

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



Form **990-PF** 

# Due 8-15/efiledexters 10 OMB No 1545-0052

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

2010

Department of the Treasury Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

| For cal           | endar year 2010, or  | tax year beginning  |   | , 2010      | , and ending       |     | ,   |                     |                                  |
|-------------------|--|---|---|-------------|--------------------|-----|---|---------------------|----------------------------------|
| <b>G</b> Che      | eck all that apply   | Initial return Init   | tial Return o <u>f</u>                    | _ '         | , _                | _   |   | Fin                 | al return                        |
|                   |  | Amended return  | L   | Address     | change X           |     | e change                                  |                     |                                  |
|                   | foundation   | - 4 - 4   |   |             |                    | 1   | A Employer identifi                       |                     | mber                             |
| Number a          | e Family Four  | ndation  mber if mail is not delivered to st                  | treet address)                            |             | Room/suite         |     | 05-05095  B Telephone number              |                     | instructions)                    |
|                   | •  | 120 Cranston St   | •   |             |                    | [   | (401) 94                                  | •                   | ·                                |
| City or to        | own  | TEO OTAMOCOM DE   |   | State       | ZIP code           | - 1 | •   |                     | pending, check here              |
| Cran              | ston   |   |   | RI          | 02920              |     | D 1 Foreign organiza                      |                     |                                  |
| <b>н</b> с        | heck type of organiz   |   | 1(c)(3) exem                              |             |                    |     |   |                     | ting the 85% test, check         |
|                   | <del></del>  | ) nonexempt charitable t                                      |   |             | rivate foundati    |     | here and attach of<br>E If private founda | •                   | <u></u>                          |
|                   | air market value of all ass<br>from Part II, column (c), lii |   | counting met                              |             | ash X Accr         | uai | under section 50                          | 7 <b>(b)(1)(</b> A) | ), check here                    |
| ► s               |  | i L   | ] Other (specify)<br>I, <i>column (d)</i> |             | cash hasis         |     | F If the foundation<br>under section 50   |                     | )-month termination              |
| Part I            |  |   |   |             |                    |     | 1   |                     |                                  |
|                   | Expenses (Th   | e total of amounts in   | (a) Reve                                  |             | (b) Net inve incom |     | t (c) Adjusted income                     |                     | (d) Disbursements for charitable |
|                   | columns (b), (c),<br>sarily equal the a                      | and (d) may not neces-<br>amounts in column (a)               | ' '                                       | •           |                    |     |   |                     | purposes<br>(cash basis only)    |
| 2 <b>G</b> TI     | (see the instructi   |   |   |             |                    |     |   |                     | (Cash basis only)                |
| 7.                |  | s, grants, etc, received (att sch)                            | 5   | 44,234.     |                    |     |   |                     |                                  |
| <del>7</del> 9    |  | foundn is <b>not</b> req to att Sch B<br>ivings and temporary |   |             |                    |     |   |                     | <del> </del>                     |
| <b>N</b>          | cash investme  | ents  |   |             |                    |     |   |                     |                                  |
| AUG               | 1  | terest from securities  |   |             |                    |     |   |                     | ļ                                |
| -                 | 5a Gross rents<br>b Net rental income                        |   |   |             |                    |     | · · · · · · · · · · · · · · · · · · ·     |                     |                                  |
| $\square_{R}$     | or (loss)  | om sale of assets not on line 10                              | -   | -           |                    |     |   | -                   |                                  |
| 豐É                | <b>b</b> Gross sales price assets on line 6a                 |   |   |             |                    |     | - I                                       | 111                 | , , , , , ,                      |
| 雾点                |  | ncome (from Part IV, line 2)                                  |   |             |                    |     |   |                     |                                  |
| SCANNED           | 8 Net short-tern   | • •   |   |             |                    |     |   | 10 1                | ,                                |
| Ŵ E               | 9 Income modif   | rications   |   |             |                    |     |   | JG 1                | 7 2011                           |
|                   | 10a Gross sales less returns and allowances                  |   |   |             |                    |     |   | V 14.04.            |                                  |
|                   | <b>b</b> Less Cost of goods sold                             |   |   |             |                    |     |   | CIN                 | h                                |
|                   | c Gross profit/(loss   | , , ,   |   |             |                    |     | Č   |                     | AF TERRITOR SANDERS IN LABOR.    |
|                   | 11 Other income  | (attach schedule)   |   |             |                    |     |   |                     |                                  |
|                   | 12 Total, Add line   | es 1 through 11   |   | 44,234.     | <u> </u>           |     |   |                     | -1                               |
|                   |  | officers, directors, trustees, etc                            | 1 3                                       | 44,234.     |                    |     | +   | -                   |                                  |
|                   | 14 Other employee s  | salaries and wages  |   |             |                    |     |   |                     |                                  |
|                   | 1  | s, employee benefits  |   |             |                    |     |   |                     |                                  |
| A<br>D            | 16 a Legal fees (attach                                      | •   | <u> </u>                                  | 570         |                    |     |   |                     | 570                              |
| M                 | c Other prof fees (  | (attach sch) L-16b Stmt                                       | -   | 578.        |                    |     |   |                     | 578.                             |
| . N               | 17 Interest  | attach sch)   |   |             |                    |     |   |                     |                                  |
| PS                | 18 Taxes (attach schedule                                    | (xsee instr.)   |   |             |                    |     |   |                     |                                  |
| O P E R A T       | 19 Depreciation  | (attach   |   |             |                    |     |   |                     |                                  |
| 1 i               | sch) and depl<br>20 Occupancy                                | letion  | -   |             |                    |     |   |                     |                                  |
| N V<br>G E        |  | rences, and meetings  |   | <del></del> | -                  |     |   |                     |                                  |
| A E<br>N X<br>D P | 22 Printing and p  | oublications  |   |             |                    |     |   |                     |                                  |
| Dê                | 1  | es (attach schedule)  | .   | 00 074      |                    |     |   |                     | 150                              |
| N<br>S            | See Line 23 S  | stmt<br>ng and administrative                                 | 1   | 08,974.     |                    |     |   |                     | 152.                             |
| Ĕ                 | expenses. Ad   | id lines 13 through 23  |   | 09,552.     |                    | _   |   |                     | 730.                             |
|                   | 25 Contributions, gif  |   | 4   | 11,262.     |                    |     |   |                     | 411,262.                         |
|                   | 26 Total expense   | es and disbursements.   | _   | 20 014      |                    |     |   |                     | /11 002                          |
| _                 | Add lines 24 a   |   | 5   | 20,814.     |                    | •   |   |                     | 411,992.                         |
|                   | a Excess of rev  | venue over expenses   |   |             | 1                  |     |   |                     |                                  |
|                   | and disburse   | ments   |   | 23,420.     |                    |     |   |                     |                                  |
|                   | 1  | ncome (if negative, enter -0-)                                |   | <del></del> |                    |     |   |                     |                                  |
| BAA F             | <del>`</del>   | ome (if negative, enter -0-) ction Act Notice, see the        | instructions                              |             | l                  |     | I<br>TEEA0301 07/23/10                    |                     | Form <b>990-PF</b> (2010)        |
|                   |  |   |   |             |                    |     |   |                     | 5                                |

