Title      |                              |                    | r) P Ve           |              |           |
| Paid<br>Prepare    | Print/Type preparer's<br>JACQUELINE R<br>MCCOY                                              | name             | Prepar  | er's Signa | ature             | Date      |            | Check if self-<br>employed ▶ | PTIN               | 001401            | 149          |           |
| Use<br>Only        | Firm's name ▶                                                                               |                  |         |            | OFFICE SER        |           |            | Fırm's EIN ► 04              | 1-354012           | 9                 |              |           |
| •                  | Firm's address ▶                                                                            | 31 ST 2<br>02116 | IAMES   | SAVENUI    | E SUITE 740       | BOSTC     | N, MA      | Phone no (617                | 933-360            | 00                |              |           |

| 990PF Part IV - Capital Gains and Losses for Tax on Inve                                                                          | estment Income                         | - columns a - a                         |                                       |
|-----------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|-----------------------------------------|---------------------------------------|
| (a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co ) | (b) How acquired P—Purchase D—Donation | (c) Date<br>acquired<br>(mo , day, yr ) | <b>(d)</b> Date solo<br>(mo , day, yr |
| POWERSHARES EXCH TRAD FD                                                                                                          | Р                                      | 2012-10-03                              | 2013-01-17                            |
| POWERSHARES EXCH TRAD FD                                                                                                          | Р                                      | 2012-11-05                              | 2013-01-17                            |
| POWERSHARES EXCH TRAD FD                                                                                                          | Р                                      | 2012-12-20                              | 2013-01-17                            |
| ISHARES TR TIPS BOND ETF                                                                                                          | D                                      | 2011-09-27                              | 2013-02-06                            |
| ISHARES TR TIPS BOND ETF                                                                                                          | Р                                      | 2011-09-27                              | 2013-02-06                            |
| POWERSHARES QQQ TRUST SER 1                                                                                                       | Р                                      | 2012-02-02                              | 2013-02-06                            |
| POWERSHARES QQQ TRUST SER 1                                                                                                       | Р                                      | 2011-02-01                              | 2013-02-06                            |
| POWERSHARES QQQ TRUST SER 1                                                                                                       | D                                      | 2011-02-01                              | 2013-02-06                            |
| SPDR GOLD TRUST                                                                                                                   | D                                      | 2009-10-16                              | 2013-02-06                            |
| SPDR GOLD TRUST                                                                                                                   | D                                      | 2010-05-12                              | 2013-02-06                            |
| VANGUARD REIT                                                                                                                     | Р                                      | 2010-10-04                              | 2013-02-06                            |
| VANGUARD REIT                                                                                                                     | D                                      | 2010-10-04                              | 2013-02-06                            |
| VANGUARD REIT                                                                                                                     | Р                                      | 2011-02-01                              | 2013-02-06                            |
| SPDR GOLD TRUST                                                                                                                   | Р                                      | 2012-11-05                              | 2013-02-20                            |
| SPDR GOLD TRUST                                                                                                                   | D                                      | 2010-05-12                              | 2013-02-20                            |
| SPDR GOLD TRUST                                                                                                                   | Р                                      | 2011-05-31                              | 2013-02-20                            |
| SPDR GOLD TRUST                                                                                                                   | D                                      | 2011-05-31                              | 2013-02-20                            |
| POWERSHARES QQQ TRUST SER 1                                                                                                       | Р                                      | 2012-02-02                              | 2013-06-0                             |
| POWERSHARES DB COMMDTY INDX                                                                                                       | D                                      | 2010-02-02                              | 2013-06-0                             |
| POWERSHARES DB COMMDTY INDX                                                                                                       | Р                                      | 2010-02-02                              | 2013-06-0                             |
| EGSHARES ETF EMERGING MARKETS                                                                                                     | Р                                      | 2012-12-06                              | 2013-06-06                            |
| ISHARES ETF AAA                                                                                                                   | Р                                      | 2012-10-03                              | 2013-06-0                             |
| ISHARES ETF AAA                                                                                                                   | Р                                      | 2012-11-05                              | 2013-06-0                             |
| ISHARES GOLD TRUST                                                                                                                | Р                                      | 2011-12-08                              | 2013-06-06                            |
| ISHARES INTL ETF                                                                                                                  | Р                                      | 2012-06-06                              | 2013-06-0                             |
| ISHARES INTL ETF                                                                                                                  | Р                                      | 2012-08-02                              | 2013-06-0                             |
| ISHARES MSCI GRMNY ETF                                                                                                            | Р                                      | 2012-10-03                              | 2013-06-0                             |
| ISHARES MSCI GRMNY ETF                                                                                                            | Р                                      | 2012-11-05                              | 2013-06-0                             |
| ISHARES MSCI HK ETF                                                                                                               | Р                                      | 2012-10-03                              | 2013-06-0                             |
| ISHARES MSCI HK ETF                                                                                                               | Р                                      | 2012-11-05                              | 2013-06-06                            |

