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Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
on may be able to use a copy of this return to satisfy state rep

OMB No 1545-0052

2011

inte	emai Ke	evenue Service Note. The foundation in	nay be	able 1					require	ments j		<u>'</u>	
		lendar year 2011 or tax year beginnin				/01, <b>2011</b> ,	and endi	ng			03/31, 2	012	
	Name	of foundation THE ROBERT F STO	ICO/	'FIRS	STFED CHAR	ITABLE		Α	Employe	r identific	ation number		
	FOU	NDATION						-	04-33	34352	9		
	Numb	per and street (or P O box number if mail is not o	delivere	ed to stre	eet address)	Room/suite			e B Telephone number (see instructions)				
		• • • • • • • • • • • • • • • • • • • •			,				(508) 679-8181				
	PΩ	. BOX 438								(00	0, 0.5 020	-	
_						····		_		<u> </u>			
	City 0	r town, state, and ZIP code						ما					
								١	If exempti pending, c	on applicat check here	ion is	<b>-</b>	
_	SWA	NSEA, MA 02777											
G	Che	ck all that apply Initial return			∐ Initial return ∈	of a former p	ublic char	ity D	1. Foreign	organizati	ons, check here . I	▶	
		Final return			Amended ref	turn					ions meeting the		
		Address chang	ie		Name change	e				st, check hatation	ere and attach	▶□	
Н	Che			)(3) ex	xempt private f				•				
ï	$\neg$	ection 4947(a)(1) nonexempt charitable true			ther taxable pr		lion				status was terminated		
1					method Ca						(1)(A), check here .		
•		1 (	_	-		asii Lii Acc	iluai	1			in a 60-month terminati		
	-	ear (from Part II, col (c), line  ▶ \$ 15,695,066. (Pa			ecify) (d) must be on				under sec	110N 507(D)	(1)(B), check here		
				Olullill	i (a) must be on	casii basis )							
Ŀ	ari .	Analysis of Revenue and Expenses	The	(a) F	Revenue and	(b) Net inve	estment	(c) A	djusted	net	(d) Disbursem for charitab		
		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in			penses per	incom			ncome	.,	purposes	16	
		column (a) (see instructions) )			books						(cash basis o	nly)	
	1	Contributions, gifts, grants, etc., received (attach schedule	e) . [									1	
İ	2	Check Lift the foundation is not required attach Sch B	to	٠.,	· ~, <sup>†</sup>	**				• ,*		1.4	
	3	Interest on savings and temporary cash investmen	- 1		·								
	4	Dividends and interest from securities			201,758.	20	1,758.				ATCH 1	i	
	-				·		<u> </u>						
		Gross rents	- 1					15%					
		Net rental income or (loss)	- 1	**	-13,660.			1514		17. /			
ne	6a Net gain or (loss) from sale of assets not on line 1 b Gross sales price for all 201 - 61		10. F		-13,000.					DEC	'EIVED		
″Reyenue	b	Gross sales price for all assets on line 6a 201, 63	38.			_			<u> </u>	תבע	EIVED		
9	7	Capital gain net income (from Part IV, line 2	2) . 📙			7	2,568.		-lo				
$\mathbb{Z}_{\ell}$	8	Net short-term capital gain	L						10	SEP	<b>1 3</b> 2012		
2	9	Income modifications · · · · · · · ·	L		. '				191	٠ <u>٠</u> .		SS	
	10 a	Gross sales less returns and allowances · · · · ·							1 -			=	
	h	Less Cost of goods sold								OGL	EN, UT		
ر		Gross profit or (loss) (attach schedule)											
2		Other income (attach schedule)									,		
СD		Total. Add lines 1 through 11			188,098.	27	4,326.		••	0		<del>i</del>	
-		<del></del>	$\overline{}$		103,941.		7,057.					5,884	
_		Compensation of officers, directors, trustees, etc				<del> </del>	, , , , ,						
	14	Other employee salaries and wages	$\cdot \cdot \mid$		13,093.			<del>.</del>			1 :	3,093	
186	15	Pension plans, employee benefits	• •  -		13,093.			-			1.	, 0 3 3	
Operating and Administrative Expérisés	16a	Legal fees (attach schedule)	-		0.000							- 000	
ŭ	b	Accounting fees (attach schedule)  Other professional fees (attach schedule)			26,920.							5,920	
ě	С	Other professional fees (attach schedule).	*		20,481.						20	0,481	
Ŧ	17	Interest ATTACHMENT 4			22,526.	2	2,526.						
ş	18	Taxes (attach schedule) (see instructions)	**		7,377.				<del></del>			7 <b>,</b> 531.	
ਵ	19	Depreciation (attach schedule) and depleting	on		1,672.								
퉏	20	, , ,	~"" <b>·</b>		18,179.						18	3,179.	
⋖		Travel conferences and meetings	⊦		•								
Ē	21	Travel, conferences, and meetings			-								
g	22	Printing and publications ATCH			19,931.						1 (	9,931	
ξ.	23	Other expenses (attach schedule) ATCH.	- 1		13,331.	<del></del>					1:	, , , , , , ,	
ī	24	Total operating and administrative expens	ses.		024 105	_	0 500				, _ ,		
鱼		Add lines 13 through 23	<u>L</u>		234,120.	5	9,583.					3,019	
J	25	Contributions, gifts, grants paid	L		472,347.							2,347	
_	26	Total expenses and disbursements. Add lines 24 and	1 25		706,467.	5	9,583.			0	645	5,366	
	27	Subtract line 26 from line 12	Т								<del></del> _		
	l	Excess of revenue over expenses and disbursements	-		-518,369.							-	
	I	Net investment income (if negative, enter	. <u></u> ;			21	4,743.						
	l	Adjusted net income (if negative, enter -0-								0			
	ıc	Aujusteu net meome (n negative, enter -0-	/· · l			L		_			1	!	

