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## Form **990-PF** Dapartment of the Treasury Internal Revenue Service

# 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

OMB No 1545-0052

For	calen	dar year 2011 or tax year	r beginning				, and e	naing					
Nai	ne of	foundation							A Emp	loyer identificatio	n number		
D	ΙE	S FAMILY FOU	JNDATION	INC					5.5	5-082899	2		
Nur	nber a	nd street (or P O box number i	if mail is not delivered	to street	address)			Room/suite	<b>B</b> Telep	phone number			
P	0 1	BOX 2299							78	31-455-1	411		
City	orto	own, state, and ZIP code						<u></u>	C If exe	mption application is	pending, check	here	ightharpoons
_W	ES'	TPORT, CT (	06880										
G (	heck	all that apply	Initial return		initial re	turn of a fo	ormer public c	harity	D 1. Fo	reign organizatior	ns, check here	, l	
			Final return		Amende	d return			En		easting the PEOL	tont	
			Address change						2. ch	eck here and attach	computation		
H_(	_		X Section 501(										_
<u>_</u>		ction 4947(a)(1) nonexem							unde	er section 507(b)(	1)(A), check h	ere	
		irket value of all assets at e	end of year   J A		•	<b>⊆</b> Cash	L Accr	ual					on
	om F ·\$	Part II, col. (c), line 16)	764 (Part		her (specify)	on cash	hacia )		unde	er section 507(b)(	1)(B), check h	ere	
_	ırt l										(d) Die	burseme	ente
		Analysis of Revenue and (The total of amounts in colunecessanly equal the amount	imns (b), (c), and (d) mants in column (a))	ay not	expenses pe				(6	ncome	for chant		oses
	1	Contributions, gifts, gran			3,	,235.	,		-	N/A	. (222		<del>"</del> "
	2	Check X if the foundation		Sch B									
	3	Interest on savings and tempo cash investments				6.	ľ	6.			STATE	MEN'	r 1
	4	Dividends and interest fro	om securities		5,	,987.		5,987.			STATE	MEN	r 2
	5a	Gross rents											
	b	Net rental income or (loss)						<del></del>	ļ,	·····			
ō	6a	Net gain or (loss) from sale of Gross sales price for all			17,	781-455-1411  C if exemption application is pending, check here and attach computation is pending organizations, check here and attach computation is private foundation  private foundation  X Cash Accrual  be on cash basis  anue and sper books  3, 235.  (b) Net investment income  (c) Adjusted net income  7, 594.  17, 594.  17, 594.  COGDEN US  COGDEN US							
en	b	assets on line 6a	•	11.	6. 6. 5,987. 5,987	ļ	· · · · · · · · · · · · · · · · · · ·			···			
Revenue	7	Capital gain net income (from	137,141. om Part IV, line 2)			1	7,594.		RFCE	VED			
_	8	Net short-term capital gai	ın			REC I		70					
	9	Income modifications Gross sales less returns	1				<u> </u>			<u> </u>	n anio	- [왕]	0.
	10a	and allowances				<del></del>					F B ZIIIZ	क	
	i	Less Cost of goods sold Gross profit or (loss)					·····					<u> </u>	
	11	Other income					· · · · · · · · · · · · · · · · · · ·			OGDI	N, Ut		<u> </u>
	12	Total. Add lines 1 throug	յի 11		26,	,822.	2	3,587.	,				
	13	Compensation of officers, dire				0.		0.					0.
	14	Other employee salaries a	and wages					_					
10	15	Pension plans, employee	benefits										
S.S.	16a	Legal fees		_									
	b	Accounting fees	STMT	3	1,	,035.		0.				1,	035.
ZŽ.	C	Other professional fees							ļ				
誦	17	Interest	STMT	1		210		121	<del> </del>		+		87.
C	18	Taxes		4		210.	<del></del>	131.	<del> </del>				0/.
Œ	19 20	Depreciation and depletion Occupancy	yıı				<del></del>		<del> </del>	-	+		
`-₹	21	Travel, conferences, and	meetings							<del></del>	+		
હ્યું	22	Printing and publications	-								+		
Operating and Administration WIND	23	Other expenses	STMT	5		50.		0.			<del> </del>		50.
<b>%</b>	24	Total operating and adm											
<b>⊅</b> ĕ		expenses. Add lines 13 t			1,	,303.		131.				1,	172. 014.
0	25	Contributions, gifts, grant			23,	014.						23,	014.
	26	Total expenses and disb	ursements.					_					
		Add lines 24 and 25			24,	,317.		131.	ļ		1	24,	186.
	27	Subtract line 26 from line	12		_								
		Excess of revenue over expen		ts	2,	, 505.	2	2 456	ļ				
		Net investment income (						3,436.	-	N/A			
	C	Adjusted net income (if no	egative, enter -0-)		ł		<u> </u>			N/A	1		

123501 12-02-11 LHA For Paperwork Reduction Act Notice, see instructions.

