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Department of the Treasury

Internal Revenue Service

DLN: 93491289004252

OMB No 1545-0052

2011

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

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

For	cale	ndar year 2011, or	tax yea	ar beginning 01-	01-2011 , and	d end	ding 12-31-	2011	
G C1	neck a	• • • • • • • • • • • • • • • • • • • •	al return nded retur	_	of a former public ch			turn	
TH	E DUNK	undation (IN' DONUTS & BASKIN-ROBBIN ITY FOUNDATION INC						entification numb	er
		I street (or P O box number if LL STREET	mail is not o	delivered to street address	s) Room/suite		(781) 737-382	ımber (see page 10 d	of the instructions)
		n, state, and ZIP code A 02021			1		· '	application is pendin	· .
		ype of organization 🤽 s 14947(a)(1) nonexempt (n		rganızatıons meetıng e and attach comput	
of line	year <i>(1</i> e 16) F	ket value of all assets at from Part II, col. (c), \$ 2,440,623	(F	Accounting method Other (specify) Part I, column (d) mus	_	rual	under section F If the found	undation status was in 507(b)(1)(A), checation is in a 60-mont in 507(b)(1)(B), chec	ck here • • • • • • • • • • • • • • • • • •
Pa	rt I	Analysis of Reve total of amounts in column necessarily equal the amou the instructions))	is (b), (c), a	and (d) may not	(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, e	tc , received	l (attach schedule)	1,719,552				
	2	Check F r if the foundation	n is not req	uıred to attach Sch B					
	3	Interest on savings and	temporar	y cash investments	5,132		5,132		
	4	Dividends and interest f	rom secui	rities					
Reveilue	5a	Gross rents							
	b	Net rental income or (lo							
	6a	Net gain or (loss) from s	sale of ass	sets not on line 10					
	b	Gross sales price for all assets							
ğ	7	Capital gain net income					0		
	8	Net short-term capital g							
	9	Income modifications .							
	10a	Gross sales less returns and a Less Cost of goods sole							
	b	Gross profit or (loss) (at							
	11	Other income (attach so							
	12	Total. Add lines 1 through			1,724,684		5,132		
	13	Compensation of officers			0		0		0
	14	O ther employee salaries	•						
φ	15	Pension plans, employe							
e E	16a	Legal fees (attach sche					0		26,965
Expense	Ь	Accounting fees (attach	•				0		18,690
	c	O ther professional fees					0		18,000
and Administrative	17	Interest							1
¥	18	Taxes (attach schedule) (see	page 14 of	the instructions)					
	19	Depreciation (attach sc		ŕ	46,484		0		
들	20	Occupancy							
4	21	Travel, conferences, and	d meeting:	s	17,250		0		17,250
	22	Printing and publications	s						
Ę	23	Other expenses (attach	schedule)	279,163		0		279,163
Operating	24	Total operating and adm	ninistrativ	e expenses.					
<u>ā</u>		Add lines 13 through 23	3		406,552		0		360,068
0	25	Contributions, gifts, gra	nts paıd.		773,321				707,652
	26	Total expenses and disbu	rsements. /	Add lines 24 and 25	1,179,873		0		1,067,720
	27	Subtract line 26 from lin							
	a	Excess of revenue over			544,811				
	b	Net investment income					5,132		
	С	Adjusted net income (If	negative,	enter-0-)					

Pa	rt II	Balance Sheets should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	 ` '	· ` ´	
	2	Savings and temporary cash investments			
	3	Accounts receivable ► 42,660			
		Less allowance for doubtful accounts	148,274	42,66	0 42,660
	4	Pledges receivable 178,333			
	-	Less allowance for doubtful accounts 🕨	36,667	178,33	3 178,333
	5	Grants receivable	·	·	· ·
	6	Receivables due from officers, directors, trustees, and other			+
		disqualified persons (attach schedule) (see page 15 of the			
		instructions)			
	7	Other notes and loans receivable (attach schedule)			
	′	——————————————————————————————————————			
ys.		Less allowance for doubtful accounts 🕨			
sets	8	Inventories for sale or use			
Яδ	9	Prepaid expenses and deferred charges	8,269	2,07	1 2,071
	10a	$Investments-U\ S\ and\ state\ government\ obligations\ (attach\ schedule)$			
	b	Investments—corporate stock (attach schedule)			
	C	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis 🕨			
		Less accumulated depreciation (attach schedule)			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis 🕨 232,423			
		Less accumulated depreciation (attach schedule) • 92,968	185,939	139,45	5 139,455
	15	Other assets (describe			
	16	Total assets (to be completed by all filers—see the			
		instructions Also, see page 1, item I)	1,689,980	2,440,62	3 2,440,623
	17	Accounts payable and accrued expenses	52,912	93,65	9
	18	Grants payable	32,500	116,59	8
'n	19	Deferred revenue		15,31	9
Itles	20	Loans from officers, directors, trustees, and other disqualified persons			1
	21	Mortgages and other notes payable (attach schedule)			1
Liabi	22	Other liabilities (describe	95 0	95. 65,66	8
					1
	23	Total liabilities (add lines 17 through 22)	85,412	291,24	4
		Foundations that follow SFAS 117, check here 🕨 🔽			
		and complete lines 24 through 26 and lines 30 and 31.			
or Fund Balances	24	Unrestricted	1,518,227	1,971,04	7
and	25	Temporarily restricted	86,341	178,33	2
39	26	Permanently restricted			7
딛		Foundations that do not follow SFAS 117, check here 🕨 🦵			7
'n		and complete lines 27 through 31.			
ΥF	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
Assets	29	Retained earnings, accumulated income, endowment, or other funds			1
As	30	Total net assets or fund balances (see page 17 of the			1
Net		instructions)	1,604,568	2,149,37	9
Z	31	Total liabilities and net assets/fund balances (see page 17 of	, ,	, ,	1
	-	the instructions)	1,689,980	2,440,62	3
			2,003,300	2,,.2	
Pa	rt II	Analysis of Changes in Net Assets or Fund Balances			
1		Total net assets or fund balances at beginning of year—Part II, column	ı (a), line 30 (must a	gree	
		with end-of-year figure reported on prior year's return)		- I I	1,604,568
2		Enter amount from Part I, line 27a			544,811
3		Other increases not included in line 2 (itemize)		3	0
4		Add lines 1, 2, and 3		4	2,149,379
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)—		2,149,379	

