EXTENDED TO JANUARY 17, 2017 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.

OMB No 1545-0052

Intern	tment of the Treasury al Revenue Service	► Informa	ation about Fo	orm 990-PF and its	separate	instructions	ıs at www.irs	gov/form990pf.		Open to Public Inspection
For o	alendar year 2015 o	r tax year beginnin	ig MA	R 1, 2015)	, and e	ndıng	FEB 29, 3	2016	
K.	ne of foundation			rephen R.	AND			A Employer ident		number
	ILL E. KAI						ri=:	04-322		
	ber and street (or PO bo			*	_		Room/suite	B Telephone num		T 0 0
	/O NED, 7!)R			(617)9		
-	or town, state or pro	vince, country, and 02116	ZIP or foreign	postal code				C If exemption applic	ation is pe	ending, check here
G C	heck all that apply:	Initial ret	turn	Initial ref	turn of a fo	rmer public o	charity	D 1. Foreign orgai	nızatıons	, check here
		Final retu	ırn	Amende	d return			2 Foreign organiz	ations ma	oting the 85% tost
		Address		Name ch				2. Foreign organiz check here and	attach cor	mputation
H C	heck type of organiza			exempt private foun				E If private founda	ation stat	us was terminated
<u>L</u>	Section 4947(a)(1)			Other taxable priv				under section 5	07(b)(1)	(A), check here
	ır market value of all :	-		iting method 👢	Cash	X Accı	rual			60-month termination
	om Part II, col (c),			Other (specify)				under section 5	07(b)(1)	(B), check here
				lumn (d) must be	on cash i					(4) -
Pa	Analysis of Re	r venue and Expens unts in columns (b), (c), the amounts in colum	es, and (d) may not	(a) Revenue expenses per			ivestment ome	(c) Adjusted income	net	(d) Disbursements for charitable purposes
						1110				(cash basis only)
		ufts, grants, etc., re		4,201,	/10.			N/A		
	Interest on covere	the foundation is not require	ed to attach Sch B					ļ		CONTRACTOR 1
	3 cash investments		_	76	3.		3.			STATEMENT 1 STATEMENT 2
		nterest from securi	ties	/6,	911.	/	6,911.			STATEMENT Z
	5a Gross rents								-	
	Net rental income	· · -		000	550.				1	RECEIVED
ě	 Gross sales price 	rom sale of assets not for all	on line 10 59,485.	990,	330.				1-1	VEC PIVED
Revenue	D assets on line 6a					- 00	0,550.		 8 	IAM
Ŗ		come (from Part IV, line	9 2)			33	0,330.	,	6 	14N 3 0 2017 1
	8 Net short-term 9 Income modific							1		
Ø	Gross sales less r							 	0	GDEN IIT
SCANNED	10a and allowances b Less Cost of good	to cold		 				<u> </u>		3014.01
Ž	c Gross profit or	L		- -						
Z	11 Other income	(1000)		58	509.	5	8,509.			STATEMENT 3
	12 Total Add line	s 1 through 11		5,327			5,973.	1		
<u>س</u>		officers, directors, trust	tees. etc		0.		0.			0.
	*	salaries and wage:	•							
_		employee benefits		-						· · ·
Ses 🗎	16a Legal fees									
	b Accounting fee	5								
<i>⊈⁵</i> U¢ eExpe	c Other profession	nal fees								
ۆ و	17 Interest									
rati	18 Taxes	٤	STMT 4	5 ,	,250.		0.			0.
nist	19 Depreciation ar	d depletion								
Ē	20 Occupancy									ļ <u></u>
¥	1	nces, and meetings					· ·			
auc	22 Printing and pu									
ng	23 Other expenses		STMT 5	5	,523.		4,659.		_	864.
rati		and administrativ				}				
\mathbb{Z}_b U C Operating and Administrative Expen		lines 13 through 2	3		,773.		4,659.			864.
J	25 Contributions,			1,392	, 286.					1,392,286.
	26 Total expense		its.	1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	0.50		4 650			1 202 152
	Add lines 24 ar			1,403	,059.	<u> </u>	4,659	· 		1,393,150.
	27 Subtract line 20			1 2 224	C 2 4					
		over expenses and di		3,924	,024.	1 1 2	1 214	 		ļ - ··· · · · · · · · · · · · · · · · ·
		t income (if negative,		-		1,14	21,314			
	A 4	icome (if negative, en perwork Reduction				<u> </u>		N/A		Form 990-PF (2015