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рa	س.	Balance Sheets Attached schedules and amounts in the description column should be for end-of-war amounts only	Beginning of year	End of y	ear
R*3	ri.	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
		Savings and temporary cash investments	17,070.	26,324.	26,324.
	3	Accounts receivable ►			
		Less allowance for doubtful accounts ▶			<del>- m-1 m 1 m - m-</del>
	4	Pledges receivable ►			
		Less allowance for doubtful accounts ▶			
-	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			······································
	7	Other notes and loans receivable			
		Less allowance for doubtful accounts ▶			
<u>,</u>	8	Inventories for sale or use			
2000	9	Prepaid expenses and deferred charges			
ί.	l Oa	Investments - U S and state government obligations			
	b	Investments - corporate stock			
	C	Investments - corporate bonds			<u></u>
.		Investments - land, buildings, and equipment basis			
	-	Less: accumulated depreciation	j	]	
	12	Investments - mortgage loans			
- 1	13	Investments - other STMT 6	471,653.	464,904.	434,440.
- 1		Land, buildings, and equipment basis		7.70	
-		Less: accumulated depreciation			
	15	Other assets (describe )			<u>-</u>
		Other assets (describe >			
	16	Total assets (to be completed by all filers)	488,723.	491,228.	460,764.
		Accounts payable and accrued expenses	100/,200		
- 1	18	Grants payable			
- 1	19	Deferred revenue	· · · · · · · · · · · · · · · · · · ·		
إ إ		<b>'</b>			
,   j	20	Loans from officers, directors, trustees, and other disqualified persons			
7	21	Mortgages and other notes payable			
ď	22	Other liabilities (describe )			
.	12	Total liabilities (add lines 17 through 22)	0.	0.	
+	4.0	Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here	•		
		and complete lines 24 through 26 and lines 30 and 31.			
3		•			
		Unrestricted			
	25	Temporarily restricted			
;   <sup>;</sup>	26	Permanently restricted			
DIBER DID COSTO IN		Foundations that do not follow SFAS 117, check here			
5	_	and complete lines 27 through 31.	400 700	401 220	
2	27	Capital stock, trust principal, or current funds	488,723.	491,228.	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0.	0.	
֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	29	Retained earnings, accumulated income, endowment, or other funds	0.	0.	
<b>:</b>  :	30	Total net assets or fund balances	488,723.	491,228.	
ł			400 700	401 220	
;	31_	Total liabilities and net assets/fund balances	488,723.	491,228.	
Pa	rŧ	Analysis of Changes in Net Assets or Fund B	alances	<del></del>	
T	otal	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		t agree with end-of-year figure reported on prior year's return)		1	488,723.
		amount from Part I, line 27a		. 2	2,505.
		increases not included in line 2 (itemize)		3	0.
		ines 1, 2, and 3	· · · · · ·	4	491,228.
D	ecr	eases not included in line 2 (itemize)			0.
	ntal	not accests or fund balances at end of year /line 4 minus line 5\ - Part II. or	luma (h) luna 20		491,228,