| Par                   | t II  | <b>Balance Sheets</b>                                   | Attached schedules and amounts in the description column should be for end of-year amounts only | Beginning of year                             |                |     | t year                                |
|-----------------------|-------|---|---|---|----------------|-----|---------------------------------------|
| -                     |       |   | (See instructions )   | (a) Book Value                                | (b) Book Value |     | (c) Fair Market Value                 |
|                       | 1     | Cash — non-interest                                     | 5   |   | 2,2            | 03. | 2,203.                                |
|                       | 2     | Savings and tempor                                      | rary cash investments   |   |                |     |                                       |
|                       | 3     | Accounts receivable                                     | • • • • • • • • • • • • • • • • • • •   |   |                |     |                                       |
|                       |       | Less allowance for                                      | doubtful accounts   |   |                |     |                                       |
|                       | 4     | Pledges receivable                                      | <b>&gt;</b>   |   |                |     |                                       |
|                       |       | Less allowance for                                      | doubtful accounts   | _   |                |     |                                       |
|                       | 5     | Grants receivable                                       |   |   |                |     |                                       |
|                       | 6     | Receivables due from offi<br>disqualified persons (atta | icers, directors, trustees, and other ich schedule) (see the instructions)                      |   |                |     |                                       |
|                       | 7     | Other notes and loans red                               | ceivable (attach sch)   |   |                |     |                                       |
| S                     |       | Less: allowance for                                     | doubtful accounts   |   |                |     |                                       |
| <u>s</u>              | 8     | Inventories for sale                                    | or use  |   |                |     |                                       |
| A<br>S<br>S<br>E<br>T | 9     | Prepaid expenses a                                      | nd deferred charges   |   |                |     |                                       |
| S                     | 10    | a Investments – U S. obligations (attach s              | and state government schedule)  |   |                |     |                                       |
|                       |       | <b>b</b> Investments — corporate                        | stock (attach schedule)   |   |                |     |                                       |
|                       |       | c Investments — corporate                               | bonds (attach schedule)   |   |                |     |                                       |
|                       | 11    | Investments – land, equipment basis                     | , buildings, and ► 1,414,716.   |   |                |     |                                       |
|                       |       | Less accumulated depred (attach schedule)               | cration L-11 Stmt • 0.  | 1,414,716.                                    | 1,414,7        | 16. | 1,414,716.                            |
|                       | 12    | Investments - mort                                      | gage loans  |   |                |     |                                       |
|                       | 13    | Investments - other                                     | r (attach schedule)   |   | · · · ·        |     |                                       |
|                       | 14    | Land, buildings, and                                    | l equipment basis ►   |   |                |     |                                       |
|                       |       | Less: accumulated depred<br>(attach schedule)           | ciation   |   |                |     |                                       |
|                       |       | Other assets (descri                                    |   | 130,000.                                      | 130,0          | 00. | 130,000.                              |
|                       | 16    | Total assets (to be see instructions Als                | completed by all filers –<br>so, see page 1, item l)  | 1,544,716.                                    | 1,546,9        | 19. | 1,546,919.                            |
| Ļ                     | 17    | Accounts payable ar                                     | nd accrued expenses   | 21,217.                                       |                | 0.  |                                       |
| Å                     | 18    | Grants payable  |   |   | <del></del>    |     |                                       |
| В                     | 19    | Deferred revenue  |   |   |                |     |                                       |
| Ĺ                     | 20    |   | ctors, trustees, & other disqualified persons   |   |                |     |                                       |
| I<br>T                | 21    | Mortgages and other note                                | es payable (attach schedule)  |   |                |     |                                       |
| - 1                   | 22    | Other liabilities (des                                  | cribe)  |   |                |     |                                       |
| E<br>S                | 23    | Total liabilities (add                                  | lines 17 through 22)  | 21,217.                                       |                | 0.  |                                       |
|                       |       | Foundations that fo                                     | llow SFAS 117, check here 24 through 26 and lines 30 and 31.                                    | 21,21,0                                       |                | •   |                                       |
| NF                    | 24    | Unrestricted  | ·   | 224,213.                                      | 345,1          | 63. |                                       |
| N F<br>E U<br>T N     | 25    | Temporarily restricted                                  | ed  | 1,299,286.                                    | 1,201,7        | _   |                                       |
| D                     | 26    | Permanently restrict                                    | ted   |   |                |     |                                       |
| A B A L A N           |       | Foundations that do<br>and complete lines               | o not follow SFAS 117, check here P   |   | _              |     |                                       |
| ΕL                    | 27    | Capital stock, trust r                                  | principal, or current funds   |   |                |     |                                       |
|                       | 28    |   | , or land, building, and equipment fund   |   | <u> </u>       | -   |                                       |
| O E                   | 29    | •   | ulated income, endowment, or other funds  |   |                |     |                                       |
| RS                    | 30    | - ·   | fund balances (see the instructions)  | 1,523,499.                                    | 1,546,9        | 19. |                                       |
|                       | 31    |   | net assets/fund balances  | 1,544,716.                                    | 1,546,9        |     | •                                     |
| Par                   | t III |   | nges in Net Assets or Fund Balance  | es  |                |     |                                       |
|                       | Tota  | I net assets or fund ba                                 | alances at beginning of year - Part II, colum   |   | e with         |     |                                       |
|                       | end-  | of-year figure reported                                 | d on prior year's return)   |   | Ļ              | 1   | 1,523,499.                            |
| 2                     |       | er amount from Part I,                                  |   |   | Ĺ              | 2   | 23,420.                               |
| 3                     |       | increases not included in li                            | ne 2 (itemize)  |   | . <b></b>      | 3   |                                       |
| 4                     |       | lines 1, 2, and 3                                       | ·   |   | <u> </u>       | 4   | 1,546,919.                            |
| 5                     |       | ases not included in line 2                             | ` ' ========  |   | . <b></b>      | 5   | · · · · · · · · · · · · · · · · · · · |
| 6_                    | Tota  | I net assets or fund ba                                 | alances at end of year (line 4 minus line 5) -  | <ul> <li>Part II, column (b), line</li> </ul> | 30             | 6   | 1,546,919.                            |

| (a) List and descr<br>2-story brick wareho                     | tibe the kind(s) of property sold (e.g., rea<br>buse, or common stock, 200 shares MLC  | Company)  | ) How acquired<br>— Purchase<br>— Donation | (C) Date acquired (month, day, year)                                     | (d) Date sold<br>(month, day, year) |
|--|--|---|--|--|-------------------------------------|
|  |  |   | Donation                                   |  |                                     |
| b  |  |   |  |  |                                     |
| с  |  |   |  | ļ. <u> </u>  |                                     |
| d  |  |   |  |  |                                     |
| e  | (0.00  | 420   11  |  | 420  |                                     |
| (e) Gross sales price  | (f) Depreciation allowed (or allowable)  | (g) Cost or other basis<br>plus expense of sale     |  | (h) Gain or<br>(e) plus (f) m  |                                     |
| a  |  |   |  |  |                                     |
| b  |  |   |  |  |                                     |
| <u> </u>   | <del>-</del>   | <del></del>   |  |  |                                     |
| <u>d</u>   |  |   | <u> </u>                                   |  |                                     |
| Complete only for assets sho                                   | wing gain in column (h) and owned by t   | he foundation on 12/31/69                           | <del></del>                                | (I) O (O-l-  | (h)                                 |
| (i) Fair Market Value<br>as of 12/31/69                        | (j) Adjusted basis<br>as of 12/31/69   | (k) Excess of column (i) over column (j), if any    | t  | (I) Gains (Coli<br>gain minus column (k<br>han -0-) <b>or</b> Losses (fr | ), but not less                     |
| a  |  |   |  |  |                                     |
| <u>b</u>   |  | <del></del>   |  |  |                                     |
|  |  |   |  |  |                                     |
| <u>d</u>   |  |   |  |  |                                     |
| <u>e</u>   |  |   |  | T  |                                     |
| 2 Capital gain net income or (n                                | net capital loss) — If gain, also enter the lift (loss), enter the l | enter in Part I, line 7<br>er -0- in Part I, line 7 | 2  |  |                                     |
| 3 Net short-term capital gain or                               | (loss) as defined in sections 1222(5) ar   | <b>—</b>  |  | <del>                                     </del>                         | <del></del> -                       |
| If dain, also enter in Part I. II                              | ne 8, column (c) (see the instructions)  | If (loss) enter -0.                                 |  |  |                                     |
| ın Part I, line 8  | ler Section 4940(e) for Reduced  | _`  | 3  |  |                                     |
| f 'Yes,' the foundation does not qu                            | ection 4942 tax on the distributable amo<br>lalify under section 4940(e) Do not com  | plete this part                                     |  | Yes  | ☐ No                                |
| <del></del>  | t in each column for each year, see the  |   | y entries                                  |  |                                     |
| (a) Base period years Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions  | (c) Net value of noncharitable-use assets           | s (cc                                      | <b>(d)</b><br>Distribution<br>lumn (b) divided                           |                                     |
| 2009   |  | 1,  | 970.                                       |  |                                     |
| 2008   | 130,213.   |   | 0.   |  | 0.000000                            |
| 2007   | 329, 924.  |   | 895.                                       | <del></del>  | 47.849746                           |
| 2006   | 400,475.   |   | 985.                                       |  | 106.573604                          |
| 2005   | 261,037.   |   | -   -                                      | <del></del>  |                                     |
| 2 Total of line 1, column (d)                                  |  |   | 2  |  | 154.423350                          |
|  | the 5-year base period - divide the tota   | Londing 2 hy 5 or hy the                            |  |  |                                     |
|  | on has been in existence if less than 5 y  |   | 3  |  | 51.474450                           |
| 4 Enter the net value of noncha                                | aritable-use assets for 2010 from Part X,  | , line 5  | 4  |  | 0.                                  |
|  | <del>.</del>   |   |  |  |                                     |
| 5 Multiply line 4 by line 3                                    | •  |   | 5  |  | 0.                                  |
| 6 Enter 1% of net investment in                                | ncome (1% of Part I, line 27b)   |   | 6  |  | <del>-</del>                        |
| 7 Add lines 5 and 6  |  |   | 7  |  | 0.                                  |
| 8 Enter qualifying distributions                               | from Part XII, line 4  |   | 8  |  | 411,992.                            |
| If line 8 is equal to or greater                               |  |   |  |  |                                     |

