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Form **990-PF**

Department of the Treasury

Return of Private Foundation

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

2010

OMB No 1545-0052

	31123 F		be able to use a copy of this			
			1, 2010	, and ending	<u>JUN 30, 2011</u>	
G	Che	ck all that apply: Initial return Amended return	Initial return of a fo	ormer public charity ige	Final return Name change	1
N	ame (of foundation			A Employer identification	number
		NORTH EAST ROOFING ED	UCATIONAL			
1		FOUNDATION, INC.			04-3466803	
N	umber	and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
		100 GROSSMAN DRIVE		300	781-849-05	55
C	ıtv or	town, state, and ZIP code			1.	
ľ	, 0.	BRAINTREE, MA 02184			C if exemption application is p	
L.	Char			<u> </u>	D 1. Foreign organizations	S, Check here
, i	_	ck type of organization: X Section 501(c)(3) ex			Foreign organizations me check here and attach co	omputation
<u>_L</u>			Other taxable private found		E If private foundation sta	tus was terminated
		narket value of all assets at end of year J Account		Accrual	under section 507(b)(1)	(A), check here .
		Part II, col. (c), line 16)	ther (specify)	 	F If the foundation is in a	
_	<u>►\$</u>	576,734. (Part I, colu	mn (d) must be on cash i	basis)	under section 507(b)(1)	
<u> </u>	art	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	76,256.	1		
	2	. —	1 - 1		1	-
	3	Interest on savings and temporary cash investments	7,910.	7,910.		STATEMENT 1
	4	Dividends and interest from securities	7,7,200	7,510		DIRIBHENT I
2017	5	a Gross rents				,
65	Ι.	Net rental income or (loss)				
	6	Net gain or (loss) from sale of assets not on line 10		,1 -		
MAR ?		Gross sales price for all		11		x-2"
\mathbf{Z}	7	Capital gain net income (from Part IV, line 2)		0.		, , , , , , , , , , , , , , , , , , , ,
· -	: <u>'</u>	Net short-term capital gain	1 11	U •	<u> </u>	, , ,
3.50	0	Income modifications				<u> </u>
2	102	Gross sales less returns		· · · · · · · · · · · · · · · · · · ·	N 1 2 2 2 2	
SCANNED MAR 2	1 .		-	y× .	,	* * * * * * * * * * * * * * * * * * * *
		Less Cost of goods sold	1 , , , , , , , , , , , , , , , , , ,	1		
CE	1	Gross profit or (loss)	26 401		26 404	
	111		36,491.	0.	36,491.	STATEMENT 2
_	12	Total. Add lines 1 through 11	120,657.	7,910.	36,491.	, x h, h, 3 = ,
	13	Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
	14	Other employee salaries and wages				
Ø.	15	Pension plans, employee benefits				
Ses		Legal fees			<u> </u>	
9		Accounting fees STMT 3	2,750.	0.	0.	0.
Ω.	C	Other professional fees				
ţ	17					
Operating and Administrative Exper	18	Taxes STMT 4	183.	O.	0.	0.
nis	19	Depreciation and depletion	· · · · · · · · · · · · · · · · · · ·			,
Ę	20	Occupancy				
Š	200					
a	122	Printingandpuğlicatigne 💢				
5	23-	Other expenses nSTMT 5	26,905.	0.	22,289.	0.
rati	24	Total operating and administrative				
<u>a</u>	L	expenses Add lines 13 through 23	29,838.	0.	22,289.	0.
O	25	Contributions, gifts, grants paid	30,000.			30,000.
	26	Total expenses and disbursements.				
		Add lines 24 and 25	59,838.	0.	22,289.	30,000.
	27	Subtract line 26 from line 12:		3.44	1, 1, 1, 1	, , , , , , , , , , , , , , , , , , , ,
	a	Excess of revenue over expenses and disbursements	60,819.	* * * * * * * * * * * * * * * * * * *		
	1	Net investment income (if negative, enter -0-)	* '1	7,910.		* * * * * * * * * * * * * * * * * * *
	C	Adjusted net income (if negative, enter -0-)	- 1	7,5100	14,202.	
0235	01	LHA For Panerwork Reduction Act Notice see t	he instructions		<u> </u>	Form 990-DF (2010)