KARP FAMILY FOUNDATION, STEPHEN R. AND

JILL E. KARP, TRUSTEES 04-3226725 Form 990-PF (2015) Beginning of year End of year Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (a) Book Value (b) Book Value (c) Fair Market Value 1 Cash - non-interest-bearing 53,620. 39,247. 53,620. 2 Savings and temporary cash investments 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 7 Other notes and loans receivable 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 b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans STMT 6 706,834. 4,617,084. 4,617,084. 13 Investments - other 14 Land, buildings, and equipment basis Less accumulated depreciation 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 746,081. 4,670,705. 4,670,705. instructions. Also, see page 1, item I) 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 22 Other liabilities (describe > 0. 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted ightharpoonsFoundations that do not follow SFAS 117, check here and complete lines 27 through 31. 94 94 27 Capital stock, trust principal, or current funds 0 28 Paid-in or capital surplus, or land, bldg., and equipment fund 745,987. 4,670,611. 29 Retained earnings, accumulated income, endowment, or other funds 746,081. 4,670,705. 30 Total net assets or fund balances 31 Total liabilities and net assets/fund balances 746,081. 4,670,705 Part III Analysis of Changes in Net Assets or Fund Balances 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) 746,081 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 4,670,705. Form 990-PF (2015) Form 990-PF (2015) JILL E. KARP, TRUSTEES

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Part IV Capital Gains	and Lo	sses for Tax on In	vestment	Income					
(a) List and desc 2-story brick wa	ribe the ki	nd(s) of property sold (e.g. or common stock, 200 shs	., real estate, s. MLC Co.)		(b) i	low acquired - Purchase - Donation	(c) Date (mo., d		(d) Date sold (mo., day, yr.)
1a FIDELITY - SEE	ATTA	ACHED				P			
b PRISMA SELECT						P			
		ACHED			<u> </u>	P			
d CAPITAL GAINS	DIVII	DENDS		<u></u>	<u> </u>				
<u>e</u>					<u> </u>				
(e) Gross sales price	(f) [Depreciation allowed (or allowable)	plus e	st or other basis xpense of sale				ain or (loss s (f) minus ((g)
a 4,975,482.				3,996,98	2.				978,500.
ь 20,215.									20,215.
c 254,300.				271,95	3.				-17,653.
d 9,488.		····		·=					9,488.
<u>e</u>	<u> </u>								
Complete only for assets shown	ng gain in	column (h) and owned by	the foundation	on 12/31/69				ol. (h) gain	
(i) F.M.V as of 12/31/69	((j) Adjusted basis as of 12/31/69		cess of col. (ı) col. (ֈ), ıf any		CC		not less that (from col. (
a					T		,		978,500.
b									20,215.
С									-17,653.
d									9,488.
е				-	一				
2 Capital gain net income or (net ca	apıtal loss)	If gain, also enter If (loss), enter -0	ın Part I, line - ın Part I, line	7 7	}	2			990,550.
3 Net short-term capital gain or (los	ss) as defi	`			[
If gain, also enter in Part I, line 8,			. ,) [
If (loss), enter -0- in Part I, line 8					ال	3		N/A	
Part V Qualification U	Inder S	ection 4940(e) for	Reduced	Tax on Net	: Inv	<u>estment In</u>	come		
(For optional use by domestic private	e toungatio	ons subject to the section 4	1940(a) tax on	net investment in	icome	! -)			
If section 4940(d)(2) applies, leave t	his part bl	ank.							
Man the foundation lights for the and		Anna an Alexandra di Anna anna							Yes X No
Was the foundation liable for the sec				•	iiou r				res [_A] NO
If "Yes," the foundation does not qua 1 Enter the appropriate amount in					ntries				
(a)		(b)			(c)				(d) Dution ratio
Base period years Calendar year (or tax year beginni	ına ın)	Adjusted qualifying dis	tributions	Net value of no	nchai	ıtable-use asset	s	col (b) div	oution ratio vided by col. (c))
2014	, , , , , , , , , , , , , , , , , , ,	1,42	0,906.			887,27			1.601425
2013			6,932.		1	,631,80			.886705
2012			3,328.			,478,46			.763911
2011			9,324.			,076,30			.951346
2010			6,465.			,019,68			.102065
				·		<u>· </u>			
2 Total of line 1, column (d)							2		4.305452
3 Average distribution ratio for the	5-year bas	se period - divide the total (on line 2 by 5,	or by the number	of ve	ars			
the foundation has been in existe			, ,	•	,		3		.861090
4 Enter the net value of noncharital	ble-use as	sets for 2015 from Part X	line 5				4		3,580,169.
		JOIS IOI ZO IS HOIHIT WILK,							
5 Multiply line 4 by line 3		3013 101 2010 1101117 4117,							
• •		3013 101 20 10 1101117 11177,					5		
		3013 101 2010 1101111 11117,					5		3,082,848.
6 Enter 1% of net investment incor	me (1% of	·					5		
6 Enter 1% of net investment incor7 Add lines 5 and 6	me (1% of	·							3,082,848.
7 Add lines 5 and 6	,	Part I, line 27b)					6		3,082,848. 11,213. 3,094,061.
7 Add lines 5 and 68 Enter qualifying distributions from	m Part XII,	Part I, line 27b)	1h and com	alote that part your	ng 2 10	V, tay rata	7		3,082,848.
7 Add lines 5 and 6	m Part XII,	Part I, line 27b)	a 1b, and comp	olete that part usir	ng a 1'	% tax rate.	7		3,082,848. 11,213. 3,094,061.