Form 990-PF (2011)					Page 3
	s and Losses for Tax on Inve			T	
	be the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs M		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a					
(e) Gross sales price	(f) Depreciation allowe	, ,,,	t or other basis		or (loss)
	(or allowable)	plus ex	pense of sale	(e) plus (f) mınus (g)
a					
b					
С					
d					
е					
Complete only for asset	s showing gain in column (h) and owne				(h) gaın mınus
(i) F M V as of 12/31/6	(j) Adjusted basis		cess of col (ı)		less than -0-) or om col (h))
	as of 12/31/69	overd	col (j), ıf any	Losses (II	oni coi (ii))
a					
b					
C					
d					
e					
2 Capital gain net ind	come or (net capital loss)	If gain, also enter If (loss), enter -0-			
2 Capital gain net int	tollie of (liet capital loss)	11 (1055), efficer -0	- III Paic I, IIIIe /	2	
3 Net short-term cap	oital gain or (loss) as defined in sectio	ns 1222(5) and (6)		
If gaın, also enter ı	n Part I, line 8, column (c) (see pages	13 and 17 of the i	nstructions)	1	
If (loss), enter -0-	ın Part I, line 8			Í з	
Part V Qualification	Under Section 4940(e) for R	educed Tax on	Net Investme	nt Income	
(For optional use by domesti	c private foundations subject to the se	ection 4940(a) tax	on net investment	income)	
				,	
If section 4940(d)(2) applies	s, leave this part blank				
	the section 4942 tax on the distribute			eriod?	┌ Yes 🔽 No
If "Yes," the foundation does	not qualify under section 4940(e) Do	not complete this	part		
1 Enter the appropriate ar	nount in each column for each year, so	ee page 18 of the 11	nstructions before	makıng any entrıes	
(a)	(b)	(c)		(d)	
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncha		Distributio (col (b) divided	
2010	823,579		1,154,182	(cor (b) divided	0 713561
2009	918,211		1,021,860		0 898568
2008	1,553,484		1,181,069		1 315320
2007	82,200		884,212		0 092964
2006					
2 Total of line 1, colu	umn (d)			2	3 020413
	on ratio for the 5-year base period—div		—		3 0 2 0 4 1 3
-	s the foundation has been in existence			3	0 755103
,		,			
4 Enter the net value	of noncharitable-use assets for 2011	L from Part X, line 5	5	4	1,609,648
5 Multiply line 4 by li	ine 3			5	1,215,450
			<u> </u>	-	1,213,130
6 Enter 1% of net inv	vestment income (1% of Part I, line 2	7b)		6	5 1
	,	,	· -		
7 Add lines 5 and 6.				7	1,215,501
			<u> </u>		· · ·
8 Enter qualifying dis	stributions from Part XII, line 4			8	1,067,720
	or greater than line 7, check the box	ın Part VI, lıne 1b,	and complete that	part using a 1% tax	rate See
the Part VI instruc	tions on page 18				

1a	Exempt operating foundations described in section 4940(d)(2), check here T and enter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check				103
	here ► 🕝 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, 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				103
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				103
6	Credits/Payments				
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a				
b	Exempt foreign organizations—tax withheld at source 6b				
C	Tax paid with application for extension of time to file (Form 8868) 6c 103				
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments Add lines 6a through 6d				103
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9				0
LO	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10				
11	Enter the amount of line 10 to be Credited to 2012 estimated tax Refunded 11				
Par	t VII-A Statements Regarding Activities				
La	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did			Yes	No
	It participate or intervene in any political campaign?		. 1a		No
Ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19	of	۱.,		
	the instructions for definition)?		. 1b		No
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials				
_	published or distributed by the foundation in connection with the activities. Did the foundation file Form 1120-DOL for this year?		1c		No
_	Did the foundation file Form 1120-POL for this year?		10		No
d	(1) On the foundation \blacktriangleright \$0 (2) On foundation managers \blacktriangleright \$0				
_	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers \blacktriangleright \$0				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		. 2		No
_	If "Yes," attach a detailed description of the activities.		-		-110
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	s			
_	of incorporation, or bylaws, or other similar instruments? <i>If</i> "Yes," attach a conformed copy of the changes .		. 3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		No
ь	If "Yes," has it filed a tax return on Form 990-T for this year?		4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		. 5		No
	If "Yes," attach the statement required by General Instruction T.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
	By language in the governing instrument, or				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions				
	that conflict with the state law remain in the governing instrument?		. 6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV		7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the				
	ınstructions) ▶ See Additional Data Table				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney				
	General (or designate) of each state as required by General Instruction G? If "No," attach explanation .		8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section $4942(j)(3)$				
	or 4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV on				
	page 27)? If "Yes," complete Part XIV		. 9	_	No
LO	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	l	10	Yes	l

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 page 20 of the instructions)				
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		No	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes		
	Website address ►WWW DUNKINBRANDS COM/FOUNDATION				
14	The books are in care of ►FOUNDATION MANAGEMENT ASSOCIATES Telephone no ►(781)	248-	5759		
	Located at ►7 WESTDALE ROAD CANTON MA ZIP+4 ►0202113				
15	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	• •		- ,	
	- · · · · · · · · · · · · · · · · · · ·		Yes	1	
16	At any time during calendar year 2011, 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		No	
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes", enter the name of the foreign country				
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1			
	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 V No				
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
	a disqualified person?				
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes ▼ No (5) Transfer any income or assets to a disqualified person (or make any of either available				
	for the benefit or use of a disqualified person)?				
	(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)				
ь	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations				
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b			
	Organizations relying on a current notice regarding disaster assistance check here				
С	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 2011?	1c		No	
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private				
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))				
а	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d				
	and 6e, Part XIII) for tax year(s) beginning before 2011?				
_	If "Yes," list the years > 20, 20, 20				
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)				
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	26			
_	to all years listed, answer "No" and attach statement—see page 20 of the instructions)	2b			
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20				
За	Did the foundation hold more than a 2% direct or indirect interest in any business				
Ja	enterprise at any time during the year?				
ь	If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation				
-	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved				
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)				
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine				
	ıf the foundation had excess business holdings in 2011.).	3b			
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No	
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its				
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4b		No	