| (a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co ) | (b) How acquired P—Purchase D—Donation | (c) Date acquired (mo , day, yr ) | (d) Date sol<br>(mo , day, yr |
|-----------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|-----------------------------------|-------------------------------|
| ISHARES MSCI HK ETF                                                                                                               | Р                                      | 2012-12-20                        | 2013-06-06                    |
| ISHARES TR BOND 7-10 YR TREAS                                                                                                     | D                                      | 2011-05-31                        | 2013-06-06                    |
| ISHARES TR BOND 7-10 YR TREAS                                                                                                     | Р                                      | 2011-05-31                        | 2013-06-06                    |
| ISHARES TR RUSSELL 2000 ETF                                                                                                       | Р                                      | 2012-11-05                        | 2013-06-06                    |
| ISHARES TR RUSSELL 2000 ETF                                                                                                       | Р                                      | 2012-02-02                        | 2013-06-06                    |
| ISHARES TR TIPS BOND ETF                                                                                                          | D                                      | 2011-09-27                        | 2013-06-0                     |
| PIMCO ETF 0-5 YR HIGH YIELD                                                                                                       | Р                                      | 2013-02-06                        | 2013-06-0                     |
| POWERSHARES QQQ TRUST SER 1                                                                                                       | Р                                      | 2012-11-05                        | 2013-06-0                     |
| POWERSHARES S&P ETF 500 LOW                                                                                                       | Р                                      | 2012-11-05                        | 2013-06-0                     |
| POWERSHARES S&P ETF 500 LOW                                                                                                       | Р                                      | 2012-02-02                        | 2013-06-0                     |
| SPDR BARCLAYS ETF 1-3 YR US CORP                                                                                                  | Р                                      | 2012-10-03                        | 2013-06-0                     |
| SPDR BARCLAYS ETF 1-3 YR US CORP                                                                                                  | Р                                      | 2012-11-05                        | 2013-06-0                     |
| SPDR BARCLAYS ETF 1-3 YR US CORP                                                                                                  | Р                                      | 2012-02-02                        | 2013-06-0                     |
| SPDR S&P 500 ETF TR                                                                                                               | Р                                      | 2013-02-20                        | 2013-06-0                     |
| VANGUARD BOND INDEX FUND                                                                                                          | D                                      | 2009-10-16                        | 2013-06-0                     |
| VANGUARD BOND INDEX FUND                                                                                                          | Р                                      | 2010-06-02                        | 2013-06-0                     |
| VANGUARD DIV APPRCIATION                                                                                                          | D                                      | 2010-02-02                        | 2013-06-0                     |
| VANGUARD DIV APPRCIATION                                                                                                          | D                                      | 2010-03-17                        | 2013-06-0                     |
| VANGUARD DIV APPRCIATION                                                                                                          | Р                                      | 2010-03-17                        | 2013-06-0                     |
| VANGUARD FTSE EMERGING MARKETS                                                                                                    | Р                                      | 2011-06-14                        | 2013-06-0                     |
| VANGUARD FTSE ETF DEV MARKET                                                                                                      | Р                                      | 2012-06-06                        | 2013-06-0                     |
| VANGUARD FTSE ETF DEV MARKET                                                                                                      | Р                                      | 2011-05-31                        | 2013-06-0                     |
| VANGUARD FTSE ETF DEV MARKET                                                                                                      | D                                      | 2011-10-05                        | 2013-06-0                     |
| VANGUARD REIT                                                                                                                     | Р                                      | 2012-06-06                        | 2013-06-0                     |
| VANGUARD REIT                                                                                                                     | Р                                      | 2012-11-05                        | 2013-06-0                     |
| VANGUARD REIT                                                                                                                     | Р                                      | 2011-02-01                        | 2013-06-0                     |
| VANGUARD REIT                                                                                                                     | D                                      | 2011-02-01                        | 2013-06-0                     |
| VANGUARD TOTAL STOCK MKT                                                                                                          | Р                                      | 2011-02-01                        | 2013-06-0                     |
| VANGUARD TOTAL STOCK MKT                                                                                                          | D                                      | 2011-02-01                        | 2013-06-0                     |
| VANGUARD TOTAL STOCK MKT                                                                                                          | Р                                      | 2011-05-31                        | 2013-06-0                     |

| (a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co ) | (b) How acquired P—Purchase D—Donation | (c) Date<br>acquired<br>(mo , day, yr ) | ( <b>d)</b> Date sol<br>(mo , day, yr |
|-----------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|-----------------------------------------|---------------------------------------|
| WISDOMTREE ASIA ETF                                                                                                               | D                                      | 2012-12-18                              | 2013-06-06                            |
| WISDOMTREE ASIA ETF                                                                                                               | Р                                      | 2011-05-31                              | 2013-06-06                            |
| WISDOMTREE JPN HDGD EQTY                                                                                                          | Р                                      | 2013-01-17                              | 2013-06-06                            |
| VANGUARD BOND INDEX FUND                                                                                                          | D                                      | 2012-12-18                              | 2013-06-2                             |
| VANGUARD BOND INDEX FUND                                                                                                          | Р                                      | 2010-06-02                              | 2013-06-2                             |
| VANGUARD REIT                                                                                                                     | Р                                      | 2012-11-05                              | 2013-06-2                             |
| VANGUARD REIT                                                                                                                     | Р                                      | 2012-12-20                              | 2013-06-2                             |
| ISHARES INTL ETF                                                                                                                  | Р                                      | 2012-08-02                              | 2013-06-2                             |
| ISHARES INTL ETF                                                                                                                  | Р                                      | 2012-11-05                              | 2013-06-2                             |
| ISHARES INTL ETF                                                                                                                  | Р                                      | 2012-12-20                              | 2013-06-2                             |
| ISHARES MSCI HK ETF                                                                                                               | Р                                      | 2012-12-20                              | 2013-06-2                             |
| ISHARES MSCI HK ETF                                                                                                               | Р                                      | 2013-02-06                              | 2013-06-2                             |
| POWERSHARES S&P ETF 500 LOW                                                                                                       | Р                                      | 2012-11-05                              | 2013-10-0                             |
| POWERSHARES S&P ETF 500 LOW                                                                                                       | Р                                      | 2012-12-20                              | 2013-10-0                             |
| VANGUARD BOND INDEX FUND                                                                                                          | D                                      | 2010-06-02                              | 2013-10-0                             |
| VANGUARD REIT                                                                                                                     | Р                                      | 2012-12-20                              | 2013-10-0                             |
| SPDR BARCLAYS ETF 1-3 YR US CORP                                                                                                  | Р                                      | 2012-10-22                              | 2013-10-0                             |
| SPDR BARCLAYS ETF 1-3 YR US CORP                                                                                                  | Р                                      | 2012-11-05                              | 2013-10-0                             |
| SPDR BARCLAYS ETF 1-3 YR US CORP                                                                                                  | Р                                      | 2012-11-24                              | 2013-10-0                             |
| SPDR BARCLAYS ETF 1-3 YR US CORP                                                                                                  | Р                                      | 2012-12-20                              | 2013-10-0                             |
| CHARLES SCHWAB WASH SALES                                                                                                         | Р                                      | 2013-01-01                              | 2013-06-0                             |
| SPDR BARCLAYS - ST CAP GAIN                                                                                                       | Р                                      | 2013-01-01                              | 2013-01-0                             |
| SPDR BARCLAYS - LT CAP GAIN                                                                                                       | Р                                      | 2012-01-01                              | 2013-01-0                             |
| PIMCO ETF - ST CAP GAIN                                                                                                           | Р                                      | 2012-01-01                              | 2013-12-1                             |
| PIMCO ETF - LT CAP GAIN                                                                                                           | Р                                      | 2012-01-01                              | 2013-12-1                             |
| VANGUARD BOND INDEX FUND - ST CAP GAIN                                                                                            | Р                                      | 2012-01-01                              | 2013-04-0                             |
| VANGUARD BOND INDEX FUND - LT CAP GAIN                                                                                            | Р                                      | 2012-01-01                              | 2013-04-0                             |
| VANGUARD BOND INDEX FUND - LT CAP GAIN                                                                                            | Р                                      | 2012-01-01                              | 2013-12-3                             |
| WISDOMTREE JPN HDGD EQTY - ST CAP GAIN                                                                                            | Р                                      | 2012-01-01                              | 2013-12-3                             |
| WISDOMTREE JPN HDGD EQTY - LT CAP GAIN                                                                                            | Р                                      | 2012-01-01                              | 2013-12-3                             |