KARP FAMILY FOUNDATION, STEPHEN R. AND

		3226			age 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948	- see ir	nstru	ction	าร)
1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.					
Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 📖 and enter 1%	1		2:	2,4	<u> 26.</u>
of Part I, line 27b		ĺ			
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2	L.,			<u>0.</u>
3 Add lines 1 and 2	3	<u> </u>	2:	2,4	<u> 26.</u>
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				<u>0.</u>
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		2	2,4	26.
6 Credits/Payments:					
a 2015 estimated tax payments and 2014 overpayment credited to 2015 6a 5,600.					
b Exempt foreign organizations - tax withheld at source					
c Tax paid with application for extension of time to file (Form 8868) 6c 15,200.					
d Backup withholding erroneously withheld			_		
7 Total credits and payments. Add lines 6a through 6d	7		2	0,8	00.
8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached	8				2.
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9	<u> </u>		1,6	28.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	ļ			
11 Enter the amount of line 10 to be: Credited to 2016 estimated tax	11				
Part VII-A Statements Regarding Activities		-			<u> </u>
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın		_	Yes	
any political campaign?	_		1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)			1b		Х
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	ed or				
distributed by the foundation in connection with the activities					77
c Did the foundation file Form 1120-POL for this year?			1c		<u>X</u>
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
(1) On the foundation. ▶ \$ 0 • (2) On foundation managers ▶ \$ 0 •					
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
managers > \$					Х
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		
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, o	ı		3		Х
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?	N	I/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	-	1, 22	5		X
If "Yes," attach the statement required by General Instruction T			-		
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
By language in the governing instrument, or					
By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	law				
remain in the governing instrument?	1411		6		х
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV			7	Х	
to the second and the second as any arms during the year. It is completely at the complete that the co					
8a Enter the states to which the foundation reports or with which it is registered (see instructions)					
MA					
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
of each state as required by General Instruction G? If "No," attach explanation			8b	Х	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar				
year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		х
	TMI	r 7	10	Х	
			m 99 0		(2015)

Pa	rt VII-A Statements Regarding Activities (continued)			
			Yes	No
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?	ļ		
	If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	L
	Website address ► N/A	-	~=~	
14	The books are in care of ► THE KARP FAMILY FOUNDATION Telephone no. ► (617)		870	<u>U</u>
	Located at ► 75 PARK PLAZA, THIRD FLR, BOSTON, MA ZIP+4 ►02	110		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	3.7	/ ⊅	٠
40	and enter the amount of tax-exempt interest received or accrued during the year 15	1/1	/A Yes	No
10	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,	16	162	X
	securities, or other financial account in a foreign country? See the victuations for expentions and filing requirements for EnCEN Form 114. If "Yes," onter the name of the	-10		<u>├</u> ─
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country	Ì		
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	'		<u>. </u>
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	Γ	Yes	No
18	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?	l		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person? Yes X No	Ì		•
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1		
	(5) Transfer any income or assets to a disqualified person (or make any of either available	l		
	for the benefit or use of a disqualified person)?	ļ		
	(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.) Yes X No	l		
				ļ
	old fany 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)? N/A	16		
	Organizations relying on a current notice regarding disaster assistance check here			\vdash
	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 2015?	10	l	x
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)):			
	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning		l	
	before 2015?		1	
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,			
ı	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	ļ]
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	١,,		
	statement - see instructions.) N/A	2b		
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.]	j	ļ
3:	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
٠,	during the year?	1		
1	b if "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after	1	1	
	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,	1		
	Form 4720, to determine if the foundation had excess business holdings in 2015) N/A	36		<u></u>
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
I	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		ļ	1
	had not been removed from jeopardy before the first day of the tax year beginning in 2015?	46		X
	Fo	rm 99 (D-PF	(2015)

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

Form **990-PF** (2015)

Ō.

All other program-related investments. See instructions.