Pa	rt VII-B	Statements Rega	rding Act	ivities for	· Wh	ich Form 4720	May	Be Required (cont	inue	<u>d)</u>	<u> </u>	uge e
		e year did the foundation						•				
	(1) Carry	on propaganda, or other	wise attemp	t to influenc	e leg	ıslatıon (section 49	45(e	:))?	√ No			
	(2) Influe	nce the outcome of any	specific pub	lıc election ((see	section 4955), or to	car	ry				
		rectly or indirectly, any							- No			
	(3) Provid	de a grant to an individua	al for travel,	study, or otl	hers	ımılar purposes?		┌ Yes ┡	√ No			
	(4) Provid	de a grant to an organiza	tion other th	an a charita	ble,	etc , organization de	scrib	ped				
	ın sec	tion 509(a)(1), (2), or (3	3), or section	n 4940(d)(2)? (s	ee page 22 of the in	struc	ctions) 🗆 Yes 🖟	√ No			
		de for any purpose other										
	educa	tional purposes, or for t	ne preventio	n of cruelty	to ch	ıldren or anımals?.			- No			
ь								exceptions described in				
								page 22 of the instruction		5b		
								.				
c		wer is "Yes" to question										
								 Y es	- No			
		ttach the statement requi					-	, , , , , , , , , , , , , , , , , , , ,				
6a		undation, during the yea										
			-		-			T Yes F	√ No			
ь								benefit contract?		6b		No
_		6b, file Form 8870.	i, pay piciiii	ams, ancec	, 0, ,	nuncetry, on a perso	Jilai	benefit contract.	•			
7a		·	as the found	lation a nart	v to s	nrohibited tay shel	tort	rancaction? \(Vac \)	Z No			
	, , , , , , , , , , , , , , , , , , , ,						7b					
								n Managers, Highly			love	
Pa		and Contractors	. Officers,	Director.	3, 11	ustees, i ound		ii Managers, mgmy	raid	Link	ioye	cs,
1			, foundation	n managers a	and t	heir compensation (see p	page 22 of the instruction	ns).			
				nd average		c) Compensation		(d) Contributions to	(e) F	ynens	e acc	ount
	(a) Nar	me and address		er week o position	(1	If not paid, enter		mployee benefit plans I deferred compensation			owanc	
	^ ddutional	 Data Table	devoted t	o position	\vdash	-0-)	anu	deletted compensation				
366	Additional	Data Fable										
					 		 					
					-		-					
2			employees	(other than	thos	e included on line 1-	-see	page 23 of the instruction	ons).			
	If none, e	nter "NONE."						(D C				
(a	Name and	address of each employ		le, and aver				(d) Contributions to employee benefit	(e) E	xpens	se acc	ount.
		nore than \$50,000	l noi	urs per week ted to positi		(c) Compensation	on	plans and deferred			owanc	
			uevo	ted to positi	011			compensation				
ИОИ	IE											
										_		
-												
Tota	I number of	fother employees paid o	<u> </u>)								0
					- •				1			J

Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct chantable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc Expenses	Form 990-PF (2011)		Page 7
3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enter "NONE". (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE Total number of others receiving over \$50,000 for professional services. Partix-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficiances convened, research papers produced, etc 1 FORTY GRANTS PROVIDED TO VARIOUS CHARITIES 7 73.32: 2 Partix-B Summary of Program-Related Investments (see page 23 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See page 24 of the instructions		ees, Foundation Managers, Hig	hly Paid Employees,
Total number of others receiving over \$50,000 for professional services. Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable extivities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries' served, conferences convened, research papers produced, etc 1FORTY GRANTS PROVIDED TO VARIOUS CHARITIES 773,32: 3 4 Part IX-B Summary of Program-Related Investments (see page 23 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount Amount	•	see page 23 of the instructions). If nor	ne, enter "NONE".
Total number of others receiving over \$50,000 for professional services	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct chantable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc 1 FORTY GRANTS PROVIDED TO VARIOUS CHARITIES 773,32: 2 3 4 Part IX-B Summary of Program-Related Investments (see page 23 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 All other program-related investments See page 24 of the instructions	NONE		
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc 1 FORTY GRANTS PROVIDED TO VARIOUS CHARITIES 773,32: 2 3 4 Part IX-B Summary of Program-Related Investments (see page 23 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See page 24 of the instructions			
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All other program-related investments See page 24 of the instructions			
All other program-related investments See page 24 of the instructions			
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3	All other program-related investments See page 24 of the instructions		
	3		

	see page 24 of the instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	A verage monthly fair market value of securities	1a	0
b	A verage of monthly cash balances	1b	1,632,089
C	Fair market value of all other assets (see page 24 of the instructions)	1c	2,071
d	Total (add lines 1a, b, and c)	1d	1,634,160
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	1,634,160
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25		
	of the instructions)	4	24,512
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,609,648
6	Minimum investment return. Enter 5% of line 5	6	80,482
Pai	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(
	foundations and certain foreign organizations check here 🕨 📗 and do not complete t		
1	Minimum investment return from Part X, line 6	1	80,482
2a	Tax on investment income for 2011 from Part VI, line 5		
b	Income tax for 2011 (This does not include the tax from Part VI) 2b		
С	Add lines 2a and 2b	2c	103
3	Distributable amount before adjustments Subtract line 2c from line 1	3	80,379
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	80,379
6	Deduction from distributable amount (see page 25 of the instructions)	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	80,379
Par	Qualifying Distributions (see page 25 of the instructions)		
1	A mounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	1,067,720
b	Program-related investments—total from Part IX-B	1b	0
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	A mounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	За	
Ь	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	1,067,720
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 page 26 of the instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,067,720
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the section 4940(e) reduction of tax in those years	ner the	

	ondistributed income (see page		 	(-)	(4)
		(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
4	Distributable amount for 2011 from Bart VI June 7	Сограз	rears prior to 2010	2010	80,379
	Distributable amount for 2011 from Part XI, line 7				00,373
	Undistributed income, if any, as of the end of 2011			0	
	Enter amount for 2010 only		0	-	
	Total for prior years 20		0		
	Excess distributions carryover, if any, to 2011				
	From 2006				
	From 2007	4			
	From 2008 1,475,023	3			
	From 2009				
	From 2010	4			
	Total of lines 3a through e	2,298,602	2		
4	Qualifying distributions for 2011 from Part				
	XII, line 4 🕨 \$ 1,067,720				
а	Applied to 2010, but not more than line 2a			0	
b	Applied to undistributed income of prior years				
	(Election required—see page 26 of the instructions)		0		
C	Treated as distributions out of corpus (Election	1.067.720			
	required—see page 26 of the instructions)	1,067,720) 		
	Applied to 2011 distributable amount				0
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2011	80,379	9		80,379
	(If an amount appears in column (d), the				
	same amount must be shown ın column (a).)				
6	Enter the net total of each column as				
	indicated below:	2 205 04:			
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	3,285,943	2		
b	Prior years' undistributed income Subtract		0		
_	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		0		
d	Subtract line 6c from line 6b Taxable		_		
	amount—see page 27 of the instructions		0		
е	Undistributed income for 2010 Subtract line				
	4a from line 2a Taxable amount—see page 27			0	
_	of the instructions			<u> </u>	
Т	Undistributed income for 2011 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 by				
	section 170(b)(1)(F) or 4942(g)(3) (see page 27				
	of the instructions)				
8	Excess distributions carryover from 2006 not				
	applied on line 5 or line 7 (see page 27 of the				
_	Instructions)		+		
9	Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	3,285,94	3		
10	Analysis of line 9	. ,			
	Excess from 2007				
	Excess from 2008 1,394,644	†			
	Excess from 2009	1			
	Excess from 2010 823,579	1			
	Excess from 2011	4			
-		1	1	I	I

