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Form **990-PF****Return of Private Foundation**  
or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

**2014**Department of the Treasury  
Internal Revenue Service▶ Do not enter social security numbers on this form as it may be made public.  
▶ Information about Form 990-PF and its separate instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).

Open to Public Inspection

For calendar year 2014 or tax year beginning 07/18/14, and ending 12/31/14

Name of foundation <b>CSP CHARITABLE FOUNDATION</b>		A Employer identification number <b>47-1397117</b>
Number and street (or P.O. box number if mail is not delivered to street address) <b>33 POND AVENUE</b>	Room/suite <b>1219</b>	B Telephone number (see instructions) <b>617-738-0107</b>
City or town, state or province, country, and ZIP or foreign postal code <b>BROOKLINE MA 02445</b>		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input checked="" type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ <b>1,167,085</b>	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>
(Part I, column (d) must be on cash basis.)		

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	1 Contributions, gifts, grants, etc., received (attach schedule)	<b>1,507,136</b>			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	<b>35</b>	<b>35</b>		
	4 Dividends and interest from securities	<b>4,347</b>	<b>4,347</b>		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	<b>415,037</b>			
	b Gross sales price for all assets on line 6a <b>1,266,141</b>		<b>415,037</b>		
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)					
12 <b>Total. Add lines 1 through 11</b>	<b>1,926,555</b>	<b>419,419</b>	<b>0</b>		
<b>Operating and Administrative Expenses</b>	13 Compensation of officers, directors, trustees, etc.	<b>0</b>			
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)				
	c Other professional fees (attach schedule) <b>STMT 1</b>	<b>732</b>	<b>732</b>		
	17 Interest				
	18 Taxes (attach schedule) (see instructions) <b>STMT 2</b>	<b>38</b>	<b>38</b>		
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
21 Travel, conferences, and meetings					
22 Printing and publications					
23 Other expenses (attach schedule)					
24 <b>Total operating and administrative expenses. Add lines 13 through 23</b>	<b>770</b>	<b>770</b>	<b>0</b>	<b>0</b>	
25 Contributions, gifts, grants paid <b>SEE STATEMENT 3</b>	<b>337,000</b>			<b>337,000</b>	
26 <b>Total expenses and disbursements. Add lines 24 and 25</b>	<b>337,770</b>	<b>770</b>	<b>0</b>	<b>337,000</b>	
27 Subtract line 26 from line 12.					
a <b>Excess of revenue over expenses and disbursements</b>	<b>1,588,785</b>				
b <b>Net investment income</b> (if negative, enter -0-)		<b>418,649</b>			
c <b>Adjusted net income</b> (if negative, enter -0-)			<b>0</b>		

For Paperwork Reduction Act Notice, see instructions.

DAA

Form **990-PF** (2014)

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Form 990-PF (2014) **CSP CHARITABLE FOUNDATION**

47-1397117

Page **2****Part II Balance Sheets** Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	1 Cash – non-interest-bearing		226,680	226,681
	2 Savings and temporary cash investments		940,404	940,404
	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 (att schedule) ▶	0		
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments – U S and state government obligations (attach schedule)			
	b Investments – corporate stock (attach schedule)			
	c Investments – corporate bonds (attach schedule)			
	11 Investments – land, buildings, and equipment basis ▶			
Less: accumulated depreciation (attach sch) ▶				
12 Investments – mortgage loans				
13 Investments – other (attach schedule)				
14 Land, buildings, and equipment basis ▶				
Less: accumulated depreciation (attach sch) ▶				
15 Other assets (describe ▶)				
16 <b>Total assets</b> (to be completed by all filers – see the instructions. Also, see page 1, item I)	0	1,167,084	1,167,085	
<b>Liabilities</b>	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶)			
	23 <b>Total liabilities</b> (add lines 17 through 22)	0	0	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.</b> ▶ <input checked="" type="checkbox"/>			
	24 Unrestricted		1,167,084	
	25 Temporarily restricted			
	26 Permanently restricted			
	<b>Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.</b> ▶ <input type="checkbox"/>			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg., and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
	30 <b>Total net assets or fund balances</b> (see instructions)	0	1,167,084	
	31 <b>Total liabilities and net assets/fund balances</b> (see instructions)	0	1,167,084	