9-19 = 20R

		90-PF (2010) FOUNDATION, INC.	Paginging of user		3466803 Page 2
F	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		of year
	14	Cook and the state	(a) Book Value	(b) Book Value	(c) Fair Market Value
			50,423.	28,608.	
		Savings and temporary cash investments	465,492.	548,126.	548,126.
	3	Accounts receivable			
	١.	Less: allowance for doubtful accounts			
	4	Pledges receivable -			
		Less: allowance for doubtful accounts			
		Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	_	disqualified persons	\ \ \ \		
	7	Other notes and loans receivable		المراجع الماسية الماسية	
		Less: allowance for doubtful accounts			
ssets		Inventories for sale or use			
SS		Prepaid expenses and deferred charges			
•		Investments - U.S. and state government obligations			
	1	Investments - corporate stock			
		Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis	` , ' ,	" (1)	,
	l	Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis ►		, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,
		Less accumulated depreciation			
	15	Other assets (describe ▶			
	16	Total assets (to be completed by all filers)	515,915.	576,734.	576,734.
	17	Accounts payable and accrued expenses			, ,
	18	Grants payable			1
es		Deferred revenue			
≝	20	Loans from officers, directors, trustees, and other disqualified persons			
ā	21	Mortgages and other notes payable			
_		Other liabilities (describe			
				· · · · · · · · · · · · · · · · · · ·	
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
	l	and complete lines 24 through 26 and lines 30 and 31.			* * *
Š		Unrestricted	515,915.	576,734.	
and	1	Temporarity restricted	313/3131	370,7320	
Da Da	l .	Permanently restricted		·	
	l	Foundations that do not follow SFAS 117, check here			*
2		and complete lines 27 through 31.			
5	l .	Capital stock, trust principal, or current funds	}		- 4 Ab 3
ומו		Paid-in or capital surplus, or land, bldg., and equipment fund			, , , , , , , , , , , , , , , , , , ,
ř		Retained earnings, accumulated income, endowment, or other funds			, , , , , , , , , , , , , , , , , , ,
					· '

| 31 | Total liabilities and net assets/fund balances | Part III | Analysis of Changes in Net Assets or Fund Balances

30 Total net assets or fund balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	1	515,915.
2	Enter amount from Part I, line 27a	2	60,819.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	576,734.
5	Decreases not included in line 2 (itemize) ▶	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	576,734.

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515,915.

515,915.

576,734

576,734

(a) List and descr	and Losses for Tax of the the kind(s) of property sol- rehouse; or common stock, 20	d (e.g., real estate,	t income	(b) How acquired P - Purchase D - Donation	(c) Date (mo., d	acquired ay, yr.)	(d) Date sold (mo., day, yr.)
1a							
b NO	NE						
C					ļ		· · · · · · · · · · · · · · · · · · ·
<u>d</u>					 		
<u>e</u>	100						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale		(n) G (e) plus	ain or (loss) s (f) minus (g)
<u>a</u>		 				_	
<u>b</u>							
<u>c</u> d							
e			-				
Complete only for assets showin	g gain in column (h) and owne	ed by the foundation	on 12/31/69		(I) Gains (C	ol. (h) gain	minus
	(i) Adjusted basis (k) Excess of col (i) col. (ii)			col. (k), but i	not less that	n -0-) or	
(i) F.M.V. as of 12/31/69	as of 12/31/69		col. (j), if any		Losses	(from col. (h))
a							
b							·
c							
d							
e							
-	C If gain, also	enter in Part I line	7	7			
Capital gain net income or (net cap	pital loss) If (loss), en	enter in Part I, line ter -0- in Part I, line	7	2			
Net short-term capital gain or (los	•				•		
If gain, also enter in Part I, line 8,		(0) 4.14 (0).		<i>)</i>			
If (loss), enter -0- in Part I, line 8				<u>}</u>			
Part V Qualification U	nder Section 4940(e)	for Reduced	Tax on Net	Investment l	ncome		
section 4940(d)(2) applies, leave the 'as the foundation liable for the sect "Yes," the foundation does not quality Enter the appropriate amount in e	on 4942 tax on the distributat fy under section 4940(e). Do r	not complete this pa	ırt.				Yes X No
(a) Base period years	(b)			(c)		Distrit	(d) oution ratio
Calendar year (or tax year beginnin	g in) Adjusted qualifyir			ncharitable-use asso		(col. (b) div	rided by col. (c))
2009		81,178.		489,06			.16598
2008		74,117.		478,72		 	.15482
2007		72,623.		347,30			.20910
2006		66,359.		227,46			.29173
2005		59,843.		189,18	35.	Ι	31632
Total of bond on bond (4)						}	1 12707
					. 2	ļ	1.13797
Average distribution ratio for the 5	•	total on line 2 by 5,	or by the number	of years			2000
the foundation has been in existen	ce it less than 5 years		··· ·· ·		3		.22759
Enter the net value of noncharitable	e-use assets for 2010 from Pa	art X, line 5			4		542,024
Multiply line 4 by line 3					5		_123,362
				• • • •			
Enter 1% of net investment incom							79
Add lines 5 and 6					. 7		123,441
					1	l .	
Enter qualifying distributions from If line 8 is equal to or greater than					8		55,907
						1	