Total. Add lines 1 through 3

For	m 990-PF (2015) JILL E. KARP, TRUSTEES	<u> 04-3226725</u>	Page 8
P	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, see instructions)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a 856,	098.
	Average of monthly cash balances	1b 116,	632.
	Fair market value of all other assets	1c 2,661,	959.
d	Total (add lines 1a, b, and c)	1d 3,634,	689.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3 3,634,	689.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4 54,	520.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5 3,580,	
6	Minimum investment return. Enter 5% of line 5	6 179,	008.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations check here	d certain	
1	Minimum investment return from Part X, line 6	1 179,	008.
2a	Tax on investment income for 2015 from Part VI, line 5		
b	Income tax for 2015. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c 22,	426.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3 156,	426. 582.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5 156,	582.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7 156,	582.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	1 202	150
a	(-),	1a 1,393,	, 150.
	Program-related investments - total from Part IX-B		<u> </u>
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:		
	Suitability test (prior IRS approval required)	3a	
b		3b 1,393,	150
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4 1,393,	, 150.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_E	Λ
c	Income. Enter 1% of Part I, line 27b	5 6 1,393	150
6	Adjusted qualifying distributions Subtract line 5 from line 4		, 1000
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	quaines for the Section	

Form **990-PF** (2015)

Form 990-PF (2015) JILL E. KARP, TRUSTEES

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI,	Corpus	rears prior to 2014	2014	2015
line 7				156,582.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			0.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2015:				
a From 2010 367,411.				
b From 2011 4,602,319.				
c From 2012 1,781,657.				
dFrom 2013 1,371,124.				
e From 2014 1,387,718.	0 510 220			
f Total of lines 3a through e	9,510,229.			
4 Qualifying distributions for 2015 from Part XII, line 4. ►\$ 1,393,150.				
a Applied to 2014, but not more than line 2a			0.	
b Applied to 2014, but not more than line 2a			- 0.	
years (Election required - see instructions)		0.	}	
c Treated as distributions out of corpus			· · · · · · · · · · · · · · · · · · ·	
(Election required - see instructions)	0.			
d Applied to 2015 distributable amount				156,582.
e Remaining amount distributed out of corpus	1,236,568.			
5 Excess distributions carryover applied to 2015	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	10,746,797.		ĺ	
b Prior years' undistributed income. Subtract	2011201			
line 4b from line 2b		0.1		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2014. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must		ļ		0
be distributed in 2016				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election			1	
may be required - see instructions)	0.		į	
8 Excess distributions carryover from 2010				
not applied on line 5 or line 7	367,411.			
9 Excess distributions carryover to 2016.	00.75221			
Subtract lines 7 and 8 from line 6a	10,379,386.			
10 Analysis of line 9:				
a Excess from 2011 $4,602,319$.		1		
b Excess from 2012 1,781,657.		1		
c Excess from 2013 1,371,124.		İ		
dExcess from 2014 1,387,718.		1		
e Excess from 2015 1,236,568.			<u> </u>	Form 900-DF (2015)
				1 0 000 (MM) [3 E /901E)

KARP FAMILY FOUNDATION, STEPHEN R. AND

JILL E. KARP, TRUSTEES Form 990-PF (2015) 04-3226725 Page 10 Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling 4942(J)(5) b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 2 a Enter the lesser of the adjusted net Tax year Prior 3 years (a) 2015 (b) 2014 (c) 2013 (d) 2012 income from Part I or the minimum (e) Total investment return from Part X for each year listed **b** 85% of line 2a c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upona "Assets" alternative test - enter: Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed c "Support" alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III) (3) Largest amount of support from an exempt organization (4) Gross investment income Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets Part XV at any time during the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) STEPHEN R. KARP b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. NONE Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here \(\sum X \) if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed: b The form in which applications should be submitted and information and materials they should include: c Any submission deadlines: d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

04-3226725 Page 11

3 Grants and Contributions Paid During the	e 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	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	OCH DATE	
a Paid during the year				
BEND THE ARC	NONE	PUBLIC CHARITY		
359 BOYLSTON ST BOSTON, MA 02116		-	CONTRIBUTION	2,50
BETH ISRAEL DEACONESS MEDICAL	NONE	PUBLIC CHARITY		
330 BROOKLINE AVE BOSTON, MA 02215			CONTRIBUTION	5,000
BOSTON CHILDRENS HOSPITAL 300 LONGWOOD AVE	NONE	PUBLIC CHARITY	CHARITABLE CONTRIBUTION	
BOSTON, MA 02115				4,00
BOSTON MEDICAL CENTER 840 HARRISON AVE	NONE	PUBLIC CHARITY	CHARITABLE CONTRIBUTION	0.07
BOSTON, MA 02118				9,07
BOSTON UNIVERSITY 1 SILBER WAY BOSTON WA 02225	NONE	PUBLIC CHARITY	CHARITABLE CONTRIBUTION	20 05
BOSTON, MA 02215 Total SEE C	ONTINUATION SHE	፲ ኛፐ(ያ)	▶ 3a	28,05 1,392,28
Approved for future payment	***************************************			
NONE				
· · · · · · · · · · · · · · · · · · ·				
Total			▶ 3b	orm 990-PF (20