**Part III Analysis of Changes in Net Assets or Fund Balances**

1 Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	0
2 Enter amount from Part I, line 27a	2	1,588,785
3 Other increases not included in line 2 (itemize) ▶	3	
4 Add lines 1, 2, and 3	4	1,588,785
5 Decreases not included in line 2 (itemize) ▶ <b>SEE STATEMENT 4</b>	5	421,701
6 <b>Total net assets or fund balances at end of year</b> (line 4 minus line 5) – Part II, column (b), line 30	6	1,167,084

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a STOCKS</b>		<b>D</b>	<b>01/01/10</b>	<b>10/16/14</b>
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				

  

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a 1,266,141</b>		<b>851,104</b>	<b>415,037</b>
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
<b>a</b>			<b>415,037</b>
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

<b>2 Capital gain net income or (net capital loss)</b>	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	<b>2</b>	<b>415,037</b>
<b>3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)</b>		<b>3</b>	
If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8			

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

**N/A**

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☐ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

**1** Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2013			
2012			
2011			
2010			
2009			

  

<b>2 Total of line 1, column (d)</b>	<b>2</b>	
<b>3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years</b>	<b>3</b>	
<b>4 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5</b>	<b>4</b>	
<b>5 Multiply line 4 by line 3</b>	<b>5</b>	
<b>6 Enter 1% of net investment income (1% of Part I, line 27b)</b>	<b>6</b>	
<b>7 Add lines 5 and 6</b>	<b>7</b>	
<b>8 Enter qualifying distributions from Part XII, line 4</b>	<b>8</b>	

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

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)**

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter. (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b	1	8,373
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
<b>3</b>	Add lines 1 and 2	3	8,373
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-	5	8,373
<b>6</b>	<b>Credits/Payments:</b>		
<b>a</b>	2014 estimated tax payments and 2013 overpayment credited to 2014	6a	
<b>b</b>	Exempt foreign organizations – tax withheld at source	6b	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868)	6c	
<b>d</b>	Backup withholding erroneously withheld	6d	
<b>7</b>	Total credits and payments. Add lines 6a through 6d	7	
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	105
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b>	9	8,478
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b>	10	
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2015 estimated tax</b> <input type="checkbox"/> <b>Refunded</b> <input type="checkbox"/>	11	

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year?		X
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input type="checkbox"/> \$ _____ (2) On foundation managers. <input type="checkbox"/> \$ _____		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="checkbox"/> \$ _____		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities		X
<b>3</b> 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		X
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?		
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		X
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?		X
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		X
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> <b>MA</b>		
<b>b</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		X
<b>9</b> 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 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV		X
<b>10</b> Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

N/A

STMT 5

**Part VII-A Statements Regarding Activities (continued)**

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <b>N/A</b>	13	X	
14	The books are in care of ► <b>ANNE S. COVERT</b> <b>33 POND AVE APT. 1219</b> Located at ► <b>BROOKLINE</b> MA ZIP+4 ► <b>02445</b>	Telephone no. ► <b>617-738-0107</b>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – Check here and enter the amount of tax-exempt interest received or accrued during the year	15		
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the foreign country ►	16	Yes	No
				X

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

	Yes	No
1a During the year did the foundation (either directly or indirectly)		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(6) Agree to pay money or property to a government official? (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.)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b If any answer is "Yes" to 1a(1)–(6), did any 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 instructions)? Organizations relying on a current notice regarding disaster assistance check here	N/A	
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 2014?	N/A	
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014? If "Yes," list the years ► 20 , 20 , 20 , 20	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b Are there any years listed in 2a for which the foundation is not 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 all years listed, answer "No" and attach statement – see instructions )	N/A	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ► 20 , 20 , 20 , 20		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014.)	N/A	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?		X