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Tait II Oapital Gallis	and L	Jooes IUI Tax UII III	i A e 2 (111 e 111	i iriconte						
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.)			` P	- Purc	nase   `	Date a		(d) Date sold (mo , day, yr )		
1a 242.277 SH FID:			•		۳-	- Don		ARIC		
ь 6,443.957 SH F			FUND		<u> </u>		P V	ARIC	005	<del></del> _
c CAPITAL GAINS	DIVI	DENDS		<del>-</del>	ļ					
_d		<del></del>								
_e					<u>l</u>					
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		st or other basis expense of sale					ın or (loss) (f) mınus (	
a 3,577.				3,29	4.					283.
b 127,475.	-	<del></del>		116,25				_		11,222.
c 6,089.		<del></del>			- 1					11,222.
d									**	
e Complete only for assets showin	0.000.00	column (h) and owned by	l the foundation	on 12/21/60			40.7	) (O-	.1 (6)	
Complete only for assets shown							(I) (	sains (GC k) but ni	ol (h) gain ot less thar	minus \ -0-\ or
(i) F M V as of 12/31/69		(j) Adjusted basis as of 12/31/69		cess of col (i) col (j), if any			, 100	Losses (	from col (	h))
a										283.
b										11,222.
C										6,089.
d		•					<del></del>			·
е										
		C 11			$\overline{}$					
2 Capital gain net income or (net ca	pital loss	) If gain, also enter If (loss), enter -0	r in Part I, line - in Part I, line	<i>7</i> 7	}	2				17,594.
3 Net short-term capital gain or (los			ıd (6)		`					
If gain, also enter in Part I, line 8,	column (	(c)				_			NT / 7	
If (loss), enter -0- in Part I, line 8		)+: 4040/-\ f	D	T NI-A		3	4 1		N/A	
<del></del>		Section 4940(e) for					ient inco	me		
(For optional use by domestic private	e foundati	ions subject to the section 4	4940(a) tax on	net investment in	ncome	e )				
If section 4940(d)(2) applies, leave th	ne part b	lank								
ii section 4540(d)(2) applies, leave ti	iis pait bi	Idiik								
Was the foundation liable for the sect	tion 4942	tax on the distributable am	nount of any ye	ear in the base per	rıod?					Yes X No
If "Yes," the foundation does not qual	lify under	section 4940(e) Do not co	mplete this pa	rt						
1 Enter the appropriate amount in e					es					
(a) Base period years		(b)			(c)				D 1. 1	(d) ution ratio
Base period years Calendar year (or tax year beginnii	na in)	Adjusted qualifying dis	tributions	Net value of no			use assets	1 6	anjelu col (b) div	ution ratio ided by col (c))
2010	,,g,	1	9,250.			45	6,767.	<del>                                      </del>	(0) (0)	.042144
2009			4,211.				6,980.	<del> </del>		.062564
			8,043.				3,208.	ļ		.037340
2008							$\frac{3,200.}{0,760.}$		-	.058334
2007			5,045.							
2006			4,188.	· · · · · · · · · · · · · · · · · · ·		23	4,106.	Ļ.,		.007841
										00000
2 Total of line 1, column (d)								2		.208223
3 Average distribution ratio for the 5	5-year ba	se period - divide the total (	on line 2 by 5,	or by the number	of ye	ars				
the foundation has been in exister	nce if less	than 5 years						3		.041645
4 Enter the net value of noncharitab	le-use as	sets for 2011 from Part X,	line 5					4		498,026.
				••	•		•			•
5 Multiply line.4.by.line 3								.5.		20.,740.
Widness in Strains	• -				_					
E Estar 10/ of set investment incom	no /10/ nd	Dort Line 27h						•		235.
6 Enter 1% of net investment incom	IE ( I % 01	rai( i, line 2/D)		•				6		233.
								_		20 075
7 Add lines 5 and 6								7		20,975.
										24 106
8 Enter qualifying distributions from								8		24,186.
If line 8 is equal to or greater than See the Part VI instructions	line 7, cl	neck the box in Part VI, line	1b, and comp	lete that part usin	ıg a 1'	% tax	rate			
Coo the Latt At methorione		- · · · · · · ·								

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Pa	rt VI Excise Tax Based on Investment Income (Section 4940	)(a), 4940(b), 4	940(e), or	4948	- see i	nstru	ction	rs)
1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🛄 and en	iter "N/A" on line 1	j					
	Date of ruling or determination letter (attach copy of letter if nec						_	
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	X and enter 1%	þ	1	,	· · · · · · · · · · · · · · · · · · ·	2	<u>35.</u>
	of Part I, line 27b							
	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%		(b) )					^
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Otl		2				$\frac{0.}{35.}$	
_	Add lines 1 and 2			3				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Of	thers enter -0-)		4				$\frac{0.}{35.}$
_	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			5			<u>Z</u>	33.
6	Credits/Payments	ا ـم ا						
	2011 estimated tax payments and 2010 overpayment credited to 2011	6a		-				
	Exempt foreign organizations - tax withheld at source	6b		-				
	Tax paid with application for extension of time to file (Form 8868)	6c	···	-				
	Backup withholding erroneously withheld  Tatal produce and payments. Add lines for through fid.	6d		-				0.
	Total credits and payments Add lines 6a through 6d  Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attacked.	had		8				<del>•</del>
		neo STATEMEN	т 7 ▶	9			2	35.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed SEE Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	DIAILMEN	1 /	10	<del></del>			<del>55.</del>
	Enter the amount of line 10 to be Credited to 2012 estimated tax		Refunded	11				
	rt VII-A Statements Regarding Activities		neiullueu 🚩	<u>.i!! -</u>	L			
	During the tax year, did the foundation attempt to influence any national, state, or local legisl	ation or did it particu	nate or interven	e In			Yes	No
	any political campaign?	action of all it partion	74(0 O1 III(0170II	•		1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos	es (see instructions	for definition\?			1b		X
_	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	<u>=</u>	=	ed or				
	distributed by the foundation in connection with the activities.	o copied or any ind	toniao pobilon					
C	Did the foundation file Form 1120-POL for this year?					10		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	vear						
	(1) On the foundation ▶ \$ 0 • (2) On foundation managers		0.					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expendit		oundation	-				
	managers ▶ \$ 0.	•						
2	Has the foundation engaged in any activities that have not previously been reported to the IR	15?				2		Х
	If "Yes," attach a detailed description of the activities.							
3	Has the foundation made any changes, not previously reported to the IRS, in its governing in	nstrument, articles of	incorporation,	or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	es				3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year	7				4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?			N	/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 eit	her						
	By language in the governing instrument, or							
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory</li> </ul>	directions that conf	ict with the stat	e law				
	remain in the governing instrument?					6_	<u>X</u>	
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 instruction	ns) ►						
_	CT							
þ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the At	torney General (or de	esignate)					
_	of each state as required by General Instruction G? If "No," attach explanation					8b	Χ	
9 .	Is the foundation claiming status as a private operating foundation within the meaning of sec		142(J)(5) for cal	endar				v
40	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," co				•	9		X
ΙÜ	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedul	e listing their names and	addresses			10		Λ