Part XVI-A Analysis of Income-Producing Activities

nter gross amounts unless otherwise indicated.	Unrelated	business income	by section 512, 513, or 514 (e)		
3	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a					
b	_				
c	_				
d	_				
e	_				
f					
g Fees and contracts from government agencies		 			
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	3.	
4 Dividends and interest from securities			14	76,911.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					· · · · · ·
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income		"	14	58,509.	
8 Gain or (loss) from sales of assets other than inventory			18	990,550.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
C					
d					
e		•			
12 Subtotal. Add columns (b), (d), and (e)			0.	1,125,973.	
13 Total. Add line 12, columns (b), (d), and (e)				13	1,125,97

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
3	INVESTMENT INCOME
1	INVESTMENT INCOME
7	INVESTMENT INCOME
8	INVESTMENT INCOME
	

Form **990-PF** (2015)

523621 11-24-15

					ON, STEPHEN	R. AND	0.4	2006805	_	
Form 990-				, TRUSTE		i Dalasia		3226725		age 13
Part X	VII			ransters to a	nd Transactions	and Relations	snips With Noi	ncharitable	В	
		Exempt Organ							V	T N I -
					g with any other organizat		tion 501(c) of		res	No
					7, relating to political orga	inizations?				
		om the reporting found	ation to a nonch	aritable exempt org	anization of:					٦,
	Cash							1a(1)		X
(2)	Other a	issets						18(2)		Х
b Othe	r trans	actions:								
(1)	Sales	of assets to a noncharita	ıble exempt orga	ınızatıon				1b(1)		X
(2)	Purcha	ises of assets from a no	ncharitable exen	npt organization				15(2)		X
(3)	Rental	of facilities, equipment,	or other assets					1b(3)		X
(4)	Reimb	ursement arrangements	}					1b(4)		X
(5)	Loans	or loan guarantees						1b(5)		X
(6)	Perfor	mance of services or me	embership or fur	ndraising solicitation	ns			1b(6)	Ţ	X
c Shar	ring of	facilities, equipment, ma	uling lists, other	assets, or paid emp	oloyees			10		X
					dule. Column (b) should a	always show the fair	market value of the g	oods, other ass	sets,	
		•		-	ed less than fair market va					
colu	mn (d)	the value of the goods,	other assets, or	services received.						
(a)Line no	TÌ	b) Amount involved	(c) Nan	ne of noncharitable	exempt organization	(d) Description	on of transfers, transaction	ns, and sharing ar	тangem	ents
	1			N/A			·-····			
	 									
	1									
	+		 							
	-	· · · · · · · · · · · · · · · · · · · 	<u> </u>	.,						
	+		· · · · · ·			1				
	+		 							
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					· · · · · · · · · · · · · · · · · · ·					
		•	•		or more tax-exempt orga	nizations described				=
IN S	ection (501(c) of the Code (othe	er than section 5	01(c)(3)) or ın sect	ion 527?			L Yes	LX	No
b If "Y	es," co	mplete the following sch							,	
		(a) Name of org	ganization		(b) Type of organization)	(c) Description of re	elationship		
		N/A								
							·			
		- 								
7 I	Under pand be				ig accompanying schedules ai n taxpayer) is based on all info			May the IRS	discuss	this
Sign	and be	ier, it is the, correct and co		•	Traxpayer) is based on air inic	Milation of Willest prepa	el lias ally kilowiedge	return with the shown below	v (see in	
Here		- Jupau	c 1 \ N	ar-	1/17/17	TRUST	EE	X Yes	s L	l No
	Sign	ture of officer or trustee		1	Date/	Title		_ L		
		Print Type preparer's n	ame	Preparer's s	ignature	Date	Check ıf	PTIN		
				İ			self- employed			
Paid		ANGELA PAR	RZIALE	ANGELA	PARZIALE	01/10/17		P00852		3
Prepa	ırer	Firm's name ► WAI	TER & S				Firm's EIN ▶ 0	4-32364	98	
Use C	nly			•			ĺ			

Form **990-PF** (2015)

(617) 447-2700

Firm's address ▶ ONE INTERNATIONAL PLACE, 10TH FLOOR

BOSTON, MA 02110

Phone no.