| (a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co ) | (b) How acquired P—Purchase D—Donation | (c) Date acquired<br>(mo , day, yr ) | ( <b>d)</b> Date sold<br>(mo , day, yr ) |
|-----------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|--------------------------------------|------------------------------------------|
| HITTITE MICROWAVE CORP                                                                                                            | D                                      | 2011-05-09                           | 2013-06-17                               |

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

| (e) Gross sales price | <b>(f)</b> Depreciation allowed (or allowable) | (g) Cost or other basis<br>plus expense of sale | (h) Gain or (loss)<br>(e) plus (f) minus (g) |
|-----------------------|------------------------------------------------|-------------------------------------------------|----------------------------------------------|
| 18,860                |                                                | 18,897                                          | -37                                          |
| 14,641                |                                                | 14,694                                          | -53                                          |
| 48,111                |                                                | 48,559                                          | -448                                         |
| 24,484                |                                                | 23,272                                          | 1,212                                        |
| 27,619                |                                                | 26,253                                          | 1,366                                        |
| 34,206                |                                                | 31,170                                          | 3,036                                        |
| 17,540                |                                                | 14,872                                          | 2,668                                        |
| 31,787                |                                                | 26,952                                          | 4,835                                        |
| 13,479                |                                                | 8,585                                           | 4,894                                        |
| 13,316                |                                                | 9,966                                           | 3,350                                        |
| 20,371                |                                                | 15,227                                          | 5,144                                        |
| 56,192                |                                                | 42,002                                          | 14,190                                       |
| 10,322                |                                                | 8,411                                           | 1,911                                        |
| 13,565                |                                                | 14,527                                          | -962                                         |
| 21,643                |                                                | 17,258                                          | 4,385                                        |
| 17,832                |                                                | 17,509                                          | 323                                          |
| 25,910                |                                                | 25,440                                          | 470                                          |
| 3,612                 |                                                | 3,062                                           | 550                                          |
| 6,194                 |                                                | 5,595                                           | 599                                          |
| 15,720                |                                                | 14,204                                          | 1,516                                        |
| 9,296                 |                                                | 9,186                                           | 110                                          |
| 12,175                |                                                | 12,562                                          | -387                                         |
| 51                    |                                                | 53                                              | -2                                           |
| 11,959                |                                                | 14,754                                          | -2,795                                       |
| 21,134                |                                                | 17,946                                          | 3,188                                        |
| 16,480                |                                                | 15,150                                          | 1,330                                        |
| 21,412                |                                                | 18,804                                          | 2,608                                        |
| 3,451                 |                                                | 3,015                                           | 436                                          |
| 19,727                |                                                | 18,927                                          | 800                                          |
| 14,371                |                                                | 14,161                                          | 210                                          |