orm	990-PF(2011) DIES FAMILY FOUNDATION INC 55-082	8992	Page 5
Pa	rt VII-A Statements Regarding Activities (continued)		
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of		
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?		
	If "Yes," attach statement (see instructions)	12	Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		X
	Website address ► N/A	<u></u>	
14	The books are in care of ► BRIAN E. DIES  Telephone no ►617-7	58-05	00
	Located at ▶21 EDGEWOOD STREET, NEEDHAM, MA ZIP+4 ▶0		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		
	and enter the amount of tax-exempt interest received or accrued during the year	N/	Α
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank,		es No
	securities, or other financial account in a foreign country?	16	
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of the foreign	10	
	country	1	
Ď,	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required		
<u></u>	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		es No
12	During the year did the foundation (either directly)		63 140
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes X 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 )		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	
	Organizations relying on a current notice regarding disaster assistance check here		
Ç	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?	10	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation		
	defined in section 4942(j)(3) or 4942(j)(5))		
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? Yes X No		
	If "Yes," list the years >		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect		
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach		
	statement - see instructions ) N/A	2b	1
C	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here		
_	<b>&gt;</b>		
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		
	during the year?		
b	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,		
	/-	26	1
4-	•	3b	X
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a -	- <b>^</b>
D	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	I A

orm 990-PF (2011) DIES FAMILY FOUNDATION ]	INC		<u>55-08289</u>	92	Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to		-			
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y <sub>6</sub>	es X No		
(2) Influence the outcome of any specific public election (see section 4955),	or to carry on, directly or indire	ectly,			
any voter registration drive?		Ye	es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	5?	Ye	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization					
509(a)(1), (2), or (3), or section 4940(d)(2)?		Y€	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or f	• —			
the prevention of cruelty to children or animals?	,		es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	ider the exceptions described i				
section 53 4945 or in a current notice regarding disaster assistance (see instri	<u>-</u>	<b>g</b>	N/A	5b	- [
Organizations relying on a current notice regarding disaster assistance check	· ·				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption		ined	_		
expenditure responsibility for the grant?			es 🗆 No		
If "Yes," attach the statement required by Regulations section 53.494					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to					
a personal benefit contract?	End brannerine all		es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870.			<u> </u>		
7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?		es X No		
b if "Yes," did the foundation receive any proceeds or have any net income attrib			N/A	7b	
Information About Officers, Directors, Trust		nagers, Highly	у		
Faid Employees, and Contractors					
List all officers, directors, trustees, foundation managers and their		14.20	/-n		
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e)	Expense unt, other
	to position	(enter -0-)	compensation	allo	owances
JASON C. DIES	PRESIDENT				
54 BERMUDA ROAD			_		
VESTPORT, CT 06880	0.00	0.	0.	<u> </u>	0.
JEAN DIES	SECRETARY				
21 EDGEWOOD STREET		_			_
NEEDHAM, MA 02492	0.00	0.	0.		0.
BRIAN E. DIES	TREASURER				
21 EDGEWOOD STREET			_		
NEEDHAM, MA 02492	0.00	0.	0.	1	0.
JEREMY J. DIES	VICE PRESIDEN	T	ĺ		
4 BERMUDA ROAD	_				
VESTPORT, CT 06880	0.00	0.	0.		0.
Compensation of five highest-paid employees (other than those in	1	enter "NONE."	(d) Contributions to	1 (-)	<u></u>
(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	acco	Expense unt, other
NONE	devoted to position		compensation	allo	owances
NONE	-				
	-				
				-	
	-				
	<u></u>			-	
	-				
				<del> </del>	
				-	
atal number of other ampleyees paid our \$50,000		<u> </u>	<u> </u>	<u> </u>	