| Par  | t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see the instruc   | :tions)       |      |             |
|------|--|---------------|------|-------------|
| , 1a | Exempt operating foundations described in section 4940(d)(2), check here   |               |      |             |
|      | Date of ruling or determination letter: (attach copy of letter if necessary — see instr.)  |               |      |             |
| ь    | Domestic foundations that meet the section 4940(e) requirements in Part V,   |               |      |             |
|      | check here ► X and enter 1% of Part I, line 27b  |               |      |             |
| C    | All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)   |               |      |             |
| 2    | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)   |               |      |             |
| 3    | Add lines 1 and 2  |               |      | 0.          |
| 4    | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)   |               |      |             |
| 5    | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-  |               |      | 0.          |
| 6    | Credits/Payments   |               |      |             |
| а    | 2010 estimated tax pmts and 2009 overpayment credited to 2010  |               |      |             |
| b    | Exempt foreign organizations — tax withheld at source 6b   |               |      |             |
|      | Tax paid with application for extension of time to file (Form 8868)  6c 0.   |               |      |             |
|      | Backup withholding erroneously withheld 6d 6d  |               |      |             |
| 7    | Total credits and payments. Add lines 6a through 6d  |               |      | 0.          |
| 8    | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8   |               |      |             |
| 9    | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  |               |      | 0.          |
| 10   | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  |               |      | 0.          |
| 11   | Enter the amount of line 10 to be. Credited to 2011 estimated tax  |               |      |             |
| Par  | t VII-A   Statements Regarding Activities  | <del></del>   |      | T           |
| 1 a  | 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?   |               | Yes  | No          |
|      | participate of intervene in any political campaign?  | 1 a           |      | X           |
| b    | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?   | 1 b           |      | x           |
|      | If the answer is 'Yes' to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities  |               |      |             |
|      | Did the foundation file Form 1120-POL for this year?   | 1c            |      | X           |
| d    | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:   |               |      |             |
|      | (1) On the foundation  | -) )          | Į    |             |
| ·    | foundation managers \$\\$\$  |               | į    |             |
| 2    | Has the foundation engaged in any activities that have not previously been reported to the IRS?  | 2             |      | Х           |
|      | If 'Yes,' attach a detailed description of the activities  |               |      |             |
| 3    | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes                           | 3             |      | х           |
| 4 a  | Did the foundation have unrelated business gross income of \$1,000 or more during the year?  | 4a            |      | х           |
|      | If 'Yes,' has it filed a tax return on Form 990-T for this year?   | 4b            |      |             |
|      | Was there a liquidation, termination, dissolution, or substantial contraction during the year?   | 5             |      | Х           |
|      | 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  White Family Fundable   | A I           | i    |             |
|      | <ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict</li> </ul>  | 1             |      | لـــــا     |
| _    | with the state law remain in the governing instrument?   | 6             | X    | <u> </u>    |
|      | Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV  | 7             | X    | ├           |
| 8a   | Enter the states to which the foundation reports or with which it is registered (see the instructions)  RI - Rhode Island  |               |      |             |
| _ 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  |               |      | <b> </b> _] |
|      | (or designate) of each state as required by General Instruction G? If 'No,' attach explanation   | 8b            | X    | <u> </u>    |
| 9    | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If 'Yes,' complete Part XIV | 9             |      | x           |
| 10   | Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names   |               |      |             |
|      | and addresses  | 10            | Х    |             |
| BAA  |  | orm <b>99</b> | 0-PF | (2010)      |

| TOW     | 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            |             | х        |
| 12      | Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?   | 12            |             | x        |
| 13      | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?   | 13            | Х           |          |
|         | Website address . ► <u>N/A</u>  |               |             |          |
| 14      | The books are in care of ► Glenn Graham Telephone no ► (401)  | 942           | <u>-800</u> | 0        |
| 15      | Located at ► 1160 Cranston St Cranston RI ZIP + 4 ► 02920<br>Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here  |               |             | <u> </u> |
| 13      | and enter the amount of tax-exempt interest received or accrued during the year   |               |             | Ш        |
| 16      | At any time during calendar year 2010, 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?   | 16            | Yes         | No<br>X  |
|         | See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If 'Yes,' enter the name of the  |               |             | Ä        |
| Pari    | foreign country > WILB Statements Regarding Activities for Which Form 4720 May Be Required  |               | <u></u>     |          |
| اللك ال | File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.   |               | Yes         | No       |
| 1 a     | 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?  Yes X No  |               |             |          |
|         | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?  Yes X No  |               |             |          |
|         | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes X No  | į             |             |          |
|         | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  |               |             |          |
|         | (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?  Yes X 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 )  Yes X No   |               |             |          |
| b       | If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see the instructions)?   | 1 b           |             |          |
|         | Organizations relying on a current notice regarding disaster assistance check here  |               |             |          |
| c       | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2010?   | 1c            |             | Х        |
| 2       | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):  |               |             |          |
| а       | At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010?   |               |             |          |
|         | If 'Yes,' list the years ▶ 20 , 20 , 20   |               |             |          |
| b       | Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to  |               |             |          |
|         | all years listed, answer 'No' and attach statement — see the instructions )   | 2 b           |             | Х        |
| C       | : If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here  |               |             |          |
| _       | ► 20 , 20 , 20 20   |               |             |          |
| 3 a     | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?  Yes X No  |               |             |          |
| b       | olf 'Yes,' did it have excess business holdings in 2010 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 |               |             |          |
| -       | détermine if the foundation had excess business holdings in 2010 )  | 3b            |             | X        |
| 4 a     | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?   | 4a            |             | х        |
| 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 2010?   | 4b            |             | Х        |
| BAA     |   | orm <b>99</b> | 0-PF (      |          |

| Form 990-PF (2010) White Family Found  |  |  | 05-050   | 19502 Page <b>6</b>                   |
|--|--|--|--|---------------------------------------|
| Pant VIII B Statements Regarding Activiti  | ies for Which Form   | 1 4720 May Be Req                                    | uired (continued)  |                                       |
| $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $   | •  |  |  |                                       |
| (1) Carry on propaganda, or otherwise attemp   | _  |  | Yes X  | No                                    |
| (2) Influence the outcome of any specific publi<br>on, directly or indirectly, any voter registra                        | ic election (see section a<br>tion drive?                      | 4955), or to carry                                   |  | No                                    |
| (3) Provide a grant to an individual for travel,   | study, or other similar p                                      | urposes?   | Yes X  | No                                    |
| (4) Provide a grant to an organization other th in section 509(a)(1), (2), or (3), or section                            |  |  | Yes X  | No                                    |
| (5) Provide for any purpose other than religiou<br>educational purposes, or for the prevention                           | is, charitable, scientific,<br>n of cruelty to children o      | literary, or ranimals?                               | Yes X  | No                                    |
| b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53 4945 or in (see instructions)? | he transactions fail to qual<br>a current notice regardi       | ualify under the exception<br>ng disaster assistance | ons  | 5b                                    |
| Organizations relying on a current notice regar  | ding disaster assistance                                       | e check here .                                       | ▶ 🗌  |                                       |
| c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure response                      | ne foundation claim exer<br>sibility for the grant?            | mption from the                                      | Yes  | No .                                  |
| If 'Yes,' attach the statement required by Regu  | lations section 53.4945-                                       | 5(d).  |  |                                       |
| 6a Did the foundation, during the year, receive an on a personal benefit contract?                                       |  | . ,  |  | No C1 Y                               |
| <b>b</b> Did the foundation, during the year, pay premit<br>If 'Yes' to 6b, file Form 8870.                              | ums, directly or indirectly                                    | y, on a personal benefit                             | contract?  | 6b X                                  |
| 7a At any time during the tax year, was the found:   | ation a party to a prohib                                      | oited tax shelter transact                           | ion? Yes X   | No Maria                              |
| <b>b</b> If yes, did the foundation receive any proceeds   |  |  |  | 7Ы                                    |
| Information About Officers, D and Contractors  | irectors, Trustees,  | Foundation Manag                                     | gers, Highly Paid E  | imployees,                            |
| 1 List all officers, directors, trustees, foundation   | n managers and their co  | ompensation (see instru                              | ıctions).  |                                       |
| (a) Name and address   | (b) Title and average<br>hours per week<br>devoted to position | (c) Compensation<br>(If not paid, enter -0-)         | (d) Contributions to<br>employee benefit<br>plans and deferred<br>compensation | (e) Expense account, other allowances |
| John Hazen White, Jr   |  |  |  | _                                     |
| Taco, Inc.   | Board Member   |  | 0  |                                       |
| Cranston RI 02920 David Gilden   | 3.00   | 0.   | 0.   | 0.                                    |
| Taco, Inc,1160b Cranston St,   | Board member   |  |  |                                       |
| Cranston RI 02920  | 2.00   | 0.   | 0.   | 0.                                    |
| Glenn Graham   |  |  |  |                                       |
| Taco, Inc,   | Treasurer  |  |  |                                       |
| Cranston RI 02920  | 3.00   | 0.   | 0.   | 0.                                    |
| See Information about Officers, Directors, Trustees, Etc   |  |  |  |                                       |
|  |  | 0.   | 0.   | 0.                                    |
| 2 Compensation of five highest-paid employee   | Y .  |  |  | F                                     |
| (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<br>employee benefit<br>plans and deferred<br>compensation | (e) Expense account, other allowances |
| NONE   |  |  | compensation   |                                       |
|  |  |  |  |                                       |
| 0  |  |  | =  |                                       |
|  |  |  |  |                                       |
| 0  |  |  |  |                                       |
| 0  |  |  |  |                                       |
|  |  |  |  |                                       |
| 0  |  |  |  |                                       |
|  |  |  |  |                                       |
| Total number of other employees paid over \$50,000   |  |  | <b>&gt;</b>  | I NOTIC                               |
| BAA  | TEEA0306 (   | 07/23/10   |  | Form <b>990-PF</b> (2010)             |