Part XV Supplementary Informatio 3 Grants and Contributions Paid During the				T
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
BOSTON YOUTH SANCTUARY	NONE	PUBLIC CHARITY	CHARITABLE	
2216 DORCHESTER AVE		-	CONTRIBUTION	
DORCHESTER, MA 02124		 	-	500,000.
		ļ		ı
BRADY CENTER TO PREVENT GUN VIOLENCE	NONE	PUBLIC CHARITY	l	
800 FIRST STREET, NE, SUITE 400			CONTRIBUTION	1 000
WASHINGTON, DC 20002		 		1,000.
COMMUNITY FOUNDATION FOR NANTUCKET 40 SHERBURNE CMNS	NONE	PUBLIC CHARITY	CHARITABLE CONTRIBUTION	
NANTUCKET, MA 02554		1	CONTRIBUTION	32,900.
CROSSROADS FOR KIDS	NONE	PUBLIC CHARITY	CHARITABLE	
119 MYRTLE STREET	,,,,,,		CONTRIBUTION	
DUXBURY, MA 02332				30,000.
		}		
CYSTIC FIBROSIS FOUNDATION	NONE	PUBLIC CHARITY	CHARITABLE	
6931 ARLINGTON ROAD, 2ND FLOOR			CONTRIBUTION	
BETHESDA, MD 20814	 	ļ	ļ	199,982.
DANA-FARBER CANCER INSTITUTE	NONE	PUBLIC CHARITY	CHARITABLE	ļ
450 BROOKLINE AVE	1	ľ	CONTRIBUTION	25.000
BOSTON, MA 02115		 		35,000.
FACING HISTORY AND OURSELVES 16 HURD ROAD	NONE	PUBLIC CHARITY	CHARITABLE CONTRIBUTION	
BROOKLINE, MA 02445				3,250.
	}			
FAMILY AID BOSTON	NONE	PUBLIC CHARITY	CHARITABLE	
727 ATLANTIC AVE			CONTRIBUTION	
BOSTON, MA 02111			 	5,000.
	-			
FOOD PROJECTS LOVIN' SPOONFULS INC	NONE	PUBLIC CHARITY	· ·	}
418 COMMONWEALTH AVE BOSTON, MA 02215			CONTRIBUTION	10,000.
PODICA, PER VEELS		 	 	10,000
EDIENDO OF VENTN OPPE	NONE	DUDI TO CUADAN	CHADIMADI E	}
FRIENDS OF YEMIN ORDE 4340 EAST-WEST HIGHWAY, SUITE 202	NONE	PUBLIC CHARITY	CHARITABLE	1
BETHESDA, MD 20814		1		50,000.
Total from continuation sheets			<u> </u>	1,343,666.

Part XV Supplementary Information 3 Grants and Contributions Paid During the Y				1
Recipient Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Aniount
GATEWAYS ACCESS TO JEWISH EDUCATION 333 NAHANTON STREET NEWTON, MA 02459	NONE	PUBLIC CHARITY	CHARITABLE CONTRIBUTION	1,800
GOALS GLOBAL OUTREACH AND LOVE 1201 TREE BAY LANE SARASOTA, FL 34242	NONE	PUBLIC CHARITY	CHARITABLE CONTRIBUTION	25,000
GREATER BOSTON FOOD BANK 70 S BAY AVE BOSTON, MA 02118	NONE	PUBLIC CHARITY	CHARITABLE CONTRIBUTION	25,000
HARLEM VILLAGE ACADEMICS 35 W 124TH STREET NEW YORK, NY 10027	NONE	PUBLIC CHARITY	CHARITABLE CONTRIBUTION	5,000
HEBREW SENIOR LIFE 1 DEL POND DRIVE CANTON, MA 02021	NONE	PUBLIC CHARITY	CHARITABLE CONTRIBUTION	55,000
JEWISH FAMILY & CHILDRENS 1430 MAIN STREET WALTHAM, MA 02451	NONE	PUBLIC CHARITY	CHARITABLE CONTRIBUTION	2,000
JOEY FUND CHAPTER 220 NORTH MAIN STREET SUITE 104 NATICK, MA 01760	NONE	PUBLIC CHARITY	CHARITABLE CONTRIBUTION	27,000
MAYYIM HAYYIM LIVING WATERS 1838 WASHINGTON STREET NEWTON, MA 02466	NONE	PUBLIC CHARITY	CHARITABLE CONTRIBUTION	10,000
MT AUBURN HOSPITAL 330 MOUNT AUBURN STREET CAMBRIDGE, MA 02138	NONE	PUBLIC CHARITY	CHARITABLE CONTRIBUTION	25,000
MUSEUM OF AFRICAN AMERICAN HISTORY 315 E WARREN AVE DETROIT, MI 48201 Total from continuation sheets	NONE	PUBLIC CHARITY	CHARITABLE CONTRIBUTION	1,000