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

| (e) Gross sales price | <b>(f)</b> Depreciation allowed (or allowable) | (g) Cost or other basis<br>plus expense of sale | <b>(h)</b> Gaın or (loss)<br>(e) plus (f) mınus (g) |
|-----------------------|------------------------------------------------|-------------------------------------------------|-----------------------------------------------------|
| 3,660                 |                                                | 3,665                                           | - 5                                                 |
| 634                   |                                                | 580                                             | 54                                                  |
| 18,598                |                                                | 17,005                                          | 1,593                                               |
| 10,956                |                                                | 9,240                                           | 1,716                                               |
| 21,427                |                                                | 17,950                                          | 3,47                                                |
| 18,927                |                                                | 18,686                                          | 24:                                                 |
| 14,290                |                                                | 14,366                                          | -7(                                                 |
| 51,647                |                                                | 46,788                                          | 4,859                                               |
| 9,628                 |                                                | 8,679                                           | 94                                                  |
| 28,360                |                                                | 23,799                                          | 4,56                                                |
| 13,185                |                                                | 13,229                                          | -4                                                  |
| 2,858                 |                                                | 2,868                                           | -1                                                  |
| 18,010                |                                                | 17,887                                          | 12                                                  |
| 27,114                |                                                | 25,455                                          | 1,65                                                |
| 47,792                |                                                | 45,858                                          | 1,93                                                |
| 31,505                |                                                | 30,758                                          | 74                                                  |
| 37,549                |                                                | 26,271                                          | 11,27                                               |
| 8,046                 |                                                | 5,864                                           | 2,18                                                |
| 23,736                |                                                | 17,308                                          | 6,42                                                |
| 7,534                 |                                                | 9,177                                           | -1,64                                               |
| 147                   |                                                | 119                                             | 2                                                   |
| 17,322                |                                                | 18,015                                          | -69                                                 |
| 6,486                 |                                                | 5,285                                           | 1,20                                                |
| 19,410                |                                                | 17,076                                          | 2,33                                                |
| 424                   |                                                | 387                                             | 3                                                   |
| 8,752                 |                                                | 6,887                                           | 1,86                                                |
| 20,116                |                                                | 15,830                                          | 4,28                                                |
| 167                   |                                                | 135                                             | 3                                                   |
| 7,191                 |                                                | 5,794                                           | 1,39                                                |
| 11,288                |                                                | 9,422                                           | 1,86                                                |

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

| (e) Gross sales price | <b>(f)</b> Depreciation allowed (or allowable) | (g) Cost or other basis<br>plus expense of sale | (h) Gain or (loss)<br>(e) plus (f) minus (g) |
|-----------------------|------------------------------------------------|-------------------------------------------------|----------------------------------------------|
| 254                   |                                                | 254                                             | (                                            |
| 16,816                |                                                | 17,215                                          | -399                                         |
| 54,708                |                                                | 47,819                                          | 6,889                                        |
| 25,609                |                                                | 25,609                                          | (                                            |
| 17,046                |                                                | 17,106                                          | -6                                           |
| 46,095                |                                                | 45,170                                          | 92.                                          |
| 10,243                |                                                | 10,268                                          | -2.                                          |
| 1,667                 |                                                | 1,574                                           | 9.                                           |
| 27,464                |                                                | 28,084                                          | -62                                          |
| 92,491                |                                                | 96,476                                          | -3,98                                        |
| 42,377                |                                                | 44,617                                          | -2,24                                        |
| 76,032                |                                                | 83,290                                          | -7,25                                        |
| 11,747                |                                                | 10,571                                          | 1,17                                         |
| 8,378                 |                                                | 7,606                                           | 77                                           |
| 29,610                |                                                | 29,469                                          | 14                                           |
| 18,237                |                                                | 18,181                                          | 5                                            |
| 13,115                |                                                | 13,195                                          | -8                                           |
| 21,644                |                                                | 21,831                                          | -18                                          |
| 2,843                 |                                                | 2,860                                           | -1                                           |
| 16,416                |                                                | 16,505                                          | -8                                           |
| 128                   |                                                |                                                 | 12                                           |
| 40                    |                                                |                                                 | 4                                            |
| 80                    |                                                |                                                 | 8                                            |
| 157                   |                                                |                                                 | 15                                           |
| 43                    |                                                |                                                 | 4                                            |
| 34                    |                                                |                                                 | 3                                            |
| 545                   |                                                |                                                 | 54                                           |
| 144                   |                                                |                                                 | 14                                           |
| 530                   |                                                |                                                 | 53                                           |
| 1,261                 |                                                |                                                 | 1,26                                         |

| (e) Gross sales price | <b>(f)</b> Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | <b>(h)</b> Gain or (loss)<br>(e) plus (f) minus (g) |
|-----------------------|------------------------------------------------|----------------------------------------------|-----------------------------------------------------|
| 173,779               |                                                | 20,198                                       | 153,581                                             |

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 |                                      | (I) Gains (Col (h) gain minus                         |                                                                    |
|---------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------------------------|--------------------------------------------------------------------|
| (i) F M V as of 12/31/69                                                                    | (j) Adjusted basis<br>as of 12/31/69 | ( <b>k)</b> Excess of col (ı)<br>over col (j), ıf any | col (k), but not less than -0-) <b>or</b><br>Losses (from col (h)) |
|                                                                                             |                                      |                                                       | -37                                                                |
|                                                                                             |                                      |                                                       | -53                                                                |
|                                                                                             |                                      |                                                       | -448                                                               |
|                                                                                             |                                      |                                                       | 1,212                                                              |
|                                                                                             |                                      |                                                       | 1,366                                                              |
|                                                                                             |                                      |                                                       | 3,036                                                              |
|                                                                                             |                                      |                                                       | 2,668                                                              |
|                                                                                             |                                      |                                                       | 4,835                                                              |
|                                                                                             |                                      |                                                       | 4,894                                                              |
|                                                                                             |                                      |                                                       | 3,350                                                              |
|                                                                                             |                                      |                                                       | 5,144                                                              |
|                                                                                             |                                      |                                                       | 14,190                                                             |
|                                                                                             |                                      |                                                       | 1,911                                                              |
|                                                                                             |                                      |                                                       | -962                                                               |
|                                                                                             |                                      |                                                       | 4,385                                                              |
|                                                                                             |                                      |                                                       | 323                                                                |
|                                                                                             |                                      |                                                       | 470                                                                |
|                                                                                             |                                      |                                                       | 550                                                                |
|                                                                                             |                                      |                                                       | 599                                                                |
|                                                                                             |                                      |                                                       | 1,516                                                              |
|                                                                                             |                                      |                                                       | 110                                                                |
|                                                                                             |                                      |                                                       | -387                                                               |
|                                                                                             |                                      |                                                       | -2                                                                 |
|                                                                                             |                                      |                                                       | -2,795                                                             |
|                                                                                             |                                      |                                                       | 3,188                                                              |
|                                                                                             |                                      |                                                       | 1,330                                                              |
|                                                                                             |                                      |                                                       | 2,608                                                              |
|                                                                                             |                                      |                                                       | 436                                                                |
|                                                                                             |                                      |                                                       | 800                                                                |
|                                                                                             |                                      |                                                       | 210                                                                |