# All other program-related investments See instructions 3 Total. Add lines 1 through 3

BAA

Form **990-PF** (2010)

| Form 990-PF (2010) White Family Foundation  | 05-050950         |            |
|---|-------------------|------------|
| Part X   Minimum Investment Return (All domestic foundations must complete this see instructions.)  | part. Foreign for | undations, |
| 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                |            |
| <b>b</b> Average of monthly cash balances   | 1Ы                |            |
| c Fair market value of all other assets (see instructions)  | 1c                |            |
| d Total (add lines 1a, b, and c)  | 1 d               |            |
| e Reduction claimed for blockage or other factors reported on lines 1a and 1c   |                   |            |
| (attach detailed explanation)   |                   |            |
| 2 Acquisition indebtedness applicable to line 1 assets  | 2                 |            |
| 3 Subtract line 2 from line 1d  | 3                 | 0.         |
| 4 Cash deemed held for charitable activities Enter 1-1/2% of line 3   |                   | _          |
| (for greater amount, see instructions)  | 4                 | 0.         |
| 5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4   | 5                 | 0.         |
| 6 Minimum investment return. Enter 5% of line 5   | 6                 | 0.         |
| Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private  | , ,               | ndations   |
| and certain foreign organizations check here ► and do not complete  |                   |            |
| 1 Minimum investment return from Part X, line 6   | _   1             | 0.         |
| 2a Tax on investment income for 2010 from Part VI, line 5   | 0.                |            |
| b Income tax for 2010. (This does not include the tax from Part VI) . 2b  |                   |            |
| c Add lines 2a and 2b   | 2c                | 0.         |
| 3 Distributable amount before adjustments Subtract line 2c from line 1  | 3                 | 0.         |
| 4 Recoveries of amounts treated as qualifying distributions   | 4                 |            |
| 5 Add lines 3 and 4   | 5                 | 0.         |
| 6 Deduction from distributable amount (see instructions)  | 6                 |            |
| 7 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1   | 7                 | 0.         |
| Part XII Qualifying Distributions (see instructions)  |                   |            |
| 1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes  |                   | 411 000    |
| a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26  | 1a                | 411,992.   |
| b Program-related investments — total from Part IX-B  | 1b                |            |
| 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<br>a Suitability test (prior IRS approval required)                             | 3a                |            |
| b Cash distribution test (attach the required schedule)   | 3 b               |            |
| 4 Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line   | 4 . 4             | 411,992.   |
| 5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions) | 5                 |            |

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

BAA

6 Adjusted qualifying distributions. Subtract line 5 from line 4

Form 990-PF (2010)

411,992.

6

## Part XIII Undistributed Income (see instructions)

|   | (a)<br>Corpus | (b)<br>Years prior to 2009 | <b>(c)</b><br>2009 | <b>(d)</b><br>2010 |
|---|---------------|----------------------------|--------------------|--------------------|
| 1 Distributable amount for 2010 from Part XI, line 7  |               |                            | , ,                | 0.                 |
| 2 Undistributed income, if any, as of the end of 2010   |               |                            |                    |                    |
| a Enter amount for 2009 only  |               |                            | 99.                |                    |
| <b>b</b> Total for prior years 20, 20, 20   |               |                            |                    |                    |
| 3 Excess distributions carryover, if any, to 2010   |               |                            |                    |                    |
| a From 2005 261,037   | <u>.</u>      |                            |                    |                    |
| <b>b</b> From 2006 400, 475   | <u>.</u>      |                            | ļ                  |                    |
| c From 2007 329, 924  | <u>.</u>      |                            |                    |                    |
| <b>d</b> From 2008 0  | <b>-</b>      |                            |                    |                    |
| e From 2009 509, 025  | •             |                            | !                  |                    |
| f Total of lines 3a through e   | 1,500,461.    |                            |                    |                    |
| 4 Qualifying distributions for 2010 from Part   |               |                            |                    | •                  |
| XII, line 4: ► \$ 411,992.  |               |                            |                    |                    |
| a Applied to 2009, but not more than line 2a  |               |                            |                    | <del></del>        |
| <ul> <li>Applied to undistributed income of prior years<br/>(Election required — see instructions)</li> </ul> |               |                            |                    |                    |
| <ul> <li>Treated as distributions out of corpus<br/>(Election required — see instructions)</li> </ul>         |               |                            |                    |                    |
| d Applied to 2010 distributable amount  |               |                            |                    |                    |
| e Remaining amount distributed out of corpus  | 411,992.      |                            |                    |                    |
| 5 Excess distributions carryover applied to 2010  |               |                            |                    |                    |
| (If an amount appears in column (d), the same amount must be shown in column (a))                             |               |                            |                    |                    |
| came amount must be shown in continu  |               |                            |                    |                    |
| 6 Enter the net total of each column as   |               |                            |                    |                    |
| indicated below:  |               |                            |                    | ļ                  |
| a Corpus Add lines 3f, 4c, and 4e. Subtract line 5  | 1,912,453.    |                            |                    |                    |
| <b>b</b> Prior years' undistributed income Subtract line 4b from line 2b                                      |               | 0.                         |                    |                    |
| c Enter the amount of prior years' undistribut-   |               |                            |                    |                    |
| ed income for which a notice of deficiency  |               |                            |                    |                    |
| has been issued, or on which the section 4942(a) tax has been previously assessed                             |               |                            |                    |                    |
|   |               |                            |                    |                    |
| d Subtract line 6c from line 6b Taxable amount — see instructions   |               | 0.                         |                    |                    |
| e Undistributed income for 2009 Subtract line 4a from   |               |                            |                    |                    |
| line 2a Taxable amount — see instructions   |               |                            | 99.                |                    |
|   |               |                            |                    |                    |
| f Undistributed income for 2010. Subtract lines 4d and 5 from line 1. This amount must be                     |               |                            |                    |                    |
| distributed in 2011   |               |                            |                    | 0.                 |
| 7 Amounts treated as distributions out of   |               |                            |                    |                    |
| corpus to satisfy requirements imposed<br>by section 170(b)(1)(F) or 4942(g)(3)                               |               |                            |                    |                    |
| (see instructions)  |               |                            |                    |                    |
| 8 Excess distributions carryover from 2005 not  | 0.61 0.65     |                            |                    |                    |
| applied on line 5 or line 7 (see instructions)  | 261,037.      |                            |                    |                    |
| 9 Excess distributions carryover to 2011.<br>Subtract lines 7 and 8 from line 6a                              | 1,651,416.    |                            |                    |                    |
| 10 Analysis of line 9   |               |                            |                    |                    |
| <b>a</b> Excess from 2006 400, 475  |               |                            |                    |                    |
| <b>b</b> Excess from 2007 329, 924  | ===           |                            |                    |                    |
| c Excess from 2008 0  |               |                            |                    |                    |
| <b>d</b> Excess from 2009 509, 025  |               | }                          |                    |                    |
| e Excess from 2010 411, 992   |               |                            | <u> </u>           |                    |

| orm <b>990-PF</b> (2010) White Family Fou   |                                   |  |  | 05-0509502              | Page <b>10</b> |
|---|-----------------------------------|--|--|-------------------------|----------------|
| Part XIV Private Operating Foundation   |                                   |  |  |                         | N/A            |
| 1 a If the foundation has received a ruling or de<br>is effective for 2010, enter the date of the rule.   | etermination letter t<br>uling    | hat it is a private op                       | perating foundation,                         |                         |                |
| <b>b</b> Check box to indicate whether the foundation   |                                   | ating foundation des                         |  | 4942(j)(3) or           | 4942(j)(5)     |
| 2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed  | Tax year<br>(a) 2010              | <b>(b)</b> 2009                              | Prior 3 years<br>(c) 2008                    | <b>(d)</b> 2007         | (e) Total      |
| <b>b</b> 85% of line 2a   |                                   |  |  |                         |                |
| c Qualifying distributions from Part XII,<br>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<br>for active conduct of exempt activities.<br>Subtract line 2d from line 2c   |                                   |  |  |                         |                |
| 3 Complete 3a, b, or c for the<br>alternative test relied upon:   |                                   |  |  |                         |                |
| a 'Assets' alternative test — enter   |                                   |  |  |                         |                |
| (1) 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  |                                   |  |  |                         |                |
| <ol> <li>Total support other than gross<br/>investment income (interest,<br/>dividends, rents, payments<br/>on securities loans (section<br/>512(a)(5)), or royalties)</li> </ol> |                                   |  |  |                         |                |
| (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<br>an exempt organization  |                                   |  |  |                         |                |
| (4) Gross investment income   |                                   |  | <u> </u>                                     |                         |                |
| Part XV Supplementary Information assets at any time during th  | (Complete this<br>e year — see in | part only if the structions.)                | organization ha                              | ad \$5,000 or mor       | e in           |
| Information Regarding Foundation Manage a List any managers of the foundation who had close of any tax year (but only if they have  | ave contributed mo                | re than 2% of the to<br>han \$5,000). (See s | otal contributions rec<br>section 507(d)(2)) | eived by the foundat    | on before the  |
| <b>b</b> List any managers of the foundation who or   |                                   |  |  | y large portion of the  | ownership of   |
| a partnership or other entity) of which the f   | oundation has a 10                | % or greater interes                         | st   |                         |                |
| 2 Information Regarding Contribution, Grant<br>Check here ▶ ☐ If the foundation only makes<br>requests for funds If the foundation makes<br>complete items 2a, b, c, and d        | akes contributions                | to preselected char                          | itable organizations                         | •                       |                |
| a The name, address, and telephone number   | •                                 | • •  |  |                         |                |
| See Information Regarding Contribution, G   | rant, Gift, Loan, Sc              | holarship, etc, Prog                         | rams   |                         |                |
|   |                                   |  |  |                         |                |
| <b>b</b> The form in which applications should be s   | ubmitted and inform               | nation and material                          | s they should include                        | e.                      |                |
| c Any submission deadlines  | <del></del>                       |  |  |                         | <del>.</del>   |
| d Any restrictions or limitations on awards, s  | uch as by geograph                | nical areas, charitab                        | ole fields, kinds of in                      | stitutions, or other fa | ctors.         |
|   |                                   |  |  |                         |                |