Form 990-PF (2011) DIES FAMILY FOUNDATION INC	5 <u>5</u> –0	)828992 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "I	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		<b>▶</b>   0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistica number of organizations and other beneficiaries served, conferences convened, research papers produc		Expenses
1 N/A		
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 line  1 N/A	es 1 and 2	Amount
1 N/A		
2		
All other program-related investments See instructions  3		
Total. Add lines 1 through 3	<b>&gt;</b>	0.
		Form <b>990-PF</b> (2011)

Page 8

DIES FAMILY FOUNDATION INC

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		
а	Average monthly fair market value of securities	1a	473,812.
b	Average of monthly cash balances	1b	473,812. 31,798.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	10	505,610.
e	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	505,610.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	7,584.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	498,026.
6	Minimum investment return. Enter 5% of line 5	6	24,901.
=	pistributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	•
1	Minimum investment return from Part X, line 6	1	24,901.
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)		
C	Add lines 2a and 2b	2c	235.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	235. 24,666.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	24,666.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	24,666.
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	24,186.
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	
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	24,186.
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	235. 23,951.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	23,951.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years	qualifies for th	ie section

Form **990-PF** (2011)

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

	(a) Corpus	(b) Years prior to 2010	(c) 2010	<b>(d)</b> 2011
1 Distributable amount for 2011 from Part XI, line 7				24,666.
2 Undistributed income, if any, as of the end of 2011	"			
a Enter amount for 2010 only	-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		20,904.	<u>, , , , , , , , , , , , , , , , , , , </u>
h Total for prior years				
3 Excess distributions carryover, if any, to 2011	·····	0.		Mr. 'Alali'Me 'I'I. I
a From 2006				
b From 2007				
c From 2008				
d From 2009				
e From 2010				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2011 from			····	***************************************
Part XII, line 4 ►\$ 24, 186.				
a Applied to 2010, but not more than line 2a			20,904.	
b Applied to undistributed income of prior	· · · · · · · · · · · · · · · · · · ·			H7:1:114311111111111111111111111111111111
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus			· · · · · · · · · · · · · · · · · · ·	1. '' '!!!!!!!!!!!!!!!!!.! i
(Election required - see instructions)	0.			
d Applied to 2011 distributable amount				3,282.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2010 Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2011 Subtract				
lines 4d and 5 from line 1. This amount must				21 204
be distributed in 2012				21,384.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	0.			
section 170(b)(1)(F) or 4942(g)(3)  8 Excess distributions carryover from 2006	- 0.			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2012.				
Subtract lines 7 and 8 from line 6a	0.			
O Analysis of line 9				
a Excess from 2007				
b Excess from 2008				
c Excess from 2009				
d Excess from 2010				
e Excess from 2011	***			

	MILY FOUND				328992 Page 1 <b>0</b>
Part XIV Private Operating F				N/A	
1 a If the foundation has received a ruling o			1		
foundation, and the ruling is effective for	r 2011, enter the date o	f the ruling	<b>▶</b> <u> </u>	· · · · · · · · · · · · · · · · · · ·	<del></del>
b Check box to indicate whether the found		ting foundation described		4942(j)(3) or4	1942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	1	<del>.</del>
income from Part I or the minimum	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
investment return from Part X for					
each year listed	_				
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon a "Assets" alternative test - enter (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info			if the foundation	n had \$5,000 or m	ore in assets
at any time during t	he year-see ins	tructions.)			
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation who year (but only if they have contributed m			ntributions received by the	foundation before the cl	ose of any tax
NONE					
b List any managers of the foundation who other entity) of which the foundation has			or an equally large porti	on of the ownership of a	partnership or
NONE					
2 Information Regarding Contribution	on, Grant, Gift, Loa	n, Scholarship, etc., f	Programs:		
Check here  if the foundation of the foundation makes gifts, grants, etc.			e organizations and does i under other conditions, c		
a The name, address, and telephone numb	per of the person to wh	om applications should b	e addressed		
SEE STATEMENT 9					
b The form in which applications should be	e submitted and inform	ation and materials they	should include		
c Any submission deadlines					
d Any restrictions or limitations on awards	, such as by geographi	cal areas, charitable field	s, kınds of ınstıtutıons, or	other factors	