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

| Complete only for assets showir | Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 |                                            | (I) Gains (Col (h) gain minus col (k), but not less than -0-) or |
|---------------------------------|---------------------------------------------------------------------------------------------|--------------------------------------------|------------------------------------------------------------------|
| (i) F M V as of 12/31/69        | (j) Adjusted basis as of 12/31/69                                                           | (k) Excess of col (ı) over col (j), ıf any | Losses (from col (h))                                            |
|                                 |                                                                                             |                                            | -5                                                               |
|                                 |                                                                                             |                                            | 54                                                               |
|                                 |                                                                                             |                                            | 1,593                                                            |
|                                 |                                                                                             |                                            | 1,716                                                            |
|                                 |                                                                                             |                                            | 3,477                                                            |
|                                 |                                                                                             |                                            | 241                                                              |
|                                 |                                                                                             |                                            | -76                                                              |
|                                 |                                                                                             |                                            | 4,859                                                            |
|                                 |                                                                                             |                                            | 949                                                              |
|                                 |                                                                                             |                                            | 4,561                                                            |
|                                 |                                                                                             |                                            | -44                                                              |
|                                 |                                                                                             |                                            | -10                                                              |
|                                 |                                                                                             |                                            | 123                                                              |
|                                 |                                                                                             |                                            | 1,659                                                            |
|                                 |                                                                                             |                                            | 1,934                                                            |
|                                 |                                                                                             |                                            | 747                                                              |
|                                 |                                                                                             |                                            | 11,278                                                           |
|                                 |                                                                                             |                                            | 2,182                                                            |
|                                 |                                                                                             |                                            | 6,428                                                            |
|                                 |                                                                                             |                                            | -1,643                                                           |
|                                 |                                                                                             |                                            | 28                                                               |
|                                 |                                                                                             |                                            | -693                                                             |
|                                 |                                                                                             |                                            | 1,201                                                            |
|                                 |                                                                                             |                                            | 2,334                                                            |
|                                 |                                                                                             |                                            | 37                                                               |
|                                 |                                                                                             |                                            | 1,865                                                            |
|                                 |                                                                                             |                                            | 4,286                                                            |
|                                 |                                                                                             |                                            | 32                                                               |
|                                 |                                                                                             |                                            | 1,397                                                            |
|                                 |                                                                                             |                                            | 1,866                                                            |

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 |                                      | (I) Gains (Col (h) gain minus              |                                                                    |
|---------------------------------------------------------------------------------------------|--------------------------------------|--------------------------------------------|--------------------------------------------------------------------|
| (i) F M V as of 12/31/69                                                                    | (j) Adjusted basis<br>as of 12/31/69 | (k) Excess of col (ı) over col (j), ıf any | col (k), but not less than -0-) <b>or</b><br>Losses (from col (h)) |
|                                                                                             |                                      |                                            | 0                                                                  |
|                                                                                             |                                      |                                            | -399                                                               |
|                                                                                             |                                      |                                            | 6,889                                                              |
|                                                                                             |                                      |                                            | 0                                                                  |
|                                                                                             |                                      |                                            | -60                                                                |
|                                                                                             |                                      |                                            | 925                                                                |
|                                                                                             |                                      |                                            | -25                                                                |
|                                                                                             |                                      |                                            | 93                                                                 |
|                                                                                             |                                      |                                            | -620                                                               |
|                                                                                             |                                      |                                            | -3,985                                                             |
|                                                                                             |                                      |                                            | -2,240                                                             |
|                                                                                             |                                      |                                            | -7,258                                                             |
|                                                                                             |                                      |                                            | 1,176                                                              |
|                                                                                             |                                      |                                            | 772                                                                |
|                                                                                             |                                      |                                            | 141                                                                |
|                                                                                             |                                      |                                            | 56                                                                 |
|                                                                                             |                                      |                                            | -80                                                                |
|                                                                                             |                                      |                                            | -187                                                               |
|                                                                                             |                                      |                                            | -17                                                                |
|                                                                                             |                                      |                                            | -89                                                                |
|                                                                                             |                                      |                                            | 128                                                                |
|                                                                                             |                                      |                                            | 40                                                                 |
|                                                                                             |                                      |                                            | 80                                                                 |
|                                                                                             |                                      |                                            | 157                                                                |
|                                                                                             |                                      |                                            | 43                                                                 |
|                                                                                             |                                      |                                            | 34                                                                 |
|                                                                                             |                                      |                                            | 545                                                                |
|                                                                                             |                                      |                                            | 144                                                                |
|                                                                                             |                                      |                                            | 530                                                                |
|                                                                                             |                                      |                                            | 1,261                                                              |

| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 |                                             |                                         | (I) Gains (Col (h) gain minus |
|---------------------------------------------------------------------------------------------|---------------------------------------------|-----------------------------------------|-------------------------------|
| (i) F M V as of 12/31/69                                                                    | <b>(j)</b> Adjusted basis<br>as of 12/31/69 | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |                               |
|                                                                                             |                                             |                                         | 153,581                       |