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)****5a** During the year did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions)

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No**b** If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

N/A

**5b**

Organizations relying on a current notice regarding disaster assistance check here

☒**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?N/A ☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945–5(d)

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?**6b****X**

If "Yes" to 6b, file Form 8870

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?☐ Yes ☒ No**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

**7b****Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1** List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ANNE S. COVERT 1219 POND AVENUE APT. 1219 BROOKLINE MA 02445	TRUSTEE 2.00	0	0	0

**2** Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

**Total number of other employees paid over \$50,000****0**

**Part VII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3** Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services ▶**Part IX-A** Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
<b>1</b> N/A	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**Part IX-B** Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

	Amount
<b>1</b> N/A	
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b>	
<b>Total.</b> Add lines 1 through 3 <span style="float: right;">▶</span>	



**Part X** **Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities	<b>1a</b>	1,055,000
<b>b</b>	Average of monthly cash balances	<b>1b</b>	225,000
<b>c</b>	Fair market value of all other assets (see instructions)	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c)	<b>1d</b>	1,280,000
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	1,280,000
<b>4</b>	Cash deemed held for charitable activities. Enter 1½% of line 3 (for greater amount, see instructions)	<b>4</b>	19,200
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	1,260,800
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5	<b>6</b>	28,843

**Part XI** **Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6	<b>1</b>	28,843
<b>2a</b>	Tax on investment income for 2014 from Part VI, line 5	<b>2a</b>	8,373
<b>b</b>	Income tax for 2014. (This does not include the tax from Part VI.)	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b	<b>2c</b>	8,373
<b>3</b>	Distributable amount before adjustments Subtract line 2c from line 1	<b>3</b>	20,470
<b>4</b>	Recoveries of amounts treated as qualifying distributions	<b>4</b>	
<b>5</b>	Add lines 3 and 4	<b>5</b>	20,470
<b>6</b>	Deduction from distributable amount (see instructions)	<b>6</b>	
<b>7</b>	<b>Distributable amount as adjusted.</b> Subtract line 6 from line 5. Enter here and on Part XIII, line 1	<b>7</b>	20,470

**Part XII** **Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	<b>1a</b>	337,000
<b>b</b>	Program-related investments – total from Part IX-B	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required)	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule)	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	337,000
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	<b>5</b>	0
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4	<b>6</b>	337,000

**Note.** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
<b>1</b> Distributable amount for 2014 from Part XI, line 7				<b>20,470</b>
<b>2</b> Undistributed income, if any, as of the end of 2014:				
<b>a</b> Enter amount for 2013 only				
<b>b</b> Total for prior years. 20____, 20____, 20____				
<b>3</b> Excess distributions carryover, if any, to 2014:				
<b>a</b> From 2009				
<b>b</b> From 2010				
<b>c</b> From 2011				
<b>d</b> From 2012				
<b>e</b> From 2013				
<b>f</b> Total of lines 3a through e				
<b>4</b> Qualifying distributions for 2014 from Part XII, line 4: <b>▶ \$ 337,000</b>				
<b>a</b> Applied to 2013, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required – see instructions)				
<b>c</b> Treated as distributions out of corpus (Election required – see instructions)				
<b>d</b> Applied to 2014 distributable amount				<b>20,470</b>
<b>e</b> Remaining amount distributed out of corpus	<b>316,530</b>			
<b>5</b> Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a).)				
<b>6</b> Enter the net total of each column as indicated below:	<b>316,530</b>			
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b				
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
<b>d</b> Subtract line 6c from line 6b. Taxable amount – see instructions				
<b>e</b> Undistributed income for 2013. Subtract line 4a from line 2a. Taxable amount – see instructions				
<b>f</b> Undistributed income for 2014. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015				<b>0</b>
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)				
<b>8</b> Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions)				
<b>9</b> Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	<b>316,530</b>			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2010				
<b>b</b> Excess from 2011				
<b>c</b> Excess from 2012				
<b>d</b> Excess from 2013				
<b>e</b> Excess from 2014	<b>316,530</b>			