Part XIV Private Operating Foundations (see page 27 of the instructions and Part VII-A, question 9) If the foundation, and the ruling is effective for 2011, enter the detect of the ruling. B Check box to indicate whether the organization is a private operating foundation described in section [4942(0)(3) or [4942(0)(5)] Enter the lesser of the diguisted net income from Part I or the immunity of the control		orm 990-PF (2011) Page 10						
b Clack but to indicate whether the regnuezion is a provision generating foundation described in section \$4942(j)(3) or \$1.4942(j)(5) or \$1.49				_		rt vii-A, questioi	19)	
28 Effect the lesser of the adjusted nets income from Part I or the minimum minimum with part I or the minimum		foundation, and the ruling is effective for 2011, enter the date of the ruling						
income from Part Lor the minimum investment return from Part Kin Greach year lated. 9 83% of fine 2a. 1 Qualifying distributions from Part XII, for each year lated. 9 Qualifying distributions from Part XII, for each year lated. 9 Qualifying distributions from Part XII, for each year lated with the part of the par	b	Check box to indicate whether the organiza	ation is a private o	perating foundation	described in secti	on 「 4942(j)(3) (or - 4942(j)(5)	
investment return from Part X for each year listed	2a	· · · · · · · · · · · · · · · · · · ·	Tax year		Prior 3 years		(e) Total	
year isted			(a) 2011	(b) 2010	(c) 2009	(d) 2008	(c) rocar	
c Qualifying distributions from Part XII, line 4 for each year listed		yearlisted						
time 4 for each year listed		l l						
d Amounts included in line 2x not used directly for active conduct of exemple activities	С	, ,						
to active conduct of exempt activities Qualifying distributions made directly for active conduct of exempt activities Subtract line 2 fem in 2 c Complete 3a, b, or c for the alternative test relied upon a "Assets" alternative test-enter (3) Value of all assets (2) Value of assets qualifying under section 942 (0)(3)(6)(1) b "Endowment" alternative test-enter 2/3 offiminium investment extend shown in provided in the control of the control of minimum investment extend shown in provided in the control of the control of minimum investment extend shown in provided in the control of the control of minimum investment extend shown in provided in the control of the control of minimum investment extend shown in provided in the control of the control of the control of minimum investment extend shown in provided in the control of	d	Amounts included in line 2c not used directly						
for active conduct of exempt activities Subtract line 2d from line 2c		for active conduct of exempt activities						
alternative test relied upon a "Assets" alternative test—enter (1) Value of all assets	е	for active conduct of exempt activities						
a "Assets" alternative test—enter (1) Value of all assets. (2) Value of all assets. (2) Value of assets qualifying under section 494 2(1)(3)(B(N)) b "Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. (- "Support" alternative test—enter (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalities). (2) Support from general public and 5 or more exempt organizations as provided in section 494(3)(3)(B)(III). (3) Largest amount of support from an exempt organization (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see page 27 of the instructions.) Information Regarding Foundation Menagers: a List any managers of the foundation who have contributed more than \$5,000) (See section \$07(d)(2)) b List any managers of the foundation who awn 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest 2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here F Tithe foundation only makes contributions to preselected chantable organizations and does not accept unsolicited requests for finds if the foundation makes gifts, grants, etc (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d a The name, address, and telephone number of the person to whom applications should be addressed CHRISTINE RILLEY CO THE DUNKIN' DONU 130 ROYALL STREET CARTON, MA 02021 (781) 273-2946 b The form in which applications should be submitted and information and materials they should include THE REQUEST FOR PAROPOSAL (REP) APPLICATION CAN BE FOUND AT WWW DUNKINBRANDS COM/FOUNDATION c Any submission deadlines AUQUST 3151 OF FACH YEAR d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kin	3	Complete 3a, b, or c for the						
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Part X, line 6 for each year listed c "Support" alternative test—enter (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section \$12(a)(5)), or royalties)	b							
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EMERGENCY RESPONSE ORGANIZATIONS AND CHARITIES THAT BENEFIT CHILDREN" MISSION - SUPPORT REGIONS WHERE WE LIVE AND WORK - HAVE NATIONAL PRESENCE, MEASURABLE GOALS AND A TRACK RECORD OF SUCCESS -								
LETTERS OF INQUIRY INCLUDING THE APPLICANTS'S HISTORY, GOALS, AND PROJECT OBJECTIVES MUST BE SUBMITTED		LETTERS OF INQUIRY INCLUDING THE	APPLICANTS'S H	HISTORY, GOALS,	AND PROJECT OF	BJECTIVES MUST E	BE SUBMITTED	
BY JUNE 30TH OF EACH YEAR SELECTED ORGANIZATIONS WILL BE CONTACTED TO SUBMIT A FULL PROPOSAL DUE IN DECEMBER			ED ORGANIZATI	ONS WILL BE CON	ITACTED TO SUBI	MIT A FULL PROPO	SAL DUE IN	

Form 990-PF (2011)				Page 11
Part XV Supplementary Inform				
3 Grants and Contributions Paid		proved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year See Additional Data Table	or substantial contributor	recipient		
Total				707,652
b Approved for future payment		T		707,032
SPECIAL OLYMPICS - RI 370 GEORGE WASHINGTON HIGHWAY		501(C)(3)	OPERATING SUPPORT	37,431
SMITHFIELD,RI 02917				
SPECIAL OLYMPICS - MA 512 FOREST STREET MARLBOROUGH, MA 01752		501(C)(3)	OPERATING SUPPORT	28,238
Total				65,669