Part XV Supplementary Informati				
3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	<u> </u>	
MUSEUM OF FINE ARTS	NONE	PUBLIC CHARITY	i	}
465 HUNTINGTON AVENUE			CONTRIBUTION	10.000
BOSTON, MA 02115		 		12,000.
MANINGUER BOVE C CIPI C CLUB	NONE	PUBLIC CHARITY	CUARTMARIE	
NANTUCKET BOYS & GIRLS CLUB 61 SPARKS AVE	NONE	POBLIC CHARIII	CONTRIBUTION	Į
NANTUCKET, MA 02554			CONTRIBUTION	50,000.
Marocker, em 02334		 		
NANTUCKET COTTAGE HOSPITAL	NONE	PUBLIC CHARITY	CHARTTARI.E	
57 PROSPECT STREET	NONE	TODDIC CHARTIT	CONTRIBUTION	1
NANTUCKET, MA 02554		<u> </u>		14,400.
		}		
NANTUCKET HISTORICAL ASSOCIATION	NONE	PUBLIC CHARITY	CHARITABLE	ł
15 BROAD STREET			CONTRIBUTION	
NANTUCKET, MA 02554				5,000.
				Ì
NEW ENGLAND AQUARIUM	NONE	PUBLIC CHARITY	CHARITABLE)
1 CENTRAL WHARF			CONTRIBUTION	1
BOSTON, MA 02110				30,000.
NEW ENGLAND BAPTIST HOSPITAL	NONE	PUBLIC CHARITY	CHARITABLE	
125 PARKER HILL AVE			CONTRIBUTION	
BOSTON, MA 02120		ļ	<u> </u>	10,000.
		}		
NEWTON WELLESLEY HOSPITAL	NONE	PUBLIC CHARITY	CHARITABLE	
2014 WASHINGTON STREET			CONTRIBUTION	[
NEWTON, MA 02462		 		45,000.
				1
PERKINS SCHOOL FOR THE BLIND	NONE	PUBLIC CHARITY	1	
175 NORTH BEACON STREET WATERTOWN, MA 02472			CONTRIBUTION	40,000.
MAIEATONN, MA 02472				40,000.
SEED GLOBAL HEALTH	NONE	PUBLIC CHARITY	CHARITARIE	
20 ASHBURTON STREET 6TH FLOOR	HOME	CODIC CHARIFF	CONTRIBUTION	1
BOSTON, MA 02108				5,000.
				Ţ
STEPPINGSTONE FOUNDATION	NONE	PUBLIC CHARITY	CHARITABLE	
155 FEDERAL ST #800			CONTRIBUTION	
BOSTON, MA 02110		<u>}</u>		43,334.
Total from continuation sheets				

JILL E. KARP, TRUSTEES

3 Grants and Contributions Paid During the		, 	,	<u> </u>
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
THE SECOND STEP UP INC	NONE	PUBLIC CHARITY	1	}
51 TECHNOLOGY DRIVE #A			CONTRIBUTION	
NEWTON CENTER, MA 02459		 		5,00
THE MOR MODULATION OF MANIMICAREM	NONE	PUBLIC CHARITY	CUADIMADI P	
THEATRE WORKSHOP OF NANTUCKET 58 MAIN ST	NONE	POBLIC CHARITI	CONTRIBUTION	
			CONTRIBUTION	30,00
NANTUCKET, MA 02554				30,00
JNION COLLEGE	NONE	PUBLIC CHARITY	CHARITABLE	
307 UNION STREET			CONTRIBUTION	\
SCHENECTADY, NY 12308				2,50
WGBH/NOVA	NONE	PUBLIC CHARITY		1
ONE GUEST STREET		1	CONTRIBUTION	
BOSTON, MA 02135				5,00
YOGA REACHES OUT	NONE	PUBLIC CHARITY	CUADIMADIE	}
PO BOX 5352	MONE	FORDIC CHARITI	CONTRIBUTION	
WAYLAND, MA 01778			CONTRIBUTION	2,50
		 		
	l L			
	}			1
		 		
		 		
		 	 	
	1			
Total from continuation sheets		Д	<u> </u>	

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.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Name of the organization