**Part XV** **Supplementary Information (continued)****3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year <b>SEE STATEMENT 6</b>				<b>337,000</b>
<b>Total</b>			<b>▶ 3a</b>	<b>337,000</b>
<b>b</b> Approved for future payment <b>N/A</b>				
<b>Total</b>			<b>▶ 3b</b>	





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

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

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

OMB No 1545-0047

**2014**

▶ Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

Employer identification number

**CSP CHARITABLE FOUNDATION**

**47-1397117**

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☐ 501(c)( ) (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

☐ 527 political organization

Form 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

Check if your organization is covered by the **General Rule** or a **Special Rule**.

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

**General Rule**

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub> % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 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
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$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 990-PF, 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

CSP CHARITABLE FOUNDATION

Employer identification number

47-1397117

**Part I** Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ANNE S. COVERT 33 POND AVE #1219  BROOKLINE MA 02445	\$ 1,507,136	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization

CSP CHARITABLE FOUNDATION

Employer identification number

47-1397117

**Part II** Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	APPRECIATED SECURITIES	\$ 1,507,136	10/02/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

## Federal Statements

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Statement 1 - Form 990-PF, Part I, Line 16c - Other Professional Fees

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
MS MANAGEMENT FEES	\$ 732	\$ 732	\$	\$
TOTAL	\$ 732	\$ 732	\$ 0	\$ 0

Statement 2 - Form 990-PF, Part I, Line 18 - Taxes

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
FOREIGN TAXES PAID	\$ 38	\$ 38	\$	\$
TOTAL	\$ 38	\$ 38	\$ 0	\$ 0

Statement 3 - Form 990-PF, Part I, Line 25 - Noncash Contributions, Gifts, Grants

Amount	Noncash Description	FMV Explanation	Book Value Amount	Book Value Explanation	Date
10,000					11/18/14
1,000					11/18/14
1,000					11/18/14
5,000					11/18/14
10,000					11/18/14
5,000					11/18/14
7,500					11/18/14
1,000					11/18/14
25,000					11/18/14
2,000					11/18/14
500					11/18/14
3,000					11/18/14
12,000					11/18/14
7,500					11/18/14
7,500					11/18/14
1,000					11/18/14
4,000					11/18/14
2,000					11/18/14

**Federal Statements**

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**Statement 3 - Form 990-PF, Part I, Line 25 - Noncash Contributions, Gifts, Grants**  
**(continued)**

<u>Amount</u>	<u>Noncash Description</u>	<u>FMV Explanation</u>	<u>Book Value Amount</u>	<u>Book Value Explanation</u>	<u>Date</u>
10,000					11/18/14
10,000					11/18/14
10,000					11/18/14
10,000					11/18/14
5,000					11/18/14
10,000					11/18/14
5,000					11/18/14
500					11/18/14
5,000					11/18/14
5,000					11/18/14
10,000					11/18/14
5,000					11/18/14
1,000					11/18/14
4,000					11/18/14
5,000					11/18/14
1,000					11/18/14
5,000					11/18/14
3,000					11/18/14
1,000					11/18/14
5,000					11/18/14
10,000					11/18/14
1,000					11/18/14
1,000					11/18/14
10,000					11/18/14
2,000					11/18/14
10,000					11/18/14
7,500					11/18/14
7,500					11/18/14
7,000					11/18/14
5,000					11/18/14
1,000					11/18/14
5,000					11/18/14
1,000					11/18/14
7,500					11/18/14
1,000					11/24/14

## Federal Statements

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47-1397117

FYE: 12/31/2014

Statement 3 - Form 990-PF, Part I, Line 25 - Noncash Contributions, Gifts, Grants  
(continued)