NORTH EAST ROOFING EDUCATIONAL

_	m 990-PF (2010) FOUNDATION, INC. 04-3	3466	803	ı	Page 4
P	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 -	see i	nstru	ction	າຣ)
1	a*Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.		1	,	
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	1 .			, ,
ı	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1%			1	58.
	of Part I, line 27b				
	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	_	,	-	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0.
3	Add lines 1 and 2			<u> </u>	<u>58.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			1	<u>58.</u>
6		•		•	,
ē	a 2010 estimated tax payments and 2009 overpayment credited to 2010 6a				
	b Exempt foreign organizations - tax withheld at source			, =	
	c Tax paid with application for extension of time to file (Form 8868)		_	-	
	d Backup withholding erroneously withheld	-	•		,
7	Total credits and payments. Add lines 6a through 6d				<u>0.</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed SEE STATEMENT 6		_	<u> </u>	58.
	,				
	Enter the amount of line 10 to be: Credited to 2011 estimated tax ▶ Refunded ▶ 11 art VII-A Statements Regarding Activities				
				V	
18	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	
		••	1a	<u> </u>	X
u	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or		1b		
	distributed by the foundation in connection with the activities.			-	
_	Did the foundation file Form 1120-POL for this year?			-	X
	1 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	•	1c		
	(1) On the foundation. \blacktriangleright \$ 0 . (2) On foundation managers. \blacktriangleright \$ 0 .			(
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
٠	managers. > \$ 0.				,
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
	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
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	•	4a		X
þ	o If "Yes," has it filed a tax return on Form 990-T for this year?	/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If "Yes," attach the statement required by General Instruction T.		-	, -	*
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			- t	,
	By language in the governing instrument, or		٠	-	٠,
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			-	
	remain in the governing instrument?		6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?		7	X	
_	If "Yes," complete Part II, col. (c), and Part XV.		. '		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				-
	MA			-	, ,
D	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 SEE STATEMENT	7	8b		<u> X</u>
ä	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar		<u> </u>		- 4
10	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV	• • • • •	9	X	
<u> 10</u>	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10	X	

4a

N/A

N/A

Yes X No

2b

statement - see instructions.)

during the year? ...

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

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

b If "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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

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

Form 4720, to determine if the foundation had excess business holdings in 2010.)

had not been removed from jeopardy before the first day of the tax year beginning in 2010?

NORTH EAST ROOFING EDUCATIONAL Form 990-PF (2010) FOUNDATION. INC 04-3466803 Page 6 Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to: '(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes X No (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly. Yes X No any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? ... Yes X No (4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? Yes X No (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? .N/A 5b Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? N/A Yes If "Yes," attach the statement required by Regulations section 53.4945-5(d) 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes X No b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b Х If "Yes" to 6b, file Form 8870. Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? 7b Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation. (b) Title, and average hours per week devoted to position (d) Contributions to employee benefit plans and deferred compensation (c) Compensation (e) Expense account, other allowances

SEE STATEMENT 10		0.	0.	0.
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."		*
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
				·
		ı		

(a) Name and address

(If not paid.

enter -0-)

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

NORTH EAST ROOFING EDUCATIONAL FOUNDATION, INC.	04-3	466803 P	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)			_
3 Five highest-paid independent contractors for professional services. If none, enter "NO	NE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compen	sation
NONE			
Total number of others receiving over \$50,000 for professional services		•	0
Part IX-A Summary of Direct Charitable Activities		<u>. </u>	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in number of organizations and other beneficiaries served, conferences convened, research papers produced,	etc.	Expenses	
1 THE FOUNDATION WAS ORGANIZED TO PROVIDE FINANCI			
TO STUDENTS SEEKING POST-SECONDARY EDUCATION IN	COLLEGE OR	20 0	
VOCATIONAL PROGRAMS.		30,0	00.
2			
3			
4			
Part IX-B Summary of Program-Related Investments			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1	and 2.	Amount	
1N/A			
<u> </u>			
All other program-related investments. See instructions.			

>

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, se	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	. 0.
	Average of monthly cash balances	1b	550,278.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	550,278.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.	,	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	550,278.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	8,254.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	542,024.
6	Minimum investment return. Enter 5% of line 5	6	27,101.
P	art XI Distributable Amount (see instructions) (Section 4942(i)(3) and (i)(5) private operating foundations are foreign organizations check here x and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2010 from Part VI, line 5		
b	Income tax for 2010. (This does not include the tax from Part VI.)	1.	
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
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	
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	30,000.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	25,907.
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	<u>55,907.</u>
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	55,907.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies for th	ne section