Form 990-PF (2010) White Family Foundation

Part XV | Supplementary Information (continued)

| 3 Grants and Contributions Paid During the | Year or Approved for Futu  |           |   |                                       |
|--|--|-----------|---|---------------------------------------|
| Recipient                                  | If recipient is an individual show any relationship to any foundation manager or | status of | Purpose of grant or contribution            | Amount                                |
| Name and address (home or business)        | substantial contributor  | recipient | 337.1.23.131                                |                                       |
| a Paid during the year                     |  |           |   |                                       |
| First Works Providence                     |  |           | Grant for fall                              |                                       |
| 270 Westminster Street #5                  | 0.2  | 501 c 3   | festival                                    | 05 000                                |
| Providence RI 029                          | 03   |           | Plant Parameter                             | 25,000.                               |
| United Way of RI<br>Waterman Street        |  | 501-c-3   | Flood Recovery                              |                                       |
| Providence RI 029                          | 06   | 1301-0-3  | ]   | 10,000.                               |
| Paul Cuffee School                         |  |           | Computers                                   | 10,000.                               |
| 459 Promenade Street                       |  | 501c3     | Compacers                                   |                                       |
| Providence RI 029                          | 08   | 00100     |   | 10,000.                               |
| Johnson and Wales University               |  |           | Unrestricted                                | ,                                     |
| 8 Abot Park Place                          |  | 501c3     |   |                                       |
| Providence RI 029                          | 03   |           |   | 8,000.                                |
| Crossroads RI                              |  | j         | Unrestricted                                | ·                                     |
| 160 Broad Street                           |  | 501c3     | 1   |                                       |
| Providence RI 029                          | 03   |           |   | 5,000.                                |
| Project Goal                               |  |           |   |                                       |
| 79 Savoy Street                            |  | 501c3     |   |                                       |
| Providence RI 029                          | 06   |           | Unrestricted                                | 5,000.                                |
| Bristol Art Museum                         |  |           | 1   |                                       |
| PO Box 42                                  |  |           |   |                                       |
| Bristol RI 028                             | 09   | 501 c 3   | matching gift                               | 10,000.                               |
| Amos House                                 |  |           |   |                                       |
| 413 Friendship Street                      | 0.2  | E01 =3    |   | 5 000                                 |
| Providence RI 029                          | 03   | 501 c3    | unrestricted for homeless shelter           | 5,000.                                |
| Day One<br>100 Medway Street               |  | 501c3     | Unrestricted                                |                                       |
| Providence RI 029                          | 06   | 30163     | prevent sexual abuse and help victims of it | 5,000.                                |
| See Line 3a statement                      |  |           | merp victims of it                          | 3,000.                                |
| Coo Line Sa Statement                      |  |           |   |                                       |
|  |  |           |   | 328,262.                              |
|  |  |           |   | ,                                     |
|  |  |           |   |                                       |
|  |  |           |   |                                       |
| <b>b</b> Approved for future payment       | -  |           | ► 3a  | 411,262.                              |
| a Approved for fataire payment             |  |           |   |                                       |
|  |  |           | ]   |                                       |
|  |  |           |   |                                       |
|  |  |           |   |                                       |
|  |  |           |   |                                       |
|  |  |           | i   |                                       |
|  |  |           |   |                                       |
|  |  |           | ,   |                                       |
|  |  |           | ]   |                                       |
|  |  |           |   |                                       |
|  |  |           |   |                                       |
|  |  |           |   |                                       |
|  |  |           |   |                                       |
|  |  |           |   |                                       |
|  |  |           | 1   |                                       |
|  |  |           |   |                                       |
| Total                                      |  |           | ► 3b  | · · · · · · · · · · · · · · · · · · · |

| Part XVI-A | Analysis                                | of Income- | Producina | Activities |
|------------|---|------------|-----------|------------|
|            | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |            |           | MOUTING.   |