Form 990-F	PF (2011) -A Analysis of Income-Produc	ina Activitia	<u> </u>			Page 1 2
	amounts unless otherwise indicated		usiness income	Excluded by section	n 512, 513, or 514	(e)
_	n service revenue	(a) Business code	(b)	(c) Exclusion code	(d) A mount	Related or exemp function income (See page 28 of the instructions)
b						the matractions
d e						
2 Member 3 Interest of	and contracts from government agencies rship dues and assessments on savings and temporary cash investments ids and interest from securities			14	5,132	
5 Net ren a Debt-	tal income or (loss) from real estate financed property					
7 Other II 8 Gain or (al income or (loss) from personal property nvestment income loss) from sales of assets other than inventory ome or (loss) from special events					
10 Gross p 11 Other re	orofit or (loss) from sales of inventory evenue a					
d e	al Add columns (b), (d), and (e).		C		5,132	
(See w	odd line 12, columns (b), (d), and (e). orksheet in line 13 instructions on page 2 Relationship of Activities to	28 to verify calc o the Accom	ulations) plishment of E	Exempt Purpos	es	5,132
Line No. ▼	Explain below how each activity for wh the accomplishment of the organizatio page 28 of the instructions)					

Define dependence describe a seasonally engage in any of the following with any other organizations? Ves No	Part	XVII	Information Re Noncharitable			ansa	ctions and R	elationships With			
a Transfers from the reporting foundation to a noncharitable exempt organization of (3) Cash. La(3) No (2) Other assets. La(2) No Other transactions (3) Sales of assets to a noncharitable exempt organization. (3) Sales of assets to a noncharitable exempt organization. (3) Sales of assets to a noncharitable exempt organization. (3) Rental of facilities, equipment, or other assets. (4) Reimbursement arrangements. (4) Reimbursement arrangements. (5) Losis or long nurances. (6) Reimbursement arrangements. (8) Losis or long nurances. (9) Exemption of long nurances. (10) Sales of long nurances. (11) Sales of long nurances. (11) Sales of long nurances. (12) Sales of long nurances. (13) Sales of long nurances. (14) Sales of long nurances. (15) Sales of long nurances. (16) Sales of long nurances. (17) Sales of long nurances. (18) Sales of long nurances. (18) Sales of long nurances. (19) Sales of long nurances. (19) Sales of long nurances. (10) Sales of long nurances. (11) Sales of long nurances. (11) Sales of long nurances. (12) Sales of long nurances. (13) Sales of long nurances. (14) Sales of long nurances. (15) Sales of long nurances. (16) Sales of long nurances. (17) Sales of long nurances. (18) Sales of long nurances. (19) Sales of long nurances.	1 Did	the organ				er organı	zation described in s	section	T	Yes	No
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(a) Sales of assets to a nonchantable exempt organization. (1) Sales of assets from a nonchantable exempt organization. (2) Purchases of assets from a nonchantable exempt organization. (3) Rental of facilities, equipment, or other assets. (4) Reimbursement arrangements. (5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. (7) Sharing of facilities, equipment, mailing lists, other assets, or paid employees. (8) Loans or loan guarantees. (9) Performance of services or membership or fundraising solicitations. (10) Milol No (10) In In No (10) In In No (10) In In No (10) In No											No
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(3) Rental of facilities, equipment, or other assets. (4) Reimbursement arrangements. (5) Loans or loan guarantes. (6) Performance of services or membership or fundasing solicitations. (6) Performance of services or membership or fundasing solicitations. (7) Sharing of facilities, equipment, mailing lists, other assets, or paid employees. (8) It is answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, show in column (b) the value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, show in column (b) the value of the goods, other assets, or services received (a) Line No (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements are straightful to the service of the following schedule and secretary the following schedule and secretary that the secretary of the following schedule and statements, and to the best of my knowledge and belief; it is true, correct, and complete Declaration of preparer (both that harpyeaper or fiduciary) is based on all information of which preparer has any knowledge Preparer's MICHAEL HINCHEY Signature of officer or trustee Date Prim's same MICHAEL HINCHEY Signature of officer or trustee Prim's same MICHAEL HINCHEY Signature of officer or trustee Prim's address MICHAEL HINCHEY Signature Prim's address MIC											No
(4) Reimbursement arrangements											No
(5) Loans or loan guarantees											No
(6) Performance of services or membership or fundraising solicitations. 2 Sharing of facilities, equipment, mailing lists, other assets, or paid employees. 3 Interest of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, shown in column (2) the value of the goods, other assets, or services received in any transaction or sharing arrangement, shown in column (2) the value of the goods, other assets, or services received in any transaction or sharing arrangement, shown in column (2) the value of the goods, other assets, or services received in any transaction or sharing arrangements. (a) Line No (b) Amount involved (c) Hame of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangements described in section 501(c) of the Code (other than section 501(c)31) or in section 527?. 3 If Yes No bif 'Yes,' complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship the best of my knowledge and belief, it is true, correct, and complete beclaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge 40 Jacob Preparer's Signature of officer or trustee Date Prim's address North Propagation (781) 356-2000 40 Jacob Preparer's Signature Nichael Firm's address North Propagation Prim's address North Prim's address North Propagation Prim's address North Prim's address North Propagation Prim's address North Prim's address North Prim's addre											No
c Shanng of facilities, equipment, mailing lists, other assets, or paid employees. d If the answer to any of the above is "Yes," complete the following schedule: Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line No (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangements 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?. (b) If "Yes," complete the following schedule: (c) Name of organization (d) Type of organization (c) Description of relationship Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge Signature of officer or trustee Date Check if self- praparer's MICHAEL HINCHEY Signature MICHAEL HINCHEY Signature Firm's address BRAINTREE, MA 02184 Phone no (781) 356-2000											
d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line No (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements of the goods, other assets, or services received (e) Description of transfers, transactions, and sharing arrangements of the goods, other assets, or services received (e) Description of transfers, transactions, and sharing arrangements of the goods of the g											
2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	of t	he good	s, other assets, or se	rvices given by th angement, show i	ne reporting foundation column (d) the val	on Ift ue of th	he foundation re ne goods, other a	ceived less than fair mar assets, or services recei	cet value red	:	
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	(a) Line	e No	(b) Amount involved	(c) Name of nonch	arıtable exempt organıza	tion	(d) Description o	f transfers, transactions, and s	narıng arra	ngemer	nts
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?						_					
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	-										
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described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?											
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge ****** Signature of officer or trustee Date Preparer's Signature Preparer's Signature Firm's name KIRKLAND ALBRECHT & FREDRICKSON LLC To FORBES ROAD WEST Firm's address BRAINTREE, MA 02184 Phone no (781) 356-2000	des	scribedi	n section 501(c) of th mplete the following s	ne Code (other tha schedule	an section 501(c)(3))) or in	section 527?.			_{es} F	No
the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge 2012-10-11		1	(a) Name of organization	1	(b) Type of org	anızatıo	n	(c) Description of rela	tionship		
Preparer's MICHAEL HINCHEY Signature Firm's name KIRKLAND ALBRECHT & FREDRICKSON LLC 10 FORBES ROAD WEST Firm's address ▶ BRAINTREE, MA 02184 PTIN Check if self-employed ▶ PTIN PO0451160 Po0451160 Poo451160 Phone no (781) 356-2000		the be	st of my knowledge ar on all information of v	nd belief, it is true	e, correct, and compl		eclaration of pre	parer (other than taxpaye			
Preparer's Signature Preparer's Signature		Sı	gnature of officer or tr	ustee			Date	Title			
Firm's address BRAINTREE, MA 02184 RIRKLAND ALBRECHT & FREDRICKSON LLC 10 FORBES ROAD WEST Phone no (781) 356-2000	an Here			AEL HINCHEY				Check if self-	P00451	.160	
Firm's address BRAINTREE, MA 02184 Phone no (781)356-2000	ίς		Firm's name ▶			RICKS	ON LLC	Firm's EIN ▶ 04-3121)55		
Firm's address BRAINTREE, MA 02184 Phone no (781)356-2000		_\$2		10 FORBES	ROAD WEST						
May the IRS discuss this return with the preparer shown above? See instructions			Firm's address 🕨	BRAINTREE	, MA 02184			Phone no (781) 356-2	000		
THAT CHO THE ADECASE CHE ICCUIT WICH CHE DICEATE SHOWN ADOVE. SEE HISH ACTIVITY	May th	e IRS di	scuss this return with	the preparer sho	wn ahove? See instr	uctions	s	<u>'</u> ▶Г	Ves Γ	No	