Amount	Noncash Description	FMV Explanation	Book Value Amount	Book Value Explanation	Date
10,000					11/24/14
7,500					11/24/14
7,500					11/24/14
7,500					11/24/14
1,000					11/24/14
3,000					11/24/14
1,500					11/24/14
2,500					11/24/14
500					11/24/14
1,000					11/18/14
3,000					11/18/14

**Federal Statements****Statement 4 - Form 990-PF, Part III, Line 5 - Other Decreases**

<u>Description</u>	<u>Amount</u>
CAPITAL GAIN FOR TAXES, NOT BOOKS	\$ <u>421,701</u>
TOTAL	\$ <u><u>421,701</u></u>

## Federal Statements

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Statement 5 - Form 990-PF, Part VII-A, Line 10 - Substantial Contributors

Name	Address	City, State, Zip
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ANNE S. COVERT	33 POND AVENUE APT. 1219	BROOKLINE MA 02445
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Statement 6 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

Name	Address	Relationship	Status	Purpose	Amount
350.ORG SKY EDUCATION FUND	20 JAY ST SUITE 1010		EXEMPT	CHARITABLE	10,000
BROOKLYN NY 11201					
826 BOSTON	3035 WASHINGTON ST		EXEMPT	CHARITABLE	1,000
ROXBURY MA 02119					
ADOLESCENT CONSULTATION SERVICES	189 CAMBRIDGE ST		EXEMPT	CHARITABLE	1,000
CAMBRIDGE MA 02141					
ALTERNATIVES COMM & ENVIRONMENT	2201 WASHINGTON ST #302		EXEMPT	CHARITABLE	5,000
ROXBURY MA 02119					
AUDUBON SOCIETY WESTERN PA	614 DORSEYVILLE RD		EXEMPT	CHARITABLE	10,000
PITTSBURGH PA 15238					
BERKS GAS TRUTH	925 CANAL ST #3701		EXEMPT	CHARITABLE	5,000
BRISTOL PA 19007					
BOSTON HEALTH CARE HOMELESS	780 ALBANY ST		EXEMPT	CHARITABLE	7,500
BOSTON MA 02118					
BROOKLINE ARTS CENTER	86 MONMOUTH ST		EXEMPT	CHARITABLE	1,000
BROOKLINE MA 02446					
BROOKLINE COMMUNITY FOUNDATION	40 WEBSTER PLACE		EXEMPT	CHARITABLE	25,000
BROOKLINE MA 02445					
BROOKLINE LIBRARY FOUNDATION	361 WASHINGTON ST		EXEMPT	CHARITABLE	2,000
BROOKLINE MA 02445					
BROOKLINE SENIOR CENTER	93 WINCHESTER ST		EXEMPT	CHARITABLE	500
BROOKLINE MA 02446					
CAMP ARANUTIQ	PO BOX 620141		EXEMPT	CHARITABLE	3,000
NEWTON LOWER FALLS MA 024					
CARROLL CENTER FOR BLIND	770 CENTRE ST		EXEMPT	CHARITABLE	12,000
NEWTON MA 02458					