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

|                                                                                  |                                                         |                            | and real of Approved for i       |           |
|----------------------------------------------------------------------------------|---------------------------------------------------------|----------------------------|----------------------------------|-----------|
| Recipient                                                                        | If recipient is an individual, show any relationship to | Foundation<br>status of    | Purpose of grant or contribution | A mount   |
| Name and address (home or business)                                              | any foundation manager<br>or substantial contributor    | recipient                  |                                  |           |
| a Paid during the year                                                           |                                                         |                            |                                  |           |
| BOWDOIN COLLEGE 4101<br>COLLEGE STATION<br>BRUNSWICK, ME 040118432               | NONE                                                    | OTHER<br>PUBLIC<br>CHARITY | GENERAL SUPPORT                  | 25,000    |
| EAGLE MOUNT 6901<br>GOLDENSTEIN LANE<br>BOZEMAN,MT 59715                         | NONE                                                    | OTHER<br>PUBLIC<br>CHARITY | GENERAL SUPPORT                  | 5,000     |
| FOUNDATION FOR<br>CONTEMPORARY ARTS 820<br>GREENWICH STREET<br>NEW YORK,NY 10014 | NONE                                                    | OTHER<br>PUBLIC<br>CHARITY | GENERAL SUPPORT                  | 2,500     |
| FRIENDS OF THE PUBLIC GARDEN<br>69 BEACON STREET<br>BOSTON,MA 02108              | NONE                                                    | OTHER<br>PUBLIC<br>CHARITY | GENERAL SUPPORT                  | 2,500     |
| HARVARD BUSINESS SCHOOL 124<br>MOUNT AUBURN STREET<br>CAMBRIDGE,MA 021385795     | NONE                                                    | OTHER<br>PUBLIC<br>CHARITY | GENERAL SUPPORT                  | 200,000   |
| HOPE FUNDS 226 BELLEVUE<br>AVENUE SUITE 2<br>NEWPORT,RI 02840                    | NONE                                                    | OTHER<br>PUBLIC<br>CHARITY | GENERAL SUPPORT                  | 10,000    |
| ISABELLA STEWARD GARDNER<br>MUSEUM 280 THE FENWAY<br>BOSTON,MA 02115             | NONE                                                    | OTHER<br>PUBLIC<br>CHARITY | GENERAL SUPPORT                  | 10,000    |
| MASS GENERAL 100 CAMBRIDGE<br>STREET SUITE 1310<br>BOSTON,MA 021142548           | NONE                                                    | OTHER<br>PUBLIC<br>CHARITY | GENERAL SUPPORT                  | 25,000    |
| MATCH SCHOOL 1001<br>COMMONWEALTH AVENUE<br>BOSTON,MA 02215                      | NONE                                                    | OTHER<br>PUBLIC<br>CHARITY | GENERAL SUPPORT                  | 100,000   |
| MIAMI UNIVERSITY 725 EAST<br>CHESTNUT STREET<br>OXFORD,OH 450562480              | NONE                                                    | OTHER<br>PUBLIC<br>CHARITY | GENERAL SUPPORT                  | 15,000    |
| OUTSETUS 83 NEWBURY STREET 4<br>BOSTON,MA 02116                                  | NONE                                                    | OTHER<br>PUBLIC<br>CHARITY | GENERAL SUPPORT                  | 10,000    |
| OUTSETUS 83 NEWBURY STREET 4<br>BOSTON,MA 02116                                  | NONE                                                    | OTHER<br>PUBLIC<br>CHARITY | GENERAL SUPPORT                  | 12,500    |
| PARTNERS IN HEALTH 888<br>COMMONWEALTH AVE 3RD FLOOR<br>BOSTON,MA 02215          | NONE                                                    | OTHER<br>PUBLIC<br>CHARITY | GENERAL SUPPORT                  | 25,000    |
| SAVE OUR SOUND 4 BARNSTABLE<br>ROAD<br>HYANNIS,MA 02601                          | NONE                                                    | OTHER<br>PUBLIC<br>CHARITY | GENERAL SUPPORT                  | 5,000     |
| SECOND STEP PO BOX 600213<br>NEWTONVILLE, MA 024600002                           | NONE                                                    | OTHER<br>PUBLIC<br>CHARITY | GENERAL SUPPORT                  | 5,000     |
| Total                                                                            |                                                         |                            |                                  | 1,492,500 |

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

| Recipient                                                                                          | If recipient is an individual, show any relationship to | Foundation<br>status of    | Purpose of grant or contribution | A mount   |
|----------------------------------------------------------------------------------------------------|---------------------------------------------------------|----------------------------|----------------------------------|-----------|
| Name and address (home or business)                                                                | any foundation manager<br>or substantial contributor    | recipient                  |                                  |           |
| a Paid during the year                                                                             |                                                         |                            |                                  |           |
| TELLURIDE FOUNDATION 220<br>EAST COLORADO AVENUE SUITE<br>106<br>PO BOX 4222<br>TELLURIDE,CO 81435 | NONE                                                    | OTHER<br>PUBLIC<br>CHARITY | GENERAL SUPPORT                  | 25,000    |
| TELLURIDE FOUNDATION 220 EAST COLORADO AVENUE SUITE 106 PO BOX 4222 TELLURIDE,CO 81435             | NONE                                                    | OTHER<br>PUBLIC<br>CHARITY | GENERAL SUPPORT                  | 25,000    |
| TELLURIDE FOUNDATION 220 EAST COLORADO AVENUE SUITE 106 PO BOX 4222 TELLURIDE,CO 81435             | NONE                                                    | OTHER<br>PUBLIC<br>CHARITY | GENERAL SUPPORT                  | 5,000     |
| THE ONE FUND 18 TREMONT<br>STREET<br>BOSTON,MA 02108                                               | NONE                                                    | OTHER<br>PUBLIC<br>CHARITY | GENERAL SUPPORT                  | 25,000    |
| THE ROXBURY LATIN SCHOOL 101<br>ST THERESA AVENUE<br>WEST ROXBURY,MA 021323496                     | NONE                                                    | OTHER<br>PUBLIC<br>CHARITY | GENERAL SUPPORT                  | 200,000   |
| THE WINSOR SCHOOL PILGRIM<br>ROAD<br>BOSTON,MA 02215                                               | NONE                                                    | OTHER<br>PUBLIC<br>CHARITY | GENERAL SUPPORT                  | 250,000   |
| THE WINSOR SCHOOL PILGRIM<br>ROAD<br>BOSTON,MA 02215                                               | NONE                                                    | OTHER<br>PUBLIC<br>CHARITY | GENERAL SUPPORT                  | 5,000     |
| VANDERBILT UNIVERSITY 2301<br>VANDERBILT PLACE<br>NASHVILLE,TN 372407727                           | NONE                                                    | OTHER<br>PUBLIC<br>CHARITY | GENERAL SUPPORT                  | 500,000   |
| VICTORY PROGRAMS 965<br>MASSACHUSETTES AVENUE<br>BOSTON,MA 02118                                   | NONE                                                    | OTHER<br>PUBLIC<br>CHARITY | GENERAL SUPPORT                  | 5,000     |
| Total                                                                                              |                                                         |                            |                                  | 1,492,500 |