| Program service revenue  Business code  Amount Exclusion code  Code  Amount Exclusion code  Related or exemption code  From code  Related or exemption code  From code  Related or exemption code  Related or exemption code  From code  Related or exemption code  Rela | er gross amounts unless otherwise indicated   |                 | d business income | Excluded by                                      | section 512, 513, or 514 | (e)   |
|--|---|-----------------|-------------------|--|--------------------------|---|
| grees and contracts from government agencies Membership dues and assessments Interest on savings and temporary cash investments Dividends and interest from securities Net rental income or (loss) from real estate: a Debt-financed property b Not debt-financed property Net rental income or (loss) from personal property Other investment income Gain or (loss) from sales of assets other than inventory Net income or (loss) from sales of inventory Other revenue  a Bett-financed property Description (loss) from sales of inventory Other revenue Description (loss) from sales of inventory Other investment inventory Other revenue Description (loss) from sales of inventory Other investment inventory Other inventory Other investment inventory Other inventory  |   | Business        |                   | Exclu-<br>sion                                   | <b>(d)</b><br>Amount     | Related or exemp function income (see the instruction |
| grees and contracts from government agencies  Membership dues and assessments Interest on savings and temporary cash investments Dividends and interest from securities Net rental income or (loss) from real estate: a Debt-financed property b Not debt-financed property Other investment income Gain or (loss) from sales of assets other than inventory Net income or (loss) from sales of inventory Other revenue  a Gross profit or (loss) from sales o | _   |                 |                   | code   |                          |   |
| g Fees and contracts from government agencies  Membership dues and assessments Interest on savings and temporary cash investments Dividends and interest from securities Net rental income or (loss) from real estate: a Debt-financed property b Not debt-financed property the trental income or (loss) from personal property Other investment income Gain or (loss) from sales of assets other than inventory Net income or (loss) from special events Gross profit or (loss) from special events Gross profit or (loss) from sales of inventory Other revenue  3  |   | <del></del>     |                   |  |                          |   |
| g Fees and contracts from government agencies  Membership dues and assessments Interest on savings and temporary cash investments Dividends and interest from securities Net rental income or (loss) from real estate: a Debt-financed property b Not debt-financed property Other investment income Gain or (loss) from special events Gross profit or (loss) from sales of inventory Other revenue  3 Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)  Total. Add line 13 instructions to verify calculations)  At XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes   |   | <del></del>     | <del></del>       |  |                          |   |
| Fees and contracts from government agencies  Membership dues and assessments Interest on savings and temporary cash investments  Dividends and interest from securities Net rental income or (loss) from real estate:  Bebt-financed property Net rental income or (loss) from personal property Net rental income or (loss) from personal property Net rental income or (loss) from personal property Net rental income or (loss) from special events Gain or (loss) from sales of assets other than inventory Net income or (loss) from special events Gross profit or (loss) from sales of inventory Other revenue  Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  Total. Add line 13 instructions to verify calculations)  Relationship of Activities to the Accomplishment of Exempt Purposes  |   |                 |                   | <u> </u>   |                          |   |
| Fees and contracts from government agencies  Membership dues and assessments Interest on savings and temporary cash investments  Dividends and interest from securities  Net rental income or (loss) from real estate:  Debt-financed property  Net rental income or (loss) from personal property  Net rental income or (loss) from personal property  Other investment income  Gain or (loss) from sales of assets other than inventory  Net income or (loss) from special events  Gross profit or (loss) from sales of inventory  Other revenue  Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  Total. Add line 13 instructions to verify calculations)  REMINION SALES (SEE THE PURPOSES)  |   |                 |                   |  |                          |   |
| g Fees and contracts from government agencies  Membership dues and assessments Interest on savings and temporary cash investments Dividends and interest from securities Net rental income or (loss) from securities Debt-financed property Not debt-financed property Net rental income or (loss) from personal property Other investment income Gain or (loss) from sales of assets other than inventory Net income or (loss) from special events Gross profit or (loss) from sales of inventory Other revenue  Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Total. Add line 13 instructions to verify calculations )  At XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes   |   |                 |                   |  |                          |   |
| Membership dues and assessments Interest on savings and temporary cash investments Dividends and interest from securities Net rental income or (loss) from real estate: Debt-financed property Not debt-financed property Net rental income or (loss) from personal property Other investment income Gain or (loss) from sales of assets other than inventory Net income or (loss) from sales of inventory Other revenue  Gross profit or (loss) from sales of inventory Other revenue  Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Total. Add line 12, columns to verify calculations )  **EXVI-B** Relationship of Activities to the Accomplishment of Exempt Purposes   |   |                 |                   |  |                          |   |
| Interest on savings and temporary cash investments  Dividends and interest from securities  Net rental income or (loss) from real estate:  3 Debt-financed property  Net rental income or (loss) from personal property  Other investment income  Gain or (loss) from sales of assets other than inventory  Net income or (loss) from special events  Gross profit or (loss) from sales of inventory  Other revenue  Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculations)  TXVI-B Relationship of Activities to the Accomplishment of Exempt Purposes   |   | es              |                   |  |                          | -   |
| Dividends and interest from securities  Net rental income or (loss) from real estate:  Debt-financed property  Not debt-financed property  Net rental income or (loss) from personal property  Other investment income  Gain or (loss) from sales of assets other than inventory  Net income or (loss) from special events  Gross profit or (loss) from sales of inventory  Other revenue  Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculations)  TXVI-B Relationship of Activities to the Accomplishment of Exempt Purposes   | •   |                 |                   | -  |                          |   |
| Net rental income or (loss) from real estate:  a Debt-financed property  b Not debt-financed property  Net rental income or (loss) from personal property  Other investment income  Gain or (loss) from sales of assets other than inventory  Net income or (loss) from special events  Gross profit or (loss) from sales of inventory  Other revenue  Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  Total. Add line 13 instructions to verify calculations)  **EXVI-B** Relationship of Activities to the Accomplishment of Exempt Purposes   |   |                 |                   |  |                          |   |
| Debt-financed property Not debt-financed property Net rental income or (loss) from personal property Other investment income Gain or (loss) from sales of assets other than inventory Net income or (loss) from special events Gross profit or (loss) from sales of inventory Other revenue  Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)  Total. Add line 13 instructions to verify calculations)  **EXVI-B** Relationship of Activities to the Accomplishment of Exempt Purposes  |   |                 | <del></del>       |  |                          |   |
| Not debt-financed property Net rental income or (loss) from personal property Other investment income Gain or (loss) from sales of assets other than inventory Net income or (loss) from special events Gross profit or (loss) from sales of inventory Other revenue  Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)  **Total. Add line 13 instructions to verify calculations**  **Total. Relationship of Activities to the Accomplishment of Exempt Purposes**  |   |                 |                   |  |                          |   |
| Net rental income or (loss) from personal property Other investment income Gain or (loss) from sales of assets other than inventory Net income or (loss) from special events Gross profit or (loss) from sales of inventory Other revenue  Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)  Total. Add line 13 instructions to verify calculations)  TXVI-B Relationship of Activities to the Accomplishment of Exempt Purposes  |   | <u> </u>        |                   |  |                          |   |
| Other investment income Gain or (loss) from sales of assets other than inventory Net income or (loss) from special events Gross profit or (loss) from sales of inventory Other revenue  Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations)  TXVI-B Relationship of Activities to the Accomplishment of Exempt Purposes  |   |                 |                   | <del>                                     </del> |                          |   |
| Gain or (loss) from sales of assets other than inventory  Net income or (loss) from special events  Gross profit or (loss) from sales of inventory  Other revenue  Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculations )  It XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes  | · · · · · · · · · · · · · · · · · · ·   |                 |                   |  |                          |   |
| Net income or (loss) from special events  Gross profit or (loss) from sales of inventory  Other revenue  Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculations)  t XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes  |   |                 |                   |  |                          |   |
| Gross profit or (loss) from sales of inventory Other revenue  Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations )  TXVI-B Relationship of Activities to the Accomplishment of Exempt Purposes   | •   |                 |                   |  |                          |   |
| Other revenue  Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculations )  t XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes   |   |                 |                   | _  |                          |   |
| Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculations )  t XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes  | -   |                 |                   |  |                          |   |
| Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculations)  t XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes   | Other revenue   |                 |                   |  |                          |   |
| Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculations)  t XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes   | <del></del>   |                 |                   | <u> </u>   |                          |   |
| Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculations )  t XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes  | )   |                 |                   | <u> </u>   |                          |   |
| Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculations )  t XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes  |   |                 |                   |  |                          |   |
| Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculations )  t XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes  |   |                 | <del> </del>      | <u> </u>   |                          |   |
| Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculations )  13  14 XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes  | <u> </u>  | 1 1             |                   | I I  |                          |   |
| e worksheet in line 13 instructions to verify calculations )  rt XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes   |   | <del></del>     |                   |  | <u> </u>                 |   |
| rt XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes   |   |                 |                   |  |                          |   |
|  | Total. Add line 12, columns (b), (d), and (e)   |                 |                   |  | 13                       |   |
| 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). (See the instructions)   | <b>Total.</b> Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify call                             |                 |                   |  |                          |   |
| accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See the instructions )  | <b>Total.</b> Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal                              |                 | shment of Exem    | pt Purpose                                       |                          |   |
|  | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify call t XVI-B Relationship of Activities | to the Accompli |                   | -  | es                       | to the  |
|  | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify call t XVI-B Relationship of Activities | to the Accompli |                   | -  | es                       |   |
|  | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calent XVI-B Relationship of Activities | to the Accompli |                   | -  | es                       |   |
|  | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify call t XVI-B Relationship of Activities | to the Accompli |                   | -  | es                       |   |
|  | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify call t XVI-B Relationship of Activities | to the Accompli |                   | -  | es                       |   |
|  | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify call t XVI-B Relationship of Activities | to the Accompli |                   | -  | es                       |   |
|  | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify call t XVI-B Relationship of Activities | to the Accompli |                   | -  | es                       |   |
|  | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify call t XVI-B Relationship of Activities | to the Accompli |                   | -  | es                       |   |
|  | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify call t XVI-B Relationship of Activities | to the Accompli |                   | -  | es                       |   |
|  | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify call t XVI-B Relationship of Activities | to the Accompli |                   | -  | es                       |   |
|  | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify call t XVI-B Relationship of Activities | to the Accompli |                   | -  | es                       |   |
|  | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify call t XVI-B Relationship of Activities | to the Accompli |                   | -  | es                       |   |
|  | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify call t XVI-B Relationship of Activities | to the Accompli |                   | -  | es                       |   |
|  | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify call t XVI-B Relationship of Activities | to the Accompli |                   | -  | es                       |   |
|  | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify call t XVI-B Relationship of Activities | to the Accompli |                   | -  | es                       |   |
|  | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify call t XVI-B Relationship of Activities | to the Accompli |                   | -  | es                       |   |
|  | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify call t XVI-B Relationship of Activities | to the Accompli |                   | -  | es                       |   |
|  | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify call t XVI-B Relationship of Activities | to the Accompli |                   | -  | es                       |   |
|  | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify call t XVI-B Relationship of Activities | to the Accompli |                   | -  | es                       |   |
|  | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify call t XVI-B Relationship of Activities | to the Accompli |                   | -  | es                       |   |
|  | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify call t XVI-B Relationship of Activities | to the Accompli |                   | -  | es                       |   |
|  | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify call t XVI-B Relationship of Activities | to the Accompli |                   | -  | es                       |   |
|  | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify call t XVI-B Relationship of Activities | to the Accompli |                   | -  | es                       |   |
| <u> </u>   | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify call t XVI-B Relationship of Activities | to the Accompli |                   | -  | es                       |   |
|  | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calent XVI-B Relationship of Activities | to the Accompli |                   | -  | es                       |   |

### Form 990-PF (2010) White Family Foundation 05-0509502 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations Part XVII