## Federal Statements

**Statement 6 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the  
Year (continued)**

Name		Address		Relationship	Status	Purpose	Amount
CARTER CENTER	ATLANTA GA 30307	453 FREEDOM PARKWAY	EXEMPT			CHARITABLE	7,500
CASA MYRNA VAZQUEZ	BOSTON MA 02118	38 WAREHAM ST	EXEMPT			CHARITABLE	7,500
CHARLES RIVER CONSERVANCY	CAMBRIDGE MA 02138	4 BRATTLE ST #309	EXEMPT			CHARITABLE	1,000
CHILDREN'S DEFENSE FUND	WASHINGTON DC 20001	25 E ST, NW	EXEMPT			CHARITABLE	4,000
COMMUNITY RESEARCH INITIATIVE	BOSTON MA 02111	38 CHAUNCEY ST SUITE 500	EXEMPT			CHARITABLE	2,000
DOCTORS WITHOUT BORDERS	NEW YORK NY 10001	333 SEVENTH AVE, 2ND FL	EXEMPT			CHARITABLE	10,000
EARTH JUSTICE	SAN FRANCISCO CA 94111	50 CALIFORNIA ST # 500	EXEMPT			CHARITABLE	10,000
EARTHWORKS	WASHINGTON DC 20006	1612 K ST NW, #808	EXEMPT			CHARITABLE	10,000
ENVIRONMENTAL DEFENSE FUND	NEW YORK NY 10010	257 PARK AVE SOUTH	EXEMPT			CHARITABLE	10,000
FARM SCHOOL	ATHOL MA 01331	488 MOORE HILL RD	EXEMPT			CHARITABLE	5,000
FOOD AND WATER WATCH	WASHINGTON DC 20036	1616 P ST, NW #300	EXEMPT			CHARITABLE	10,000
FOOD PROJECT	LINCOLN MA 01773	10 LEWIS ST	EXEMPT			CHARITABLE	5,000
FRIENDS OF MT AUBURN	CAMBRIDGE MA 02138	580 MT AUBURN ST	EXEMPT			CHARITABLE	500
GRASSROOTS GLOBAL JUSTICE	PHILADELPHIA PA 19143	4919 PENTRIDGE ST	EXEMPT			CHARITABLE	5,000
GRASSROOTS INTERNATIONAL	JAMAICA PLAIN MA 02130	179 BOYLSTON ST 4TH FL	EXEMPT			CHARITABLE	5,000
GREATER BOSTON FOOD BANK	BOSTON MA 02118	70 SOUTH BAY AVE	EXEMPT			CHARITABLE	10,000
HABITAT FOR HUMANITY GREATER BOSTON	BOSTON MA 02109	240 COMMERCIAL ST 4TH FL	EXEMPT			CHARITABLE	5,000

## Federal Statements

Statement 6 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the  
Year (continued)

Name		Address		Relationship	Status	Purpose	Amount
HEALTH CARE FOR ALL BOSTON MA 02108	HOSPITAL ALBERT SCHWEITZER PITTSBURGH PA 15222	MADRE	NEW YORK NY 10001	30 WINTER ST 10TH FL	EXEMPT	CHARITABLE	1,000
				2840 LIBERTY AVE	EXEMPT	CHARITABLE	4,000
MANAGEMENT ASSISTANCE GROUP WASHINGTON DC 20004	MARCELLUS OUTREACH BUTLER PITTSBURGH PA 15224	MASS EQUALITY EDUCATION FUND BOSTON MA 02109	NATIONAL ALLIANCE FILIPINO CONCERNS SAN FRANCISCO CA 94112	121 W 27 ST ROOM 301	EXEMPT	CHARITABLE	5,000
				1155 F ST NW, SUITE 1050	EXEMPT	CHARITABLE	1,000
NATIONAL PARKS CONSERVATION ASSN WASHINGTON DC 20001	NATURAL RESOURCES DEFENSE COUNCIL NEW YORK NY 10011	NATURE CONSERVANCY ARLINGTON VA 22003	NO FRACKED GAS IN MASS PITTSFIELD MA 01201	5129 PENN AVE	EXEMPT	CHARITABLE	5,000
				5 BROAD ST, 3RD FL	EXEMPT	CHARITABLE	3,000
NATURE CONSERVANCY ARLINGTON VA 22003	OIL CHANGE INTERNATIONAL WASHINGTON DC 20003	OXFAM AMERICA BOSTON MA 02114	PENN ENVIRONMENT RESEARCH LOS ANGELES CA 90010	4681 MISSION ST	EXEMPT	CHARITABLE	1,000
				777 6TH ST NW, #700	EXEMPT	CHARITABLE	5,000
PENN ENVIRONMENT RESEARCH LOS ANGELES CA 90010	PINE STREET INN BOSTON MA 02118	PLANNED PARENTHOOD OVERLAND PARK KS 66211	PRIMARY SOURCE WATERTOWN MA 02472	40 W 20TH ST	EXEMPT	CHARITABLE	10,000
				4245 N FAIRFAX DR #100	EXEMPT	CHARITABLE	1,000
PINE STREET INN BOSTON MA 02118	PLANNED PARENTHOOD OVERLAND PARK KS 66211	PRIMARY SOURCE WATERTOWN MA 02472		29 HIGHLAND AVE	EXEMPT	CHARITABLE	1,000
				714 G ST SE #202	EXEMPT	CHARITABLE	10,000
PLANNED PARENTHOOD OVERLAND PARK KS 66211	PRIMARY SOURCE WATERTOWN MA 02472			226 CAUSEWAY ST 5TH FL	EXEMPT	CHARITABLE	2,000
				3435 WILSHIRE BLVD #385	EXEMPT	CHARITABLE	10,000
PRIMARY SOURCE WATERTOWN MA 02472				444 HARRISON AVE	EXEMPT	CHARITABLE	7,500
				4401 W 109TH ST #200	EXEMPT	CHARITABLE	7,500
				101 WALNUT ST	EXEMPT	CHARITABLE	7,000