N/A							
	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010			
1 Distributable amount for 2010 from Part XI,							
line 7	, -						
2 Undistributed income, if any, as of the end of 2010	2.5	, , ,		* * 1,			
a Enter amount for 2009 only	,	- "		`			
b Total for prior years;	-						
3 Excess distributions carryover, if any, to 2010:	, ,	1 1 1	7 t , 1	, ,			
a From 2005		_	i i				
b From 2006]	1					
c From 2007		-					
d From 2008	╛.	,		1			
e From 2009							
f Total of lines 3a through e				, , ,			
4 Qualifying distributions for 2010 from	•	'	, ,	, , , , , ,			
Part XII, line 4: ► \$	_	-		'			
a Applied to 2009, but not more than line 2a	-r (
b Applied to undistributed income of prior	`			,			
years (Election required - see instructions)	1		1 '	4 £			
c Treated as distributions out of corpus		† · ·	, ,	12 6			
(Election required - see instructions)	_						
d Applied to 2010 distributable amount	,	, i	,				
e Remaining amount distributed out of corpus							
Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a).)			_	,			
Enter the net total of each column as indicated below:		,	1	,			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5		-	- '	F.,			
b Prior years' undistributed income. Subtract				, ,			
line 4b from line 2b	,		,	, ,			
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed							
d Subtract line 6c from line 6b. Taxable			- 1				
amount - see instructions	'		<u></u>				
e Undistributed income for 2009. Subtract line	* *	- 1		, ,			
4a from line 2a. Taxable amount - see instr.		,					
f Undistributed income for 2010. Subtract		,					
lines 4d and 5 from line 1. This amount must	· = = =	- ",	rs 3				
be distributed in 2011		, , , , , , , , , , , , , , , , , , , ,	, , ,				
Amounts treated as distributions out of							
corpus to satisfy requirements imposed by		-		- - k			
section 170(b)(1)(F) or 4942(g)(3)							
Excess distributions carryover from 2005			* * * * * * * * * * * * * * * * * * * *	, '			
not applied on line 5 or line 7			-				
Excess distributions carryover to 2011.							
Subtract lines 7 and 8 from line 6a		1		1			
Analysis of line 9:	\$ 1			, , , , , , , , , , , , , , , , , , ,			
a Excess from 2006 b Excess from 2007							
c Excess from 2008				1 mg 1 mg 1 mg 2 mg 2 mg 2 mg 2 mg 2 mg			
d Excess from 2009	1, 5,		, <u> </u>				
e Excess from 2010		***	* .				

Page 10

Part XIV Private Operating Fo	oundations (see inst	ructions and Part VII-A	A, question 9)		
1 a. If the foundation has received a ruling or					
foundation, and the ruling is effective for			▶ ∟		
b Check box to indicate whether the found	ation is a private operating	foundation described in		942(j)(3) or 3	42(1)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for					
each year listed	14,202.	11,822.	22,700.	3,407.	52,131.
b 85% of line 2a	12,072.	10,049.	19,295.	2,896.	44,311.
c Qualifying distributions from Part XII,					
line 4 for each year listed	55,907.	81,178.	74,117.	72,623.	283,825.
d Amounts included in line 2c not	,				
used directly for active conduct of					•
exempt activities	0.	0.	0.	0.	0.
e Qualifying distributions made directly		1			
for active conduct of exempt activities.	55 005	01 170	74 117	70 (00	202 025
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon:	55,907.	81,178.	74,117.	72,623.	283,825.
a "Assets" alternative test - enter:					
(1) Value of all assets	576,734.	515,915.	503,095.	468,668.	2,064,412.
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)	548,126.	465,492.	486,445.	421,801.	1,921,864.
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					0.
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					0.
(2) Support from general public and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(III)					0.
(3) Largest amount of support from		1			_
an exempt organization					0.
(4) Gross investment income Part XV Supplementary Info		i deis mark amb i	i the foundation b	ad &E 000 as ma	0.
at any time during the			the foundation r	iad \$5,000 or mo	ore in assets
		130 00 00 13.)			
1 Information Regarding Foundation	•	on 00/ of the total control	hutiana rasawad bu tha fa	undation before the elec	no of any toy
a List any managers of the foundation who year (but only if they have contributed m			battons received by the to	ungagon before the clos	se of any tax
NONE				****	
 List any managers of the foundation who other entity) of which the foundation has 			or an equally large portion	of the ownership of a pa	artnership or
NONE					
	nly makes contributions to	preselected charitable of	rganizations and does not		
the foundation makes gifts, grants, etc. (·		 	iplete items 2a, b, c, and	ſ d.
a The name, address, and telephone numb	per of the person to whom	applications should be a	ddressed:		
SEE STATEMENT 11					
b The form in which applications should be	e submitted and information	on and materials they sho	ould include:		
c Any submission deadlines:					
			and after the contract of the		
d Any restrictions or limitations on awards	, such as by geographical	areas, charnable fields, k	inas of institutions, or oth	ier tactors:	

FOUNDATION, INC.