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491280001024

OMB No 1545-0047

0040

# Schedule B

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

Department of the Treasury Internal Revenue Service

# Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

2013

| Internal Revenue Service                          | <u>www.irs.gov/form990</u> . |              | I                   |
|---------------------------------------------------|------------------------------|--------------|---------------------|
| Name of the organization THE EVANS FAMILY FOUNDAT |                              | Employer ide | entification number |
|                                                   |                              | 04-352369    | 8                   |
|                                                   |                              |              |                     |

|        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 104-3523098                                                                                                                                                                                                                                                                                                                               |  |  |  |
|--------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| Organ  | ization type (check o                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ne)                                                                                                                                                                                                                                                                                                                                       |  |  |  |
| Filers | of:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Section:                                                                                                                                                                                                                                                                                                                                  |  |  |  |
| Form 9 | 990 or 990-EZ                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 501(c)( ) (enter number) organization                                                                                                                                                                                                                                                                                                     |  |  |  |
|        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation                                                                                                                                                                                                                                                          |  |  |  |
|        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 527 political organization                                                                                                                                                                                                                                                                                                                |  |  |  |
| Form 9 | 990-PF                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 501(c)(3) exempt private foundation                                                                                                                                                                                                                                                                                                       |  |  |  |
|        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 4947(a)(1) nonexempt charitable trust treated as a private foundation                                                                                                                                                                                                                                                                     |  |  |  |
|        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 501(c)(3) taxable private foundation                                                                                                                                                                                                                                                                                                      |  |  |  |
| ।⊽     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | ing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or<br>ne contributor Complete Parts I and II                                                                                                                                                                                                    |  |  |  |
| Γ      | under sections 509(a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 3) organization filing Form 990 or 990-EZ that met the 33 <sup>1</sup> /3% support test of the regulations (1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the or <b>(2)</b> 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II |  |  |  |
| Γ      | 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 for the prevention of cruelty to children or animals. Complete Parts I, II, and III                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                           |  |  |  |
| Γ      | 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 <i>exclusively</i> for religious, charitable, etc., purposes, but these contributions did not total more than \$1,000 if this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc., purpose. Do not complete any of the parts unless the <b>General Rule</b> applies to this organization because it received <i>nonexclusively</i> 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 its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization
THE EVANS FAMILY FOUNDATION

Employer identification number

04-3523698

| Part I     | Contributors (see instructions) Use duplicate copies of Part I if additional space is needed |                            |                                                                      |
|------------|----------------------------------------------------------------------------------------------|----------------------------|----------------------------------------------------------------------|
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                                            | (c)<br>Total contributions | (d)<br>Type of contribution                                          |
| _1_        | BRUCE R BRIDGITT B EVANS 31 ST JAMES AVENUE SUITE 740  BOSTON, MA 02116                      | \$500,000                  | Person Payroll Noncash  (Complete Part II for noncash contributions) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                                            | (c)<br>Total contributions | (d)<br>Type of contribution                                          |
|            |                                                                                              | \$                         | Person Payroll Noncash  (Complete Part II for noncash contributions) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                                            | (c)<br>Total contributions | (d)<br>Type of contribution                                          |
|            |                                                                                              | \$                         | Person Payroll Noncash  (Complete Part II for noncash contributions) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                                            | (c)<br>Total contributions | (d)<br>Type of contribution                                          |
|            |                                                                                              | \$                         | Person Payroll Noncash  (Complete Part II for noncash contributions) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                                            | (c)<br>Total contributions | (d)<br>Type of contribution                                          |
|            |                                                                                              | \$                         | Person Payroll Noncash  (Complete Part II for noncash contributions) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                                            | (c)<br>Total contributions | (d)<br>Type of contribution                                          |
|            |                                                                                              | \$                         | Person Payroll Noncash  (Complete Part II for noncash contributions) |