## Federal Statements

**Statement 6 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the  
Year (continued)**

Name		Address		Relationship	Status	Purpose	Amount
Address							
PROJECT BREAD		145 BORDER ST	EXEMPT			CHARITABLE	5,000
E BOSTON MA 02128		ONE COMMON GROUND	EXEMPT			CHARITABLE	1,000
PROJECT VOTE SMART		4808 WINDSOR AVE	EXEMPT			CHARITABLE	5,000
PHILLIPSBURG MT 59858		116 PLEASANT ST #348	EXEMPT			CHARITABLE	1,000
PROTECTING OUR WATERS		889 HARRISON AVE	EXEMPT			CHARITABLE	7,500
PHILADELPHIA PA 19143		PO BOX 233	EXEMPT			CHARITABLE	1,000
ROSENBERG FUND FOR CHILDREN		83 POPLAR ST NW	EXEMPT			CHARITABLE	10,000
EASTHAMPTON MA 01027		400 WASHINGTON AVE	EXEMPT			CHARITABLE	7,500
ROSIE'S PLACE		138 TREMONT ST	EXEMPT			CHARITABLE	7,500
BOSTON MA 02118		900 ALICE ST #400	EXEMPT			CHARITABLE	7,500
SLIPPERY ROCK UNIVERSITY		198 COLLEGE HILL RD	EXEMPT			CHARITABLE	1,000
SLIPPERY ROCK PA 16057		572 ESSEX ST	EXEMPT			CHARITABLE	3,000
SOUTHERN CENTER FOR HUMAN RIGHTS		TWO BRATTLE SQUARE	EXEMPT			CHARITABLE	1,500
ATLANTA GA 30303		102 SHANNON ROAD	EXEMPT			CHARITABLE	2,500
SOUTHERN POVERTY LAW CENTER		890 COMMONWEALTH AVE	EXEMPT			CHARITABLE	500
MONTGOMERY AL 36104		ONE GUEST STREET	EXEMPT			CHARITABLE	1,000
ST PAUL'S CATHEDRAL		PO BOX 170900	EXEMPT			CHARITABLE	3,000
BOSTON MA 02111							
TIGRA							
OAKLAND CA 94607							
TRUSTEES OF HAMILTON COLLEGE							
CLINTON NY 13323							
TRUSTEES OF RESERVATIONS							
BEVERLY MA 01915							
UNION OF CONCERNED SCIENTISTS							
CAMBRIDGE MA 02138							
WATER FOR WOODLANDS							
RENFREW PA 16053							
WBUR							
BOSTON MA 02215							
WGBH EDUCATIONAL FOUNDATION							
BOSTON MA 02135							
WOMEN'S LUNCH PLACE							
BOSTON MA 02117							

**Federal Statements**

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**Statement 6 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)**

Name		Address		Relationship	Status	Purpose	Amount			
Address										
TOTAL								337,000		