Part XV Supplementary Information (continued)

04-3466803 Page 11

3 · Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Purpose of grant or contribution Foundation Amount status of recipient Name and address (home or business) a Paid during the year SEE STATEMENT 12 30,000. Total ➤ 3a b Approved for future payment SCHOLARSHIPS (13 N/A 32,500. COLLEGE GRANT RECIPIENTS @ \$2,500) -PAID 8/12/11 32,500. Total

FOUNDATION, INC.

Part XVI-A	Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income	Exclu	ided by section 512, 513, or 514	(e)
-	(a)	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion	Amount	function income
a GOLF TOURNAMENTS	900099		1		36,491.
			 		30, 431.
			 		
c			 		
d	1 1		-		
e			-	· · · · · · · · · · · · · · · · · · ·	
· · · · · · · · · · · · · · · · · · ·			ļ		
g Fees and contracts from government agencies			ļ		
2 Membership dues and assessments					
3 Interest on savings and temporary cash			1		
investments					7,910.
4 Dividends and interest from securities			<u> </u>		
5 Net rental income or (loss) from real estate:			<u></u>		
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property				:	
7 Other investment income			 		
8 Gain or (loss) from sales of assets other	•		_		
than inventory					
	-		1		
9 Net income or (loss) from special events			├──		
10 Gross profit or (loss) from sales of inventory		·	 		
11 Other revenue:			l		
a					
b			ļ		
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		0.	44,401.
13 Total. Add line 12, columns (b), (d), and (e)				13	44,401.
(See worksheet in line 13 instructions to verify calcul	ations.)				 :
Part XVI-B Relationship of Activ		mplichment of Ex	/omn	t Durnosos	
Helationship of Acti	Airies to file voc	mphannent of Ex	Cemp	it rui poses	
Line No. Explain below how each activity for w	/hich income is reported i	n column (e) of Part XVI-A	contri	buted importantly to the accor	nplishment of
the foundation's exempt purposes (o				,	•
13 THE FOUNDATION'S P	RIMARY SOUR	CE OF REVENU	E I	S DERIVED FRO	M TWO ANNUAL
13 GOLF TOURNAMENTS A	ND RAFFLES.	(ONLY ONE W	IAS	HELD IN 2010-	2011)
20 20 20 20 20 20 20 20 20 20 20 20 20 2	10 1011 1111	(02122 0112 11		IIDDD III DOIO	2011/
			_		-
					
		-			
	 				
			<u>,-</u>		
					· · · · · · · · · · · · · · · · · · ·
					
	 				
					
				<u></u>	

Form 990-PF (2010) FOUND	ATION, INC.	EDUCALI	ORALI		0	4-3466	803	Pa	ge 13
Part XVII		egarding Transfers To	and Trans	actions a	nd Relati					
	Exempt Organ	izations								
1 Did the o	rganization directly or indi	rectly engage in any of the follow	wing with any ot	ner organizatioi	n described ii	n section 501(c) of		'	Yes	No
)(3) organizations) or in section	_	political organi	zations?				, .	, ,
a Transfers	from the reporting found	ation to a noncharitable exempt	organization of:						= ,	* '
(1) Cast	• • • • •							1a(1)		X_
(2) Othe	r assets							1a(2)		_X_
b Other tra	nsactions:							, ,	'. ;	2. *
	s of assets to a noncharita							1b(1)		_X_
(2) Purd	hases of assets from a no	ncharitable exempt organization	ı				•	1b(2)		<u>x</u> _
(3) Rent	al of facilities, equipment,	or other assets .		•				1b(3)		X
(4) Rein	nbursement arrangements							1b(4)		<u>X</u> _
(5) Loar	ns or loan guarantees .							1b(5)		<u>X</u> _
(6) Perfe	ormance of services or me	mbership or fundraising solicita	ations					1b(6)		<u>X</u> _
		iling lists, other assets, or paid						1c	_X	
		"Yes," complete the following so							ets,	
		oundation. If the foundation rec		aır market value	e in any trans	action or sharing arra	angement, sh	ow in		
		other assets, or services receive			, 					
(a) Line no	(b) Amount involved	(c) Name of noncharita				cription of transfers, trans	sactions, and st	naring an	rangeme	ints
		N.E. ROOFING C		ORS	SEE	<u>STATEMENT</u>	<u> 13</u>			
<u>C</u>	<u>5,000.</u>	ASSOCIATION (N	IERCA)	··· , .	<u> </u>					
					<u> </u>					
									_	
					<u> </u>					
		<u></u>			<u></u>					
ın se ct ıor		tly affiliated with, or related to, o r than section 501(c)(3)) or in s edule.		exempt organiz	ations descri	bed 	. 🗓	Yes		□No
	(a) Name of org		(b) Type of	organization		(c) Description	of relationsh	ıp		
N.E ROO	FING CONTRA	CTORS		PROFIT	SEE S	TATEMENT	14			
ASSOCIA										
						· · · · · · · · · · · · · · · · · · ·				
		e that I have examined this return, incident (they than taxpayer or fiduciary) is the state of t								et,
	Print/Type preparer's na		s signature		Date	Check	ıf PTIN			
				Ì	. ===	self- employe				
Paid	ROBERT M.	MIICHA	5 /- 1	m	02/14/	l .				
Preparer	Firm's name ► ROB		CPA, PC	, ,	<u>, </u>	Firm's EIN	<u></u>		<u> </u>	
Use Only	I I I I I I I I I I I I I I I I I I I	LICE M. MOCHA,	CLA, FC			I II II S EIN				
222 2 y	Firm's address > 50	EMERALD ST.,	P.O. BO	X 7Δ1						
		ENE, NH 03431	DO	'		Phone no.	603-3	157_	766	5
	, KE	MATERIAL COLOR				i none no.		m 990		