|                    |   |                            |  |                       |                   |                                 |                   |             |                    | Yes        | No    |
|--------------------|---|----------------------------|--|-----------------------|-------------------|---------------------------------|-------------------|-------------|--------------------|------------|-------|
| describe           |   | f the Code (other th       | in any of the following an section 501(c)(3) or                                |                       |                   |                                 |                   |             |                    |            |       |
| _                  | · -   |                            | charitable exempt orga   | nızatıon              | of                |                                 |                   |             |                    |            |       |
| (1) Cash           |   |                            |  |                       |                   |                                 |                   |             | 1 a (1)            |            | X     |
| (2) Othe           |   |                            |  |                       |                   |                                 |                   |             | 1 a (2)            |            | X     |
| <b>b</b> Other tra | insactions:                                 |                            |  |                       |                   |                                 |                   |             |                    |            |       |
| (1) Sale           | s of assets to a nonc                       | charitable exempt o        | rganization  |                       |                   |                                 |                   | ľ           | 1 b (1)            |            | X     |
| • •                | hases of assets from                        |                            | •  |                       |                   |                                 |                   | -           | 1 b (2)            |            | X     |
| (3) Rent           | al of facilities, equipr                    | ment, or other asse        | ts   |                       |                   |                                 |                   | F           | 1 b (3)            |            | Х     |
| (4) Rein           | nbursement arrangen                         | nents                      |  |                       |                   |                                 |                   | ļ ļ         | 1b (4)             |            | X     |
| <b>(5)</b> Loan    | s or loan guarantees                        | 5                          |  |                       |                   |                                 |                   |             | 1 b (5)            |            | Х     |
| (6) Perf           | ormance of services                         | or membership or f         | undraising solicitations   |                       |                   |                                 |                   |             | 1b (6)             |            | Х     |
|                    |   |                            | ner assets, or paid emp  | loyees                |                   |                                 |                   |             | 1c                 |            | Х     |
|                    |   |                            |  |                       |                   |                                 |                   | _           |                    |            |       |
| the good           | s, other assets, or se                      | ervices given by the       | ete the following schedi<br>reporting foundation. I<br>column (d) the value of | f the fou             | ındatıor          | n received les                  | s than fair n     | narket va   | et value<br>lue in | of         |       |
| (a) Line no.       | (b) Amount involved                         | (c) Name of none           | haritable exempt organization  |                       | (d) D             | escription of tran              | nsfers, transacti | ons, and sh | narıng arrar       | ngement    | s     |
|                    |   |                            |  |                       |                   |                                 | ·                 |             |                    |            |       |
|                    |   |                            |  |                       |                   |                                 |                   |             | •                  |            |       |
|                    |   |                            |  |                       |                   |                                 |                   |             |                    |            |       |
|                    |   |                            |  |                       |                   |                                 |                   |             |                    |            |       |
|                    |   |                            |  |                       |                   |                                 |                   |             |                    |            |       |
|                    |   |                            |  |                       |                   |                                 |                   |             |                    |            |       |
|                    |   |                            |  |                       |                   |                                 |                   |             |                    |            |       |
|                    |   |                            |  |                       |                   | _                               |                   |             |                    |            |       |
|                    |   |                            |  |                       |                   |                                 |                   |             |                    |            |       |
|                    |   |                            |  |                       |                   |                                 |                   |             |                    |            |       |
|                    |   |                            |  |                       |                   |                                 |                   |             |                    |            |       |
|                    |   |                            | -  |                       |                   |                                 |                   |             |                    |            |       |
|                    |   |                            |  |                       |                   |                                 |                   |             |                    |            |       |
|                    | <u> </u>                                    |                            |  |                       |                   |                                 | •                 |             |                    |            |       |
|                    |   | _                          |  |                       |                   |                                 |                   |             |                    |            |       |
|                    |   | ·                          |  |                       |                   |                                 |                   |             |                    |            |       |
| describe           | d in section 501(c) of                      | f the Code (other th       | orth, or related to, one o<br>an section 501(c)(3)) o                          | r more t<br>r in sect | ax-exe<br>ion 527 | mpt organiza <sup>:</sup><br>7? | tions             |             | Yes                | x          | No    |
|                    | complete the following Name of organization |                            | (b) Type of organiza   | ation                 |                   |                                 | :) Description    | n of rolati |                    |            |       |
|                    | Traine or organization                      | 71.                        | (b) Type of organize   | 20017                 |                   | ,,,                             | J Description     | i oi relati | онынр              |            |       |
|                    | _   |                            |  |                       |                   |                                 |                   |             |                    |            |       |
|                    |   |                            |  |                       |                   |                                 |                   |             |                    |            |       |
|                    |   | -                          |  |                       |                   |                                 |                   |             |                    |            |       |
|                    |   |                            |  |                       |                   |                                 |                   |             |                    |            |       |
| Under p            | enalties of perjury, I declare              | e that I have examined th  | is return, including accompany   | ıng schedu            | les and s         | tatements, and to               | the best of my    | knowledge a | and belief, if     | t is true. |       |
|                    | and complète Declaration                    | of preparer (other than ta | is return, including accompany xonyer or fiduciary) is based or                | n all inform          | nation of         | which preparer ha               | as any knowledg   | e           |                    |            |       |
| Sign               | b H   | /////                      |  |                       |                   |                                 |                   |             |                    |            |       |
| Here 🕨             | 4/00  |                            |  |                       | 06/1              | 16/11                           | Treas             | surer       |                    |            |       |
| Sign               | nature of officer or trustee                |                            | · I =  |                       | Date              |                                 | Title             |             |                    |            |       |
|                    | Print/Type preparer's nam                   |                            | Preparer's signature   |                       | ل_                | Date                            | _ Check if        | if F        | PTIN               |            |       |
| Paid               | Richard M St                                |                            |  |                       |                   | 07/14/11                        | self-emplo        | yed         |                    |            |       |
| Preparer           | ,   |                            | ie Streitfeld  | Diaz                  | & Co              | o., PC                          | Firm's EIN ►      |             |                    |            |       |
| Jse Only           | Firm's address 10                           | 604 Broad St               | reet   |                       |                   |                                 |                   |             |                    |            |       |
|                    |   | ranston                    |  | RI                    | 0290              | 05                              | Phone no          | (401)       | 223-0              | 0205       |       |
| ВАА                |   |                            |  |                       |                   |                                 |                   |             | Form <b>99</b>     | 0-PF (     | 2010) |
|                    |   |                            |  |                       |                   |                                 |                   |             |                    |            |       |

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

Department of the Treasury Internal Revenue Service

#### **Schedule of Contributors**

► Attach to Form 990, 990-EZ, or 990-PF

OMB No 1545-0047

2010

| Name of the organization   |   | Employer identification number   |
|--|---|--|
| White Family Foundation  | 1   | 05-0509502   |
| Organization type (check one)  |   |  |
| Filers of:   | Section:  |  |
| Form 990 or 990-EZ   | 501(c)() (enter number) organizatio   | n  |
|  | 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 trea  | ited as a private foundation   |
|  | 501(c)(3) taxable private foundation  |  |
| Check if your organization is covered to Note. Only a section 501(c)(7), (8), or | by the <b>General Rule</b> or a <b>Special Rule</b> (10) organization can check boxes for both the General F  | Rule and a Special Rule See instructions.  |
| General Rule   |   |  |
| X For an organization filing Form 990 contributor (Complete Parts I and          | 0, 990-EZ, or 990-PF that received, during the year, $5,00$ II )  | 30 or more (in money or property) from any one   |
| Special Rules  |   |  |
| 509(a)(1) and 170(b)(1)(A)(vi), and  | on filing Form 990 or 990-EZ, that met the 33-1/3% suppo<br>d received from any one contributor, during the year, a co<br>990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complet   | ontribution of the greater of (1) \$5,000 or   |
| aggregate contributions of more th   | l) organization filing Form 990 or 990-EZ, that received fro<br>lan \$1,000 for use <i>exclusively</i> for religious, charitable, scii<br>n or animals Complete Parts I, II, and III.   | om any one contributor, during the year,<br>entific, literary, or educational purposes, or |
| contributions for use exclusively for<br>If this box is checked, enter here the  | <ul> <li>organization filing Form 990 or 990-EZ, that received from religious, charitable, etc, purposes, but these contribution the total contributions that were received during the year form parts unless the General Rule applies to this organization.</li> </ul> | ons did not aggregate to more than \$1,000 or an exclusively religious, charitable, etc.   |
| religious, charitable, etc, contributi   | ions of \$5,000 or more during the year   | <b>▶</b> \$  |
| 990-PF) but it <b>must</b> answer 'No' on Pa                                     | overed by the General Rule and/or the Special Rules does art IV, line 2 of their Form 990, or check the box on line H the filing requirements of Schedule B (Form 990, 990-EZ   | of its Form 990-EZ, or on line 2 of its Form   |
| BAA For Paperwork Reduction Act N<br>990EZ, or 990-PF.                           | Notice, see the Instructions for Form 990,  | Schedule B (Form 990, 990-EZ, or 990-PF) (2010)  |

| Schedule<br>Name of org | <b>B</b> (Form 990, 990-EZ, or 990-PF) (2010)     | Page 1                            | of 1 of Part I   |
|-------------------------|---|-----------------------------------|--|
|                         | Family Foundation                                 | 1                                 | 509502   |
|                         | Contributors (see instructions )                  |                                   |  |
| (a)<br>Number           | (b)<br>Name, address, and ZIP + 4                 | (c) Aggregate contributions       | (d)<br>Type of contribution  |
| 1                       | Taco Inc  1120 Cranston Street  Cranston RI 02920 | -<br> \$544,234.                  | Person X Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a)<br>Number           | (b)<br>Name, address, and ZIP + 4                 | (c) Aggregate contributions       | (d)<br>Type of contribution  |
|                         |   | <br> <br> <br>                    | Person Payroll Noncash  (Complete Part II if there is a noncash contribution)  |
| (a)<br>Number           | (b)<br>Name, address, and ZIP + 4                 | (c)<br>Aggregate<br>contributions | (d)<br>Type of contribution  |
|                         |   | <br>!\$                           | Person Payroll Noncash (Complete Part II if there is a noncash contribution)   |
| (a)<br>Number           | (b)<br>Name, address, and ZIP + 4                 | (c)<br>Aggregate<br>contributions | (d)<br>Type of contribution  |
| (a)                     | (b)   | \$\$<br>(c)                       | Person Payroll Noncash  (Complete Part II if there is a noncash contribution)  |
| Number                  |   | Aggregate contributions           | Type of contribution   |
| (a)                     | (b)   | \$\$<br>\$(c)                     | Person Payroll Noncash (Complete Part II if there is a noncash contribution)   |
| (a)<br>Number           |   | Aggregate contributions           | Type of contribution   |
|                         |   | _                                 | Person Payroll   |

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2010)

(Complete Part II if there is a noncash contribution.)