efile GRAPHIC print - DO NOT PROCESS As Filed Data DLN: 93491289004252 OMB No 1545-0047 Schedule B **Schedule of Contributors** (Form 990, 990-EZ, or 990-PF) ► Attach to Form 990, 990-EZ, or 990-PF. 2011 Department of the Treasury Internal Revenue Service Name of organization **Employer identification number** THE DUNKIN' DONUTS & BASKIN-ROBBINS COMMUNITY FOUNDATION INC 26-0593784 Organization type (check one) Filers of: Section: **501(c)** Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the **General Rule** or a **Special Rule**. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule— For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ, that met the 331/3% 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 For a section 501(c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more Caution. An Organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990,

990-EZ. or 990-PF)

990-EZ, or 990-PF), but it **m ust** answer "No" on Part IV, line 2 of its Form 990, or check the box in the heading of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990,

Name of organization
THE DUNKIN' DONUTS & BASKIN-ROBBINS
COMMUNITY FOUNDATION INC

Employer identification number

26-0593784

Part I	Contributors (see Instructions) Use duplicate copies of Part Lif additional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	DUNKIN BRANDS INC 130 ROYALL STREET CANTON, MA 02021	\$ <u>166,667</u>	Person Payroll Noncash Payroll Noncash Payroll Noncash Payroll Payr
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	MISS CHOCOLATE INC 300 SPAGNOLI ROAD MELVILLE, NY 11747	\$5,000	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
3	RICH FAMILY FOUNDATION 1 ROBERT RICH WAY BUFFALO, NY 14213	\$ 25,000	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
4	SPECIAL OLYMICS OF NEW YORK INC 504 BALLTOWN ROAD SCHENECTADY, NY 12304	\$13,437	Person P 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
5	TAYLOR CONSULTING CONTRACTING LLC 625 MAIN STREET AVOCA, PA 18641	\$8,188	Person Payroll Noncash Payroll Noncash Payroll Noncash Payroll Payr
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
6	JON C LUTHER 410 OLD TOWNE LANE JUNO BEACH, FL 33408	\$10,000	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Employer identification number Name of organization THE DUNKIN' DONUTS & BASKIN-ROBBINS COMMUNITY FOUNDATION INC 26-0593784 Noncash Property (see Instructions) Use duplicate copies of Part II if Part II additional space is needed (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received (see instructions) Part I (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions)

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)	Page <u>1</u> of <u>1</u> of Part II
Name of organization THE DUNKIN' DONUTS & BASKIN-ROBBINS COMMUNITY FOUNDATION INC	Employer identification number 26-0593784
Part III Exclusively religious, charitable, etc., individual contributions to section 50 aggregating more than \$1,000 for the year. (Complete columns (a) through (e)	

For organizations completing Part III, enter the total of exclusively religious, charitable, etc , contributions of \$1,000 or less for the year (Enter this information once See instructions) ▶ \$ Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	n Normana af aift		(c) Use of gift	(d) Description of how gift is held
_				
-	Transferee's name, address, and 2		(e) ransfer of gift Relatio	enship of transferor to transferee
- 111				
(a) No. from Part I	(b) Purpose of gift	ı	(c) Jse of gift	(d) Description of how gift is held
_				
-	Transferee's name, address, and 2		(e) ransfer of gift Relatio	enship of transferor to transferee
-				
(a) No. from Part I	(b) Purpose of gift	ı	(c) Jse of gift	(d) Description of how gift is held
_ :				
-	Transferee's name, address, and 2		(e) ransfer of gift Relatio	enship of transferor to transferee
-				
(a) No. from Part I	(b) Purpose of gift	ı	(c) Jse of gift	(d) Description of how gift is held
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	Transferee's name, address, and 2		(e) ransfer of gift Relatio	enship of transferor to transferee
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Additional Data

Software ID:

Software Version:

EIN: 26-0593784

Name: THE DUNKIN' DONUTS & BASKIN-ROBBINS

COMMUNITY FOUNDATION INC

Form 990PF - Special Condition Description:

Special Condition Description

Form 990PF Part VII-A Line 8a

Enter the states to which the foundation reports or with which it is registered

MA,AL,AK,AZ,AR,CA,CO,CT,DC,FL,GA,IL,KS,KY,ME,MD,MI,MN,MS, NH,NJ,NM,NY,NC,ND,OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WV,WI