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

2010

Employer identification number

	ORTH EAST ROOFING EDUCATIONAL	04 2466002						
Organization type (check of	OUNDATION, INC.	04-3466803						
o. gaaon typo (ooon o	,	,						
Filers of:	Filers of: Section:							
Form 990 or 990-EZ	501(c)() (enter number) organization							
	4947(a)(1) nonexempt charitable trust not treated as a private foundation							
	527 political organization							
Form 990-PF	X 501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt chantable trust treated as a private foundation							
	501(c)(3) taxable private foundation							
Note. Only a section 501(c) General Rule	(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ile See instructions.						
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in m	noney or property) from any one						
contributor. Comp								
Special Rules								
For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II								
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.								
contributions for u If this box is check purpose Do not co	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributions did not agreed, enter here the total contributions that were received during the year for an exclusive complete any of the parts unless the General Rule applies to this organization because it, etc., contributions of \$5,000 or more during the year.	ggregate to more than \$1,000. ely religious, chantable, etc.,						
	nat is not covered by the General Rule and/or the Special Rules does not file Schedule I Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line :							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

NORTH EAST ROOFING EDUCATIONAL FOUNDATION, INC.

04-3466803

Part I	Contributors	(see instructions)

raiti	Contributors (see instructions)		· · · · · · · · · · · · · · · · · · ·
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	EASTERN ARCHITECTURAL REPS 130 NEW BOSTON ST., SUITE 101 WOBURN, MA 01801	\$5,000. \$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	FIRESTONE BUILDING PRODUCTS 525 CONGRESSIONAL BOULEVARD CARMEL, IN 460325607	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	NORTHEAST ROOFING CONTRACTORS ASS. 100 GROSSMAN DRIVE, SUITE 300 BRAINTREE, MA 02184	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4	THOMAS MCKIE 407R MYSTIC AVE, SUITE 36B MEDFORD, MA 02155	\$27,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution Person
		\$	Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	-10	\$	Person Payroll Noncash (Complete Part II if there Is a noncash contribution.)

Page

of Part II

Name of organization

NORTH EAST ROOFING EDUCATIONAL FOUNDATION, INC.

04-3466803

Employer identification number

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date recei v ed
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date recei v ed
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date recei v ed
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	<u>.</u>	\$	

of Part III

Name of organization Employer identification number NORTH EAST ROOFING EDUCATIONAL FOUNDATION, INC. 04-3466803 Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) or ganizations aggregating Part III more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, chantable, etc., contributions of \$1,000 or less for the year (Enter this information once. See instructions) > \$ (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (c) Use of gift (d) Description of how gift is held (b) Purpose of gift Part (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4

FORM 990-PF INTEREST ON SAVI	NGS AND TE	MPORARY CASH	INVESTMENTS	STATEMENT	1
SOURCE				AMOUNT	
MT. WASHINGTON COOP BANK			_	7,910	
TOTAL TO FORM 990-PF, PART I,	LINE 3, C	OLUMN A	=	7,910	 - -
FORM 990-PF	OTHER	INCOME		STATEMENT	2
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	c
GOLF TOURNAMENTS	_	36,491.	0.	36,491	
TOTAL TO FORM 990-PF, PART I,	LINE 11 =	36,491.	0.	36,491	
FORM 990-PF	ACCOUNT	ING FEES		STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABI PURPOSES	
REVIEW AND TAX PREPARATION	2,750	. 0	. (). 0) .
TO FORM 990-PF, PG 1, LN 16B	2,750	0	. (0.) .
FORM 990-PF	ТА	XES		STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
FEDERAL EXCISE TAX	183	. 0). ().