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager or substantial contributor Name and address (home or business) recipient a Paid during the year PUBLIC CHARITY CHARITABLE EDGE OF SEVEN NONE PO BOX 372392 DENVER, CO 80237 3,000. HOME FOR THE BRAVE NONE PUBLIC CHARITY CHARITABLE 665 PARK AVE BRIDGEPORT, CT 06604 5,000. HORIZONS FOR HOMELESS CHILDREN NONE PUBLIC CHARITY CHARITABLE 1705 COLUMBUS AVENUE ROXBURY, MA 02119 3,000. ADENOID CYSTIC CARCINOMA RESEARCH PUBLIC CHARITY CHARITABLE NONE FOUNDATION PO BOX 442 NEEDHAM, MA 02494 5,000. YEAR UP PUBLIC CHARITY CHARITABLE NONE 93 SUMMER STREET BOSTON, MA\_02110 3,000. SEE CONTINUATION SHEET(S) ▶ 3a 23,014. Total b Approved for future payment NONE Total

101111000 11 (2011)									
Part XVI-A Analysis of Income-Producing Activities									
Enter gross amounts	unless otherwise indicated	Unrelated business income	Excluded by section 512, 513, or 514						

Enter gross amounts unless otherwise indicated		business income		by section 512, 513, or 514	(e)
1 Program service revenue	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
	Code		+		<del></del>
b			+ +		
c	1	<del>-</del>	-		·
d	l l		<del>                                     </del>		
e	1		<del>                                     </del>	<del></del>	
f					·····
g Fees and contracts from government agencies					<u> </u>
2 Membership dues and assessments				<del></del>	
3 Interest on savings and temporary cash		<del></del>			<del></del>
investments			14	6.	
4 Dividends and interest from securities			18	5,987.	
5 Net rental income or (loss) from real estate		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<del>  </del>		············
a Debt-financed property					
b Not debt-financed property			+		
6 Net rental income or (loss) from personal			_		
property					
7 Other investment income			1		
8 Gain or (loss) from sales of assets other					•
than inventory			18	17,594.	
9 Net income or (loss) from special events		•			<del> </del>
O Gross profit or (loss) from sales of inventory					
11 Other revenue					
3					
b					
c	1 1				
d	1 1				
e					
2 Subtotal Add columns (b), (d), and (e)		0		23,587.	
3 Total. Add line 12, columns (b), (d), and (e)	1		<u>'</u>		23,587
See worksheet in line 13 instructions to verify calculations	)				
Part XVI-B Relationship of Activities		mplishment of E	Exempt P	urposes	
Line No. Explain below how each activity for which ii					olishment of
the foundation's exempt purposes (other th	nan by providing fun	ds for such purposes)			
				<u>.</u>	
			<del></del>		
			-		
	••				
<del></del>					
		<del> </del>			
		<u> </u>			
				<del></del> -	
<del></del>			_	· · · · · · · · · · · · · · · · · · ·	

Pa	rt XVI	Information Re Exempt Organ	egarding Transfers To	and Transactions a	nd Relationship	s With Nonchari	table	•	
1	Did the		rectly engage in any of the followi	ing with any other organization	n described in section	501(c) of		Yes	No
			(3) organizations) or in section 5			301(0) 01		.03	.110
			ation to a noncharitable exempt o	• • •	200000				
	(1) Cas		, , , , , , , , , , , , , , , , , , ,	. 5			1a(1)		X
	٠,	ier assets				l	1a(2)		Х
b	Other tr	ansactions							
	(1) Sal	es of assets to a noncharital	ble exempt organization				16(1)		X
	(2) Pui	rchases of assets from a nor	ncharitable exempt organization				1b(2)		X
	(3) Rer	ntal of facilities, equipment, (	or other assets				1b(3)		X
	(4) Rei	mbursement arrangements			•		1b(4)		X
	( <b>5</b> ) Loa	ans or loan guarantees .					1b(5)	<u>.</u>	X
	(6) Per	rformance of services or me	mbership or fundraising solicitati	ions			1b(6)		X
C	Sharing	of facilities, equipment, mai	iling lists, other assets, or paid er	mployees			10		X
	or servi	ces given by the reporting fo	"Yes," complete the following sch oundation If the foundation recei- other assets, or services received	ved less than fair market value	•	· · · · · · · · · · · · · · · · · · ·		ets,	
	ne no	(b) Amount involved	(c) Name of noncharitab		(d) Description of t	ransfers, transactions, and sh	anng an	angeme	nts
		<del></del>	N/A						
			<u> </u>						
		· · · · · · · · · · · · · · · · · · ·	- · · · · · · · · · · · · ·						
								_	
				<del></del>					
			<u> </u>						
	ın sectio		rly affiliated with, or related to, on than section 501(c)(3)) or in sec edule		ations described		] Yes	X	] No
		(a) Name of org		(b) Type of organization	(c)	Description of relationship	)		
		N/A							
					-				
Sig He	n re		that I have examined this return, including the Declaration of preparer (other the	an taxpayer) is based on all informa	TREASUR	any knowledge May t return showl	he IRS d with the below Yes	prepar	er
	31	<del></del>	ma Dana	Date	Title Ch	eck If PTIN			
		Print/Type preparer's na							
D-:		ATAN TO TAN	TEDDE CDANTAN I		•	lf-employed_   _	112	727	
Pai D			IERRE CPAALAN V	08/24/12	P00 irm's EIN ► 04-26				
	parei Only							סס	
US			SECOND AVENUE	<del></del>					
				hone no 781-4	55_	1 / 0	Λ		
		INE.	<u>EDHAM, MA 02494</u>		hone no	<u> </u>	T 4 0	<u> </u>	