Form 990-PF, Page 1, Part I, Line 23

| ı | ina | 23          | Stmt |  |
|---|-----|-------------|------|--|
| L | .me | <b>Z</b> .3 | Simi |  |

| Other expenses      | Rev/Exp Book | Net Inv Inc | Adj Net Inc | Charity Disb |
|---------------------|--------------|-------------|-------------|--------------|
| Bank fees           | 152.         |             |             | 152.         |
| Insurance           |              |             |             |              |
| other               | 11,292.      |             |             |              |
| Security            | 50,683.      |             |             |              |
| Property taxes      | 29,318.      |             |             |              |
| Utilies and repairs | 4,309.       |             |             |              |
| contractors         | 13,220.      |             |             | \            |

Total

108,974.

1<u>52.</u>

Form 990-PF, Page 6, Part VIII, Line 1

Information about Officers, Directors, Trustees, Etc.

| (a)<br>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 |  |
|--|---|---|---|---------------------------------------|--|
| Person X Business Thomas J Farrell Taco, Inc Cranston RI 02920 Person X Business Kyle Adamonis | President 3.00  | 0.  | 0.  | 0.                                    |  |
| Taco, Inc. Cranston RI 02920   | Secretary 2.00  | 0.  | 0.  | 0.                                    |  |

Total

| 0.   | 0. | 0.   |
|------|----|------|
| <br> |    | <br> |
|      |    |      |

Form 990-PF, Page 10, Part XV, Line 2

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc, Programs

 Name
 Glenn Graham

 Address
 Taco, Inc; 1120 Cranston Street

 City, St, Zip, Phone
 Cranston, RI 02920
 RI 02920 (401) 942-8000

The form in which applications should be submitted and information and materials they should include:

Description of purpose of the grant

Any submission deadlines:

There are no specific submission guidelines

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

There are no specific restrictions

| Form 990-PF, Page 10, Part XV, Line 2                                      |          |
|--|----------|
| Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc, I | Programs |

Continued

| Name        | Glenn Graham,            | Taco INC |    |       |                |
|-------------|--------------------------|----------|----|-------|----------------|
| Address     | 1120 Cranston            | Street   |    |       |                |
| City, St, 2 | Zip, Phone <u>Cranst</u> | on       | RI | 02920 | (401) 942-8000 |

The form in which applications should be submitted and information and materials they should include: Copy of 501(c)(3) tax exemption letter from IRS

Any submission deadlines:

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

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

| Recipient  Name and address (home or business)   | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foun-<br>dation<br>status<br>of re-<br>cipient | Purpose of grant or contribution | Person or<br>Business<br>Checkbox<br>Amount |
|--|---|--|----------------------------------|---|
| a Paid during the year  Mixed Magic Theatre  999 Main Street  Pawtucket RI 02860  Providence Community Library |   | 501c3  | Theatre arts                     | Person or Business X 5,000. Person or       |
| P_O_Box_9267<br>Providence RI 02940  | <b></b>   | 501 63   | Unrestricted                     | Business X 3,000.                           |
| Special Olymics RI  370 GW Highway  Smithfield RI 02917  |   | _ <b></b> _                                    | Unrestricted                     | Person or Business X                        |
| URI Alumni Association   |   | 301 63   | oniestricted                     | Person or                                   |
| 73 Upper College Road  |   |  |                                  | Business X                                  |
| Kingston RI 02881  |   | 501 c3   | Unrestricted                     | 3,000.                                      |
| Various others Various   |   |  |                                  | Person or Business X                        |
| Various RI 02903   | <b>-</b>  | 501 c3   | Various                          | 20,762.                                     |
| Bradley Hospital Foundation  |   |  |                                  | Person or                                   |
| Veterans Parkway East Providence RI 02914  | <b>-</b>  |  |                                  | Business X                                  |
| Meeting Street School  |   | 301 63   | Various                          | 10,000.<br>Person or                        |
| Thurbers Avenue  |   |  | <b></b>                          | Business X                                  |
| Providence RI 02905  |   | 501 63   | Various                          | 30,000.                                     |
| Memorial Hospital  |   | 301 03   | V411045                          | Person or                                   |
| Prospect Street  |   | <b>-</b>                                       |                                  | Business X                                  |
| Pawtucket RI 02860   |   | 501 c 3  | various                          | 25,000.                                     |
| Moses Brown School   |   |  |                                  | Person or                                   |
| Lloyd Avenue   |   |  | <br>                             | Business X                                  |
| Providence RI 02906  |   | 501 c3   | various                          | 50,000.                                     |

Form 990-PF, Page 11, Part XV, line 3a

Continued

| • | •   |    | , . | •   | ,  | • | ugu | • | • | , |
|---|-----|----|-----|-----|----|---|-----|---|---|---|
| L | ine | 3a | sta | ate | en | 1 | ent |   |   |   |

| Recipient  Name and address       | If recipient is<br>an individual,<br>show any                                 | Foun-<br>dation<br>status | Purpose of grant or contribution | Person or<br>Business<br>Checkbox |
|-----------------------------------|---|---------------------------|----------------------------------|-----------------------------------|
| (home or business)                | relationship to<br>any foundation<br>manager or<br>substantial<br>contributor | of re-<br>cipient         |                                  | Amount                            |
| a Paid during the year            |   |                           |                                  |                                   |
| Rhode Island School of Design     |   |                           |                                  | Person or                         |
| Benefit Street                    |   |                           |                                  | Business X                        |
| Providence RI 02903               |   | 501 c 3                   | various                          | 30,000.                           |
| Rhode Island Collge Foundation    |   |                           |                                  | Person or                         |
| Mt_Pleasent_Avenue                |   |                           |                                  | Business X                        |
| Providence RI 02908               |   | 501 c3                    | various                          | 25,000.                           |
| St Andrew's School                |   |                           |                                  | Person or                         |
| 63 Federal Road                   |   |                           |                                  | Business X                        |
| Barrington RI 02806               |   | 501 c3                    | various                          | 50,000.                           |
| Williston School                  | <b></b>   |                           |                                  | Person or                         |
| 19 Payson Avenue                  |   |                           |                                  | Business X                        |
| Easthampton MA 01027              |   | 501 c3                    | various                          | 50,000.                           |
| Women and Infants Hospital        |   | <br>                      |                                  | Person or                         |
| 101 Dudley Street                 |   |                           |                                  | Business X                        |
| Providence RI 02905               |   | 501 c3                    | various                          | 20,000.                           |
| Providence Performing Arts Center |   |                           |                                  | Person or                         |
| Weybosset Street                  |   |                           |                                  | Business X                        |
| Providence RI 02903               |   | 501 c3                    | various                          | 3,500.                            |

Total

328,262.

Form 990-PF, Page 1, Part I Line 16b - Accounting Fees

| Name of<br>Provider  | Type of Service<br>Provided | Amount<br>Paid<br>Per Books | Net<br>Investment<br>Income | Adjusted<br>Net<br>Income | Disbursements<br>for Charitable<br>Purposes |
|----------------------|-----------------------------|-----------------------------|-----------------------------|---------------------------|---|
| Aaronson Lavole Stre | CPA                         | 578.                        |                             |                           | 578.  |

Total <u>578.</u> <u>578.</u>

Form 990-PF, Page 2, Part II, Line 11 L-11 Stmt

| Line 11b - Description of Investments<br>Land, Buildings and Equipment | <b>(a)</b><br>Cost/Other<br>Basis | <b>(b)</b> Accumulated Depreciation | <b>(c)</b><br>Book Value |
|--|-----------------------------------|-------------------------------------|--------------------------|
| Remainder interest: Mary Hazen White property                          | 1,404,293.                        | 0.                                  | 1,404,293.               |

Form 990-PF, Page 2, Part II, Line 11

Continued

L-11 Stmt

| Line 11b - Description of Investments<br>Land, Buildings and Equipment | (a)<br>Cost/Other<br>Basis | <b>(b)</b> Accumulated Depreciation | <b>(c)</b><br>Book Value |
|--|----------------------------|-------------------------------------|--------------------------|
| add for 2005: furnace  | 10,423.                    | 0.                                  | 10,423.                  |
| Total  | 1,414,716.                 | 0.                                  | 1,414,716.               |

Form 990-PF, Page 2, Part II, Line 15

#### Other Assets Stmt

|                                     | Beginning          | End of Year   |                      |
|-------------------------------------|--------------------|---------------|----------------------|
| Line 15 - Other Assets:             | Year Book<br>Value | Book<br>Value | Fair Market<br>Value |
| Memorial book                       | 130,000.           | 130,000.      | 130,000.             |
| less 10% 200 copies given away free | 0.                 | 0.            | 0.                   |
| Total                               | 130,000.           | 130,000.      | 130,000.             |

#### **Supporting Statement of:**

Form 990-PF, p2/Line 17(a)

| Description     | Amount  |
|-----------------|---------|
| checks not sent | 21,217. |
| Total           | 21,217. |

#### **Supporting Statement of:**

Form 990-PF, p2/Line 25(a)

| Description                                      | Amount                  |  |
|--|-------------------------|--|
| opening house cost less house expenses/upkeep/09 | 1,414,716.<br>-115,430. |  |
| Total  | 1,299,286.              |  |

#### **Supporting Statement of:**

Form 990-PF, p2/Line 25(b)

|       | Description | Amount                 |
|-------|-------------|------------------------|
|       |             | 1,299,286.<br>-97,530. |
| Total |             | 1,201,756.             |