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ALEX SMIGELSKI	DIRECTOR	0	0	0
555 SOUTH COLUMBUS AVE SUITE 203	10 00			
MT VERNON, NY 10550				
TOM MANCHESTER 130 ROYALL STREET 2EB CANTON, MA 02021	DIRECTOR 10 00	0	0	0
DOMINIC LASKERO	DIRECTOR	0	0	0
405 WEST BERKLEY LANE HOFFMAN ESTATES,IL 60194	10 00			
FRANK BASLER	DIRECTOR	0	0	0
108 WOLF POND KINGSTON,MA 02364	10 00			
GARY HECKEL	DIRECTOR	0	0	0
93 EMERALD LAKE DRIVE PALM COAST,FL 32137	10 00			
KEN FREITAS	DIRECTOR 10 00	0	0	0
20 PARSONS ROAD WEST NEWBURY, MA 01985				
JIM DAMICONE	TREASURER 10 00	0	0	0
6531 BLACK FRIARS LANE HUDSON,OH 44236				
JOSEPH PRAZERES	DIRECTOR	0	0	0
670 METACOM AVE WARREN,RI 02885	10 00			
KAREN RASKOPF	CO-CHAIR	0	0	0
130 ROYALL STREET CANTON,MA 02021	10 00			
MITCH COHEN	CO-CHAIR	0	0	0
1403 BRENTWOOD ROAD BAYSHORE,NY 11706	10 00			
ROD VALENCIA	DIRECTOR	0	0	0
86-20 WOODHAVEN BLVD WOODHAVEN,NY 11421	10 00			
LINDA SULTAN	DIRECTOR	0	0	0
23 COMMONWEALTH ROAD WATERTOWN, MA 02472	10 00			
STEVEN KIM	DIRECTOR	0	0	0
29001 GARDEN OAKS CT AGOURA HILLS,CA 91301	10 00			

Form 990PF Part XV Line 3 - Gr	ants and Contributions	s Paid During	the Year or Approved f	or Future Payment
Recipient Name and address (home or	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
business)	or substantial contributor			
a Paid during the year FEEDING AMERICA 35 EAST		501(C)(3)	OPERATING SUPPORT	102,000
WACKER DRIVE SUITE 2000 CHICAGO,IL 60601		501(C)(3)	OPERATING SUPPORT	102,000
ALZHEIMERS ASSOCIATION311 ARSENAL STREET WATERTOWN,MA 02472		501(C)(3)	OPERATING SUPPORT	36,236
PHILABUNDANCE FOOD BANK 3616 SOUTH GALLOWAY STREET PHILADELPHIA,PA 19148		501(C)(3)	OPERATING SUPPORT	20,000
STARLIGHT CHILDRENS FOUNDATION529 MAIN STREET SUITE 608 CHARLESTOWN, MA 02129		501(C)(3)	OPERATING SUPPORT	12,750
USOPO BOX 96332 WASHINGTON, DC 20090		501(C)(3)	OPERATING SUPPORT	10,000
CHILDRENS HOSPITAL - CHICAGO2300 CHILDRENS PLAZA BOX 4 CHICAGO,IL 60614		501(C)(3)	OPERATING SUPPORT	10,000
COMMUNITY FOODBANK OF NEW JERSEY31 EVANS TERMINAL HILLSIDE, NJ 07205		501(C)(3)	OPERATING SUPPORT	10,000
CHILDRENS HOSPITAL OF PHILADELPHIA 34TH ST CIVIC CENTER BLVD PHILADELPHIA, PA 19104		501(C)(3)	OPERATING SUPPORT	10,000
LONG ISLAND CARES INC10 DAVIDS DRIVE HAUPPAUGE,NY 11788		501(C)(3)	OPERATING SUPPORT	10,000
KIDS IN DISTRESS819 NE 26TH STREET WILTON MANORS,FL 33305		501(C)(3)	OPERATING SUPPORT	10,000
AUTISM SPEAKS1 EAST 33RD STREET 4TH FLOOR NEW YORK,NY 10016		501(C)(3)	OPERATING SUPPORT	10,000
BALTIMORE HUMANE SOCIETY 1601 NICODEMUS ROAD REISTERSTOWN,MD 21136		501(C)(3)	OPERATING SUPPORT	9,000
MARYLAND FOODBANK28500 OWENS BRANCH ROAD SALISBURY,MD 21801		501(C)(3)	OPERATING SUPPORT	7,500
KEVIN A PRZYBYL BREATHE EASY FOUNDATION838 SENECA TRAIL ST CLOUD,FL 34772		501(C)(3)	OPERATING SUPPORT	6,000
BAPS CHARITIES81 SUTTON LANE SUITE 201 PISCATAWAY,NJ 08854		501(C)(3)	OPERATING SUPPORT	5,001
TJ MARTELL FOUNDATION729 7TH AVENUE 16TH FLOOR NEW YORK,NY 10019		501(C)(3)	OPERATING SUPPORT	5,000
USO OF METROPOLITAN WASHINGTON228 MCNAIR ROAD BUILDING 405 FORT MEYER,VA 22211		501(C)(3)	OPERATING SUPPORT	5,000
POLICE UNITY TOUR12E GREAT MEADOW LANE EAST HANOVER,NJ 07936		501(C)(3)	OPERATING SUPPORT	5,000
CENTRAL PENNSYLVANIA FOODBANK3301 WAHOO DRIVE WILLIAMSPORT,PA 17701		501(C)(3)	OPERATING SUPPORT	5,000
CHUCK CASSIDY SCHOLARSHIP FUNDPO BOX 52253 SUITE 300 PHILADELPHIA,PA 19115		501(C)(3)	OPERATING SUPPORT	3,600
WIA KIA625 EAST MAIN STREET MARLTON,NJ 08053		501(C)(3)	OPERATING SUPPORT	3,500
NATIONAL CENTER FOR DISABILITY SERVICES201 IU WILLETS ROAD ALBERTSON,NY 11507		501(C)(3)	OPERATING SUPPORT	3,000
CHILDRENS HOSPITAL OF THE KINGS DAUGHTERS601 CHILDRENS LANE NORFOLK, VA 23507		501(C)(3)	OPERATING SUPPORT	2,500
ARTHRITIS FOUNDATIONPO BOX 7669 ATLANTA,GA 30357		501(C)(3)	OPERATING SUPPORT	2,500
MEDICAL UNIVERSITY OF SOUTH CAROLINA FOUNDATION261 CALHOUN STREET SUITE 306 CHARLESTON,SC 29425		501(C)(3)	OPERATING SUPPORT	2,500
POLICE OFFICERS ASSISTANCE TRUST (POAT)1030 NW 111 AVENUE MIAMI,FL 33172		501(C)(3)	OPERATING SUPPORT	2,500
SPECIAL KIDS DANCE & PERFORMANCE ARTS5796 ULMERTON ROAD CLEARWATER, FL 33760		501(C)(3)	OPERATING SUPPORT	2,500
CHILDRENS HOSPITAL OF PITTSBURGH4401 PENN AVENUE PITTSBURGH,PA 15224		501(C)(3)	OPERATING SUPPORT	2,500
POLICE OFFICERS ASSISTANCE TRUST (POAT)1030 NW 111 AVENUE MIAMI,FL 33172		501(C)(3)	OPERATING SUPPORT	2,000
NEW HANOVER REGIONAL MEDICAL CENTER5301 WRIGHTSVILLE AVE J WILMINGTON, NC 28403		501(C)(3)	OPERATING SUPPORT	1,000