FORM 990-PF	OTHER E	XPENSES		STATEMENT 5			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM					
STATE FEES	50.		0.	50.			
TO FORM 990-PF, PG 1, LN 23	50.		0.	50.			
FORM 990-PF	OTHER INV	ESTMENTS		STATEMENT 6			
DESCRIPTION	VALUATION METHOD BOO		BOOK VALUE	FAIR MARKET VALUE			
FIDELITY MUTUAL FUNDS		COST	464,904.	434,440.			
TOTAL TO FORM 990-PF, PART II			464,904.	434,440.			

Part XV Supplementary Information Grants and Contributions Paid During the	Year (Continuation)	<del></del>		<u> </u>
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
RIENDS OF CHRIST IN INDIA	NONE	PUBLIC CHARITY	CHARITABLE	
045 OLD ACADAMEY ROAD				
AIRFIELD, CT 06824				3,00
ORLD VISION	NONE	PUBLIC CHARITY	CHARITABLE	
OD BOX 9716 EDERAL WAY, WA 98063				1,01
EDERAL WAI, WA 30003				1,01
<del> </del>				
				_
Total from continuation sheets				4,01

FORM 990-PF INTEREST ON SAVI	INGS A	ND TEM	PORARY CA	ASH IN	IVESTMENTS	STATEMENT	1
SOURCE						AMOUNT	
AMERIPRISE FINANCIAL (ACCT#313 AMERIPRISE FINANCIAL (ACCT#497		6. 0.					
TOTAL TO FORM 990-PF, PART I,	LINE	3, CO	LUMN A				6.
FORM 990-PF DIVIDEND	S AND	INTER	EST FROM	SECUE	RITIES	STATEMENT	2
SOURCE		GROSS	AMOUNT		ITAL GAINS	COLUMN (A	A)
AMERIPRISE FINANCIAL(ACCT#31359813)			12,076.		6,089.	5,9	987.
TOTAL TO FM 990-PF, PART I, LN 4			12,076. 6,089.		5,987.		
FORM 990-PF	AC	COUNTI	NG FEES			STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS	SES NET INVEST- ADJUSTEI				
ACCOUNTING FEES	•	1,035.		0.		1,0	35.
TO FORM 990-PF, PG 1, LN 16B		1,035.		0.		1,0	35.
FORM 990-PF			ES	·····	<del></del>	STATEMENT	4
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVI MENT INC	EST-	(C) ADJUSTED NET INCOM		
FOREIGN TAXES FEDERAL TAXES		131. 87.		131.			0. 87.
TO FORM 990-PF, PG 1, LN 18		_218.		_131.			87

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

9

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

BRIAN E. DIES 21 EDGEWOOD STREET NEEDHAM, MA 02492

TELEPHONE NUMBER

617-758-0500

FORM AND CONTENT OF APPLICATIONS

WRITTEN APPLICATION SETTING FORTH FUNCTION OF THE NON-PROFIT ORGANIZATION AND THE PURPOSE AND/OR SCOPE OF THE STUDY FOR WHICH THE GRANT IS REQUESTED.

ANY SUBMISSION DEADLINES

N/A

RESTRICTIONS AND LIMITATIONS ON AWARDS

N/A

#### Form **8868**

(Rev January 2012)

Department of the Treasury Internal Revenue Service

#### Application for Extension of Time To File an **Exempt Organization Return**

► File a separate application for each return.