Name of organization
THE EVANS FAMILY FOUNDATION

**Employer identification number** 

04-3523698

| Part II                   | Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed |                                                | ,323030              |
|---------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------|
| (a) No.<br>from<br>Part I | (b)<br>Description of noncash property given                                                      | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
|                           |                                                                                                   | \$                                             |                      |
| (a) No.<br>from<br>Part I | (b)<br>Description of noncash property given                                                      | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
|                           |                                                                                                   | \$                                             |                      |
| (a) No.<br>from<br>Part I | (b)<br>Description of noncash property given                                                      | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
|                           |                                                                                                   | \$                                             |                      |
| (a) No.<br>from<br>Part I | (b)<br>Description of noncash property given                                                      | (c) FMV (or estimate) (see instructions)       | (d)<br>Date received |
|                           |                                                                                                   | \$                                             |                      |
| (a) No.<br>from<br>Part I | (b)<br>Description of noncash property given                                                      | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received |
|                           |                                                                                                   | \$                                             |                      |
| (a) No.<br>from<br>Part I | (b)<br>Description of noncash property given                                                      | (c) FMV (or estimate) (see instructions)       | (d)<br>Date received |
|                           |                                                                                                   | \$                                             |                      |

| Schedule I                | B (Form 990, 990-EZ, or 990-PF) (2013)                                                                                                                                                                                                                                    |                                                                                                           | Page                                                        |
|---------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
|                           | organization<br>FAMILY FOUNDATION                                                                                                                                                                                                                                         |                                                                                                           | Employer identification number                              |
|                           |                                                                                                                                                                                                                                                                           |                                                                                                           | 04-3523698                                                  |
| Part III                  | Exclusively religious, charitable, etc., ind that total more than \$1,000 for the year. Of the organizations completing Part III, enter the contributions of \$1,000 or less for the year. Use duplicate copies of Part III if additional spanning the state of the year. | Complete columns <b>(a)</b> through total of <i>exclusively</i> religious, (Enter this information once s | n <b>(e) and</b> the following line entry charitable, etc , |
| (a) No.<br>from<br>Part I | (b) Purpose of gift                                                                                                                                                                                                                                                       | (c) Use of gift                                                                                           | (d) Description of how gift is held                         |
|                           | Transferee's name, address, and                                                                                                                                                                                                                                           | (e) Transfer of g<br>ZIP 4                                                                                | gift Relationship of transferor to transferee               |
| (a) Na                    |                                                                                                                                                                                                                                                                           |                                                                                                           |                                                             |
| (a) No.<br>from<br>Part I | (b) Purpose of gift                                                                                                                                                                                                                                                       | (c) Use of gift                                                                                           | (d) Description of how gift is held                         |
| -                         | Transferee's name, address, and                                                                                                                                                                                                                                           | (e) Transfer of g<br>ZIP 4                                                                                | gift Relationship of transferor to transferee               |
|                           |                                                                                                                                                                                                                                                                           |                                                                                                           |                                                             |
| (a) No.<br>from<br>Part I | (b) Purpose of gift                                                                                                                                                                                                                                                       | (c) Use of gift                                                                                           | (d) Description of how gift is held                         |
|                           |                                                                                                                                                                                                                                                                           | (e) Transfer of g                                                                                         |                                                             |
| -                         | Transferee's name, address, and                                                                                                                                                                                                                                           | <u>ZIP 4</u>                                                                                              | Relationship of transferor to transferee                    |
| (a) No.<br>from<br>Part I | (b) Purpose of gift                                                                                                                                                                                                                                                       | (c) Use of gift                                                                                           | (d) Description of how gift is held                         |
|                           |                                                                                                                                                                                                                                                                           |                                                                                                           |                                                             |
|                           | Transferee's name, address, and                                                                                                                                                                                                                                           | (e) Transfer of g                                                                                         | gift Relationship of transferor to transferee               |
|                           |                                                                                                                                                                                                                                                                           |                                                                                                           |                                                             |

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - DLN: 93491280001024

## **TY 2013 Other Assets Schedule**

Name: THE EVANS FAMILY FOUNDATION

| Description | Beginning of Year - | End of Year - Book | End of Year - Fair |
|-------------|---------------------|--------------------|--------------------|
|             | Book Value          | Value              | Market Value       |
| ETFS        | 2,635,076           | 1,978,470          | 2,163,955          |

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - DLN: 93491280001024

# **TY 2013 Other Expenses Schedule**

Name: THE EVANS FAMILY FOUNDATION

| Description                           | Revenue and Expenses<br>per Books | Net Investment<br>Income | Adjusted Net Income | Disbursements for<br>Charitable Purposes |
|---------------------------------------|-----------------------------------|--------------------------|---------------------|------------------------------------------|
| OTHER EXPENSES                        | 1,851                             | 1,851                    |                     | 0                                        |
| POWERSHARES LOSSES REPORTED<br>ON K-1 | 6,666                             | 6,666                    |                     | 0                                        |



## **TY 2013 Other Increases Schedule**

Name: THE EVANS FAMILY FOUNDATION

| Description                 | Amount  |
|-----------------------------|---------|
| STOCK DONATED IN PRIOR YEAR | 199,420 |

#### **TY 2013 Other Professional Fees Schedule**

Name: THE EVANS FAMILY FOUNDATION

| Category         | Amount | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements for<br>Charitable<br>Purposes |
|------------------|--------|--------------------------|------------------------|---------------------------------------------|
| CAPITAL GUARDIAN | 0      | 0                        |                        | 0                                           |
| CHARLES SCHWAB   | 20,640 | 20,640                   |                        | 0                                           |



## **TY 2013 Substantial Contributors Schedule**

Name: THE EVANS FAMILY FOUNDATION

| Name                     | Address                                      |
|--------------------------|----------------------------------------------|
| BRUCE R BRIDGITT B EVANS | 31 ST JAMES AVE SUITE 740<br>BOSTON,MA 02116 |

## **TY 2013 Taxes Schedule**

Name: THE EVANS FAMILY FOUNDATION

| Category           | Amount | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements for<br>Charitable<br>Purposes |
|--------------------|--------|--------------------------|------------------------|---------------------------------------------|
| MASSACHUSETTS FEES | 500    | 500                      |                        | 0                                           |