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

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
SPECIAL OLYMPICS - MD3701 COMMERCE DRIVE SUITE 103 BALTIMORE,MD 21227		501(C)(3)	OPERATING SUPPORT	500
LEUKEMIA & LYMPHOMA SOCIETY 1311 MAMARONECK AVENUE SUITE 310 WHITE PLAINS,NY 10605		501(C)(3)	OPERATING SUPPORT	500
FOOD BANK OF NORTHWEST INDIANA2248 WEST 35TH AVENUE GARY,IN 46408		501(C)(3)	OPERATING SUPPORT	500
HASBRO CHILDRENS HOSPITAL593 EDDY STREET PROVIDENCE, RI 02903		501(C)(3)	OPERATING SUPPORT	164,093
NATIONAL FALLEN FIREFIGHTERS FOUNDATIONPO DRAWER 498 EMMITSBURG, MD 21727		501(C)(3)	OPERATING SUPPORT	100,000
JIMMY FUND10 BROOKLINE PLACE WEST 6TH FLOOR BROOKLINE,MA 02445		501(C)(3)	OPERATING SUPPORT	76,360
ALZHEIMERS - PURPLE WITH A PURPOSE225 N MICHIGAN AVE FL 17 CHICAGO,IL 60601		501(C)(3)	OPERATING SUPPORT	16,294
AMERICAN RED CROSS2025 E STREET NW WASHINGTON,DC 20006		501(C)(3)	OPERATING SUPPORT	14,743
USOPO BOX 96332 WASHINGTON,DC 20090		501(C)(3)	OPERATING SUPPORT	10,000
PHOENIX CHILDRENS HOSPITAL 1919 E THOMAS ROAD PHOENIX,AZ 85016		501(C)(3)	OPERATING SUPPORT	8,075
Total				707,652

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

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount	
Name and address (home or business)	any foundation manager recipien or substantial contributor				
Approved for future payment					
SPECIAL OLYMPICS - RI370 GEORGE WASHINGTON HIGHWAY 1 SMITHFIELD,RI 02917		501(C)(3)	OPERATING SUPPORT	37,431	
SPECIAL OLYMPICS - MA512 FOREST STREET MARLBOROUGH,MA 01752		501(C)(3)	OPERATING SUPPORT	28,238	
Total	·		▶ 3b	65,669	

TY 2011 Accounting Fees Schedule

Name: THE DUNKIN' DONUTS & BASKIN-ROBBINS

COMMUNITY FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	18,690	0		18,690

TY 2011 Distribution from Corpus Election					
Name: THE DUNKIN' DONUTS & BASKIN-ROBBINS					
COMMUNITY FOUNDATION INC					
EIN: 26-0593784					
Election:					
PURSUANT TO IRC SECTION 4942(H)(2) AND REGULATION 53.4942					
(A)-3(D)(2), DUNKIN' BRANDS COMMUNITY FOUNDATION INC.					
HEREBY ELECTS TO TREAT CURRENT YEAR QUALIFYING					
DISTRIBUTIONS IN EXCESS OF THE IMMEDIATELY PRECEDING TAX					
YEAR'S UNDISTRIBUTED INCOME AS BEING MADE OUT OF					

DLN: 93491289004252

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

CORPUS.SIGNED___ DATE____ (NAME AND TITLE)

TY 2011 Legal Fees Schedule

Name: THE DUNKIN' DONUTS & BASKIN-ROBBINS

COMMUNITY FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL	26,965	0		26,965

DLN: 93491289004252

TY 2011 Other Expenses Schedule

Name: THE DUNKIN' DONUTS & BASKIN-ROBBINS

COMMUNITY FOUNDATION INC

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK SERVICE CHARGES	1,686	0		1,686
INSURANCE EXPENSE	4,483	0		4,483
OFFICE EXPENSE	4,705	0		4,705
STATIONARY & PRINTING	11,188	0		11,188
POSTAGE & DELIVERY	1,167	0		1,167
TELEPHONE	23	0		23
DUES AND SUBSCRIPTIONS	1,490	0		1,490
ADVERTISING	4,432	0		4,432
LICENSING	7,386	0		7,386
FUNDRAISING	191,551	0		191,551
MANAGEMENT FEES	51,052	0		51,052



TY 2011 Other Liabilities Schedule

Name: THE DUNKIN' DONUTS & BASKIN-ROBBINS

COMMUNITY FOUNDATION INC

Description	Beginning of Year - End of Year - Book Value Value
AMOUNTS RAISED ON BEHALF OF OTHERS	0 65,668

TY 2011 Other Professional Fees Schedule

Name: THE DUNKIN' DONUTS & BASKIN-ROBBINS

COMMUNITY FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOUNDATION MANAGEMENT ASSOCIATES - CONTROLLER	18,000	0		18,000

TY 2011 Substantial Contributors Schedule

Name: THE DUNKIN' DONUTS & BASKIN-ROBBINS

COMMUNITY FOUNDATION INC

Name	Address
DUNKIN BRANDS	130 ROYALL STREET CANTON, MA 02021
MISS CHOCOLATE INC	300 SPAGNOLI ROAD MELVILLE,NY 11747
RICH FAMILY FOUNDATION	1 ROBERT RICH WAY BUFFALO,NY 14213
SPECIAL OLYMPICS OF NEW YORK INC	504 BALLTOWN ROAD SCHENECTADY, NY 12304
TAYLOR CONSULTING & CONTRACTING LLC	625 MAIN STREET AVACA,PA 18641
JOHN C LUTHER	410 OLD TOWNE LANE JUNO BEACH, CA 33408