For Paperwork Reduction Act Notice, see instructions 1E1410 1 000 69314Q 2912 8/9/2012 9:33:

9:33:51 AM V 11-5

\*ATCH 3 JSA \*\* ATCH 5 Form 990-PF (2011)

Part I	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	Eng	End of year	
	_ Darance Officets	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value	
1	Cash - non-interest-bear	ing	17,212.	12,334	12,334	
2 ,	Savings and temporary	cash investments				
3	Accounts receivable ▶					
	Less allowance for dou	btful accounts ▶				
4						
		btful accounts ▶				
5						
6		officers, directors, trustees, and other				
•		tach schedule) (see instructions)				
7		receivable (attach schedule)		,	1	
'		btful accounts ▶				
8				···	-	
<u>اي</u>	Dranged expenses and d	eferred charges	35,709.	22,698	3. 22,69	
9			,	<u> </u>		
		e government obligations (attach schedule)	11,774,247.	12,146,322	2. 12,146,32	
	•		20.	20		
11 °	Investments - land, building and equipment basis Less accumulated deprecia					
4.0	(attach schedule)	i		•••		
12	Investments - mongage	loans ATCH 10	3,572,095.	3,513,512	2. 3,513,51	
14		27,477.		·	-	
	equipment basis Less accumulated deprecia	ation > 27,477.	1,672.			
15	(attach schedule)	▶ ATCH 11 )	180.	180	). 18	
16	Total assets (to be	completed by all filers - see the			-	
16		page 1, item l)	15,401,135.	15,695,066	5. 15,695,06	
1			35,331.	38,691		
17		accrued expenses	30,0021			
18						
19						
20		ors, trustees, and other disqualified persons	583,556.	876,323	ATCH 12	
20 21		otes payable (attach schedule)	93,054.	103,175		
22	Other liabilities (describ	e ►ATCH_13_)	93,034.	103,170	<del>'</del>	
			711,941.	1,018,189	,	
23		es 17 through 22)	/11,941.	1,010,103	<del>"</del>	
24	and complete lines	llow SFAS 117, check here $\blacktriangleright X$ 24 through 26 and lines 30 and 31.	14,689,194.	14,676,877	7	
24		· · · · · · · · · · · · · · · · · · ·		= 2, 2. 0, 0 / /		
25 25 26					=	
26	•		~			
	check here and con	not follow SFAS 117, nplete lines 27 through 31. ▶			,	
27		cipal, or current funds			_	
28	-	or land, bidg , and equipment fund		·		
28 29	• .	ulated income, endowment, or other funds	14,689,194.	14,676,877	7-	
30 2 31		d balances (see instructions)	13,000,103.	14,070,07	<del></del>	
Z 31		net assets/fund balances (see	15,401,135.	15,695,066	5	
D 1		anges in Net Accets or Fund I		13,093,000	Y•	
		anges in Net Assets or Fund I			···T	
		palances at beginning of year - Part			14,689,19	
		d on prior year's return)			510.00	
Ent	er amount from Part I,	line 27a		2		
		ded in line 2 (itemize) $ ightharpoons \_ATTACHI$	MENT 14		11.000.00	
	I lines 1, 2, and 3				<del></del>	
	creases not included in			5	14 676 07	
Tot:	al net assets or fund b	alances at end of year (line 4 minus l	ine 5) - Part II, column (b),	line 30 6	14,676,87	