FORM 990-PF	OTHER E	XPENSES	STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
MISCELLANEOUS EXPENSES	24.	0.	0.	0.	
OFFICE EXPENSE GOLF TOURNAMENT DIRECT	632.	0.	316.	0.	
EXPENSES POSTAGE & BOOKKEEPING	26,073.	0.	21,797.	0.	
SERVICES	176.	0.	176.	0.	
TO FORM 990-PF, PG 1, LN 23	26,905.	0.	22,289.	0.	
FORM 990-PF			SI	CATEMENT 6	

Λ

FORM 990-PF EXPLANATION CONCERNING PART VII-A, LINE 8B STATEMENT

7

EXPLANATION

THE FOUNDATION IS NOT A PUBLIC CHARITY AND DOES NOT SOLICIT FUNDS FROM THE PUBLIC OUTSIDE OF ITS MEMBERSHIP. THE FOUNDATION IS NOT REQUIRED TO FILE A COPY OF FORM 990-PF WITH THE STATE ATTORNEY GENERAL.

FORM 990-PF

STATEMENT

8

SCARBOROUGH, ME 04074

FORM 990-PF			STATE	EMENT S
1				
	- LIST OF OFFICERS, D ES AND FOUNDATION MANA		STATI	EMENT 1
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
THOMAS GUNNING 58 SUMMER STREET NORWELL, MA 02061	EXECUTIVE DIRE 5.00	CTOR 0.	0.	0
ANGELO GENTILE, JR. LO WINDSOR LANE MARSHFIELD, MA 02050	TREASURER 2.00	0.	0.	0
MICHAEL MEYER 7 FIELD PLACE CORTLAND MANOR, NY 10566	TRUSTEE 2.00	0.	0.	0
DAVID CAZEAULT 21 ELM HILL LANE DUXBURY, MA 02332	CHAIRMAN 2.00	0.	0.	0
PAUL CAPPELLO 333 MAIN STREET BOXFORD, MA 01921	TRUSTEE 2.00	0.	0.	0
RICHARD JENKINS 55 BOGLE STREET VESTON, MA 02493	TRUSTEE 2.00	0.	0.	0
VAMES MACKIMM .0 WASHINGTON ROAD VINDHAM, NH 03087	TRUSTEE 2.00	0.	0.	0
STEPHEN MCBRADY L9 WYNMOUR DRIVE	TRUSTEE 2.00	0.	0.	0

• NORTH EAST ROOFING EDUCATION	NAL FOUNDATIO		04-34	4 66803
ROBERT W. THERRIEN, JR. 21 MEADOW ROAD EAST SWANZEY, NH 03446	TRUSTEE 2.00	0.	0.	0.
JAMES MCADAM 49 DAMASCUS RD. BRANFORD, CT 06405	VICE-CHAIRMAN 2.00	0.	0.	0.
PATRICIA A. SWEENEY 57 EMERSON RD. WINTHROP, MA 02152	CLERK 3.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	GE 6, PART VIII	0.	0.	0.

.

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION STATEMENT 11 PART XV, LINES 2A THROUGH 2D

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

PATRICIA SWEENEY 100 GROSSMAN DRIVE, SUITE 300 BRAINTREE, MA 02184

TELEPHONE NUMBER

781-849-0555

FORM AND CONTENT OF APPLICATIONS

INCLUDES TRANSCRIPT OF GRADES, WORK EXPERIENCE, AWARDS, AND OTHER ACTIVITIES.

ANY SUBMISSION DEADLINES

MAY 1

RESTRICTIONS AND LIMITATIONS ON AWARDS

RECIPIENT MUST BE AN ASSOCIATE OR FAMILY MEMBER OF A NERCA MEMBER.

FORM 990-PF

STATEMENT 12

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
JOHN BROOKS 65 LYMAN DRIVE WILLISTON, VT 05495	COLLEGE GRANT	N/A	2,500.
ELIZABETH MAGUIRE 19 NORTH BROOK ROAD LARCHMONT, NY 10538	COLLEGE GRANT	N/A	2,500.
HILLARY DUNN 430 EAST COTTON MILL ROAD NEW HARTFORD, CT 06057	COLLEGE GRANT	N/A	2,500.
EMMA MARTONE 10 CENTER STREET GLEN COVE, NY 11542	COLLEGE GRANT	N/A	2,500.
MICHAEL EVERETT 4 OLDWOOD ROAD WILBRAHAM, MA 01095	COLLEGE GRANT	N/A	2,500.
NICHOLAS BEAN 208 THOMAS STREET MIDDLEBORO, MA 02346	COLLEGE GRANT	N/A	2,500.
ETHAN MCBRIEN 157 GERRY ROAD DUBLIN, NH 03444	COLLEGE GRANT	N/A	2,500.
LAURA WOODBRIDGE 15 ALYSSUM DRIVE AMHERST, MA 01002	COLLEGE GRANT	N/A	2,500.