KARP FAMILY FOUNDATION, STEPHEN R. AND JILL E. KARP, TRUSTEES

Employer identification number

Organization type (check one)						
Filers of	:	Section:				
Form 99	0 or 990-EZ	501(c)() (enter number) organization				
		4947(a)(1) nonexempt charitable trust not treated as a private foundation				
		527 political organization				
Form 99	0-PF	X 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	vour organization is	s covered by the General Rule or a Special Rule .				
		(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions				
General	Rule					
X	•	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.				
Special	Rules					
	sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 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 or, 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, line 1 Complete Parts I and II				
	year, total contribu	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the attions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for cruelty to children or animals. Complete Parts I, II, and III				
	year, contributions is checked, enter h purpose Do not co	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the seclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box here the total contributions that were received during the year for an exclusively religious, charitable, etc., complete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions totaling \$5,000 or more during the year.				
but it m	ust answer "No" on	hat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), 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 the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)				

Name of organization

KARP FAMILY FOUNDATION, STEPHEN R. AND

JILL E. KARP, TRUSTEES

Employer identification number

Part I	Contributors (see instructions) Use duplicate copies of Part I if	f additional space is needed	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	STEPHEN R. KARP 75 PARK PLAZA, THIRD FLR BOSTON, MA 02116	\$ 4,201,710.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No,	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroli Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization KARP FAMILY FOUNDATION, STEPHEN R. AND JILL E. KARP, TRUSTEES

Employer identification number

Noncash Property (see instructions) Use duplicate copies of Pa	art II if additional space is needed	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
SEE ATTACHED STATEMENT		
	<u> </u>	02/29/16
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	_	
	\$\	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		· · · · · · · · · · · · · · · · · · ·
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	(b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) (b) Description of noncash property given	Description of noncash property given SEE ATTACHED STATEMENT (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) FMV (or estimate) (see instructions) (e) FMV (or estimate) (see instructions) (f) FMV (or estimate) (see instructions) (h) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) FMV (or estimate) (see instructions) (e) FMV (or estimate) (see instructions)

FORM 990-PF INTERES	ET ON SAVI	NGS AND T	EMPOR <i>i</i>	ARY CASH	INVESTM	ents s'	PATEMENT	1
SOURCE	RE'			(C) ADJUSTED NET INCOM	DJUSTED			
OTHER			3. 3.					
TOTAL TO PART I, LINE 3			3. 3.					
FORM 990-PF	DIVIDEND	S AND INT	EREST	FROM SEC	URITIES	S'	PATEMENT	2
SOURCE	GROSS AMOUNT	CAPIT GAIN DIVIDE	S	(A) REVENUE PER BOOK	NET	(B) INVEST- INCOME	(C) ADJUSTI NET INC	
ATHENA SELECT FUND FIDELITY GOLDMAN SACHS	8,509 77,825 65	. 5,	338. 150. 0.	4,17 72,67 6		4,171. 72,675. 65.		-
TO PART I, LINE 4	86,399	9,	488.	76,91	1.	76,911.		
FORM 990-PF		OTHER	INCO	ME			TATEMENT	3
DESCRIPTION			RE	(A) VENUE BOOKS	(B NET IN MENT I	VEST-	(C) ADJUSTE	
INVESTMENT INCOME		•		58,509.	5	8,509.		•
TOTAL TO FORM 990-P	F, PART I,	LINE 11		58,509.	5	8,509.		
FORM 990-PF		Т	AXES			S	TATEMENT	4
DESCRIPTION		(A) EXPENSES PER BOOK		(B) I INVEST- NT INCOME	ADJ	C) USTED INCOME	(D) CHARITA PURPOS	
STATE TAXES FEDERAL TAXES	_	25 5,00		0				0.
TO FORM 990-PF, PG	1, LN 18	5,25	0.	0				0.

FORM 990-PF	OTHER E	XPENSES			STATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(C) ADJUSTED NET INCOM		PABLE	
MANAGEMENT FEES INVESTMENT EXPENSE MISCELLANEOUS EXPENSE OFFICE EXPENSE	3,525. 1,134. 442. 422.	1,	525. 134. 0. 0.			0. 0. 442. 422.	
TO FORM 990-PF, PG 1, LN 23	5,523.	4,	659.			864.	
FORM 990-PF	OTHER INV	ESTMENTS			STATEMEN'	r 6	
DESCRIPTION		LUATION ETHOD	вос	OK VALUE	FAIR MARI VALUE	KET	
INVESTMENT IN GS PEP 2005 OF INVESTMENT IN ATHENA SELECT IN MUTUAL FUNDS - FIDELITY	FUND	COST COST COST		371,879. 234,677. 4,010,528.		,879. ,677. ,528.	
TOTAL TO FORM 990-PF, PART I	I, LINE 13	,		1,617,084.	4,617	,084.	
	F SUBSTANTIA PART VII-A,		UTOR		STATEMEN'	<u>——</u> r 7	
NAME OF CONTRIBUTOR	ADDR	ESS					
STEPHEN R. KARP	3 POSSUM ROAD						

WESTON, MA 02493