Part IV Capital Gains	s and Losses for Tax on Inve	estment Income			
(a) List an 2-story b	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )		
1a SEE PART IV SCHI	orick warehouse; or common stock, 200 s		- S-		
b					
С					
d					
<u>e</u>	<u> </u>				<u></u> _
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mine	
<u>a</u>					
<u>b</u>					
<u> </u>			<del>  -</del>		
d			-		
e		10/04/00			
Complete only for assets	s showing gain in column (h) and owned			Gains (Col (h) g	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col. (j), if any		Losses (from co	
_a	_		ļ		
_b			-		
С	-				<del></del>
<u>d</u>	<del>                                     </del>			-	-
<u>e</u>	15	december of Dort Line 7			
2 Capital gain net income o		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		72,568.
2. Not short term capital gai	ان ہے) n or (loss) as defined in sections 12				, _ , _ , _ ,
	art I, line 8, column (c) (see instr				
•		1	3		0
	Under Section 4940(e) for Rec		<del> </del>		
	r the section 4942 tax on the distrib		ase perio	d?	Yes X No
	s not qualify under section 4940(e)		a ony ont	706	
1 Enter the appropriate an	nount in each column for each year		g arry enu I	(d)	
Base period years	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution r	
Calendar year (or tax year beginning in) 2010	469,877.	13,354,741.		(cor (b) divided b	0.035184
2009	691,294.	9,519,746.			0.072617
2008	1,219,802.	13,293,926.			0.091756
2007	1,403,411.	25,070,716.			0.055978
2006	1,178,150.	29,415,805.			0.040052
2 Total of line 1, column (c	(1)		2		0.295587
	o for the 5-year base period - divide	e the total on line 2 by 5, or by the			
	ndation has been in existence if less		3	<u> </u>	0.059117
4 Enter the net value of no	oncharitable-use assets for 2011 fro	om Part X, line 5	4	14,	220,951.
5 Multiply line 4 by line 3			5		840,700.
6 Enter 1% of net investm	ent income (1% of Part I, line 27b)		6		2,147.
7 Add lines 5 and 6			7		842,847.
	ions from Part XII, line 4		8 that part	using a 1% ta	645,366. ix rate See th
Part VI instructions					