GRANTS AND CONTRIBUTIONS
PAID DURING THE YEAR

'' WORTH EAST ROOFING EDUCATIONAL FOUNDATIO		04-3466803
JACLYN FERRIE 164 DEVON ROAD COLONIA, NJ COLLEGE GRANT 07067	N/A	2,500.
ZACHARY LITIF 18 BUSQUE BLVD STANDISH, ME COLLEGE GRANT 04084	N/A	2,500.
BRADY JACQUES 19 DEACON ROAD YARMOUTH, ME COLLEGE GRANT 04096	N/A	2,500.
STEFFANIE MEYER 153 VADNAIS STREET CHICOPEE, MA COLLEGE GRANT 01020	N/A	2,500.
TOTAL TO FORM 990-PF, PART XV, LINE 3A	-	30,000.

990-PF INVOLVEMENT WITH NONCHARITABLE ORGANIZATIONS STATEMENT 13 PART XVII, LINE 1, COLUMN (D)

NAME OF NONCHARITABLE EXEMPT ORGANIZATION

N.E. ROOFING CONTRACTORS ASSOCIATION (NERCA)

DESCRIPTION OF TRANSFERS, TRANSACTIONS, AND SHARING ARRANGEMENTS

THE FOUNDATION WAS PROVIDED OFFICE SPACE AND RECEIVED BOOKKEEPING AND OTHER SERVICES.

990-PF AFFILIATION WITH TAX-EXEMPT ORGANIZATIONS
PART XVII, LINE 2, COLUMN (C)

STATEMENT 14

NAME OF AFFILIATED OR RELATED ORGANIZATION

N.E ROOFING CONTRACTORS

DESCRIPTION OF RELATIONSHIP WITH AFFILIATED OR RELATED ORGANIZATION

NEREF SCHOLARSHIPS ARE AVAILABLE TO FAMILIES OF NERCA MEMBERS' EMPLOYEES.

Form 8868.(Rev. 1-2011)	Page 2
• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box	ightharpoons
Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.	
If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).	
Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).	
Type or Name of exempt organization Employer identifica	tion number
NORTH EAST ROOFING EDUCATIONAL	_
FOUNDATION, INC. 04-346680	
extended Number, street, and room or suite no. If a P.O. box, see instructions.	
filing your 100 GROSSMAN DRIVE, NO. 500	
return See City, town or post office, state, and ZIP code For a foreign address, see instructions	
BRAINTREE, MA 02184	
Enter the Return code for the return that this application is for (file a separate application for each return)	. [0 4]
Application D.A. P. W.	1
Application Return Application Is For Code Is For	Return
Is For Code Is For Form 990 01	Code
Form 990-BL 02 Form 1041-A	08
Form 990-EZ 01 Form 4720	09
Form 990-PF 04 Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069	11
Form 990-T (trust other than above) 06 Form 8870	12
STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.	
ANGELO GENTILE	
• The books are in the care of ▶ 100 GROSSMAN DRIVE, #300 - BRAINTREE, MA 02184	
Telephone No. ► 781-849-0555 FAX No ► 781-849-3223	
If the organization does not have an office or place of business in the United States, check this box	
• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group	up, check this
box 🕨 . If it is for part of the group, check this box 🕨 . and attach a list with the names and EINs of all members the extension	
4 request an additional 3-month extension of time until MAY 15, 2012	
5 For calendar year, or other tax year beginning <u>JUL 1, 2010</u> , and ending <u>JUN 30, 201</u>	.1
6 If the tax year entered in line 5 is for less than 12 months, check reason Initial return Final return	
Change in accounting period	
7 State in detail why you need the extension	
THE FOUNDATION REQUIRES ADDITIONAL TIME FOR THE BOARD TO REVIEW A	
APPROVE FORM 990 TO ENABLE IT TO FILE A COMPLETE AND ACCURATE RET	URN.
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	
nonrefundable credits See instructions 8a \$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated	
tax payments made Include any prior year overpayment allowed as a credit and any amount paid	•
previously with Form 8868.	0.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using	0
EFTPS (Electronic Federal Tax Payment System) See instructions. 8c \$ Signature and Verification	0.
	and halist
Under penalties of peruan, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge a it is true, correct, and complete, and that I am authorized to prepare this form.	ino De llei,
Signature Thomas Sheem Title EXECUTIVE DIRECTOR Date > 2-2	4-12
	8 (Rev. 1-2011)