OMB No 1545-1709

Form 8868 (Rev 1-2012)

 $\triangleright$   $\mathbf{X}$  If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs gov/efile and click on e-file for Charities & Nonprofits. Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Type or Name of exempt organization or other filer, see instructions Employer identification number (EIN) or print 55-0828992 DIES FAMILY FOUNDATION INC File by the Number, street, and room or suite no. If a P O. box, see instructions. Social security number (SSN) filing your PO BOX 2299 return See City, town or post office, state, and ZIP code. For a foreign address, see instructions instructions WESTPORT, CT 06880 Enter the Return code for the return that this application is for (file a separate application for each return) **Application** Return Application Return Code ls For Code Is For Form 990 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A O8 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 BRIAN DIES The books are in the care of  $\triangleright$  21 EDGEWOOD STREET - NEEDHAM, MA 02492 Telephone No ► 617-758-0500 FAX No. 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, 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 is for I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2012 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2011 or tax year beginning If the tax year entered in line 1 is for less than 12 months, check reason Initial return Change in accounting period 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 If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and b estimated tax payments made. Include any prior year overpayment allowed as a credit 3b Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 1-	2012)					Page 2			
<ul> <li>If you are filing for</li> </ul>	or an Additional (Not Automatic) 3-Month Ex	ctension, c	complete only Part II and check this	box		ightharpoonup X			
Note. Only comple	te Part II if you have already been granted an a	automatic	3-month extension on a previously file	ed Form	8868.				
<ul> <li>If you are filing for</li> </ul>	or an Automatic 3-Month Extension, comple	te only Pa	rt I (on page 1)						
Part II Ad	<u>ditional (Not Automatic) 3-Month E</u>	xtensio	n of Time. Only file the origin	al (no c	opies nee	eded).			
			Enter filer's	identifyi	ng number,	see instructions			
Type or Name	of exempt organization or other filer, see instru	ictions		Employer identification number (EIN) or					
print									
File by the DIES	FAMILY FOUNDATION INC		X 55-0828992						
due date for Numbe	er, street, and room or suite no. If a P.O. box, s	Social se	curity numb	er (SSN)					
filing your return See PO BO	OX 2299								
Instructions City, to	own or post office, state, and ZIP code. For a f								
	PORT, CT 06880								
					•				
Enter the Return or	ode for the return that this application is for (file	e a separa	te application for each return)			0 4			
	The second secon								
Application		Return	Application			Return			
Is For		Code	Is For			Code			
Form 990		01							
Form 990-BL		02	Form 1041-A		********	08			
Form 990-EZ		01	Form 4720			09			
Form 990-PF		04	Form 5227	10					
	01(a) or 408(a) trust)	05	Form 6069			11			
Form 990-T (trust o		06	Form 8870			12			
	nplete Part II if you were not already granted		•	ough file	d Form 88				
91011201101001	BRIAN E. DIES	a un uuton	natio o month extension on a previ	ously in	201 01111 001	<del>~.</del>			
The books are in	the care of <b>&gt;</b> 21 EDGEWOOD ST	REET .	NEEDHAM, MA 02492	)					
	► 617-758-0500		FAX No. ▶	<u>-                                      </u>					
	on does not have an office or place of busines	e in the l lr				▶ □			
	oup Return, enter the organization's four digit			thic is fo	r tha whala	aroup about this			
	is for part of the group, check this box	_	ich a list with the names and EINs of						
			BER 15, 2012.	all mem.	ers the exte	erision is for.			
	additional 3-month extension of time until year 2011, or other tax year beginning	INO A PINI	<u> </u>						
		. L I	, and ending	_		·			
`	r entered in line 5 is for less than 12 months, o	neck reas	on: L initial return L_	_ Final ı	eturn				
_	Change in accounting period								
	State in detail why you need the extension ADDITIONAL TIME NEEDED TO GATHER SUFFICIENT INFORMATION TO PREPARE A								
	COMPLETE AND ACCURATE RETURN								
COMPLE	TE AND ACCORATE RETORN								
On If this applies	Attack to few Forms 000 DL 000 DE 000 T 4700	0000							
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720,		or 6069, e	nter the tentative tax, less any	8a		0.			
	le credits. See instructions.	PF, 990-T, 4720, or 6069, enter any refundable credits and estimated			\$				
	s made. Include any prior year overpayment al	-		0.					
	nth Form 8868.	8ь	\$	<u>U•</u>					
	Subtract line 8b from line 8a. Include your pa	-	n this form, if required, by using		_	0			
	ronic Federal Tax Payment System). See instr			8c_		0.			
	Olaman 137 '7"								
EFTPS (Elect	_		st be completed for Part II o	_					
EFTPS (Elect	rjury, I declare that I have examined this form, includ	ling accomp		_	f my knowled	ge and belief,			
EFTPS (Elect	rjury, I declare that I have examined this form, include complete, and that I am authorized to prepare this fo	ling accomp	panying schedules and statements, and to	_		ge and belief,			