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	struc	tions	)
1a	Exempt operating foundations described in section 4940(d)(2), check here			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		4,2	295.
	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-) 2		4 0	NO.E
	Add lines 1 and 2		4,2	295.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4		4 2	95.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		4,2	.95.
6	Credits/Payments 2011 estimated tax payments and 2010 overpayment credited to 2011  6a 22, 688.			1
				1
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868) 6c			İ
	Backup withholding erroneously withheld		22,6	J
7	Total credits and payments Add lines 6a through 6d		22,0	
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		18,3	202
10	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed  Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  Enter the amount of line 10 to be Credited to 2012 estimated tax   18,393 Refunded  11		10,	
	Enter the amount of line 10 to be Credited to 2012 estimated tax ► 18,393 Refunded ► 11   t VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate		Yes	No
та		1a	163	X
	or intervene in any political campaign?	ıa		
D		1 b		х
	Instructions for definition)?	1.0		.,
	distributed by the foundation in connection with the activities	:		
	Dilities from Addition file From Addition to 1990.	1 c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
ŭ	(1) On the foundation  \$\\$	,		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
·	on foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
_	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of		,	,
-	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
b	Market Britania (St. 1) and the second of th	4 b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	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	X	
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	X	
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	DE, MA,			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		<del></del>	<u></u>
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8 b	Х	ļ
9	is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	<u></u>	<u> </u>	
	4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete			,,
	Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			
	and addresses	10	<u>.</u>	X

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 if the

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

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X

Х

Par	t VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Requ	ired (continued)			_		
5 a	During the year did the foundation pay or incur any amou	nt to					٦		
	(1) Carry on propaganda, or otherwise attempt to influer		4945(e))?	. Yes X No	,	ļ	Į		
	(2) Influence the outcome of any specific public ele	• •	( ,,				-		
	directly or indirectly, any voter registration drive?								
	(3) Provide a grant to an individual for travel, study, or other			[ [1	1 1				
	•				'		1		
	(4) Provide a grant to an organization other than a	-					١		
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (s			· — —	'		-		
	(5) Provide for any purpose other than religious, ch	· · ·	• •				-		
	purposes, or for the prevention of cruelty to children of						-		
b	If any answer is "Yes" to 5a(1)-(5), did any of the	transactions fail to	qualify under the e	xceptions described in	ا ا		╛		
	Regulations section 53 4945 or in a current notice regard	ing disaster assistanc	e (see instructions)?	<u></u>	5b		_		
	Organizations relying on a current notice regarding disast	er assistance check h	ere	▶ 🔲	,	ļ	Į		
С	If the answer is "Yes" to question 5a(4), does the	foundation claim ex	emption from the ta	x			1		
	because it maintained expenditure responsibility for the gi	rant?		Yes No	,		1		
	If "Yes," attach the statement required by Regulations sec						-		
6.2	Did the foundation, during the year, receive any fund		ctly to nay premium	c			1		
vu	on a personal benefit contract?	<del>-</del>	· · · · ·	Yes X No			1		
h				. — —	6 b	X	نہ		
	Did the foundation, during the year, pay premiums, direct	city of indirectly, on a p	bersonal benefit contrac	a,			٦		
_	If "Yes" to 6b, file Form 8870			□ <b>▽</b> .		,	1		
	At any time during the tax year, was the foundation a pa	•	•				١		
	If "Yes," did the foundation receive any proceeds or have type Information About Officers, Directors				7b		_		
Pal	t VIII Information About Officers, Directors and Contractors	, Trustees, roun	uation managers,	mighty Paid Emplo	byees,				
1	List all officers, directors, trustees, foundation n	nanagers and their	compensation (see	instructions).			_		
	(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 other allo		_		
AT'	FACHMENT 15		103,941.	12,398.			0		
	*								
							_		
							_		
2	Compensation of five highest-paid employees "NONE."	(other than thos	e included on lin	e 1 - see instruction	ons). If no	ne, ente	r		
(a	Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allo		_		
	NONE								
							_		
							-		
						<del>_</del>	-		
<b>-</b>									
			<u>-</u>				_		
_	I number of other employees paid over \$50,000	l	<del> </del>			<del>                                     </del>	_		

Form 990-PF (2011) Page 7 Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, Part VIII and Contractors (continued) Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE." (c) Compensation (a) Name and address of each person paid more than \$50,000 (b) Type of service NONE 0 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 activities during the tax year. Include relevant statistical information such as the number of Expenses organizations and other beneficianes served, conferences convened, research papers produced, etc Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 N/A All other program-related investments. See instructions 3 NONE

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Total. Add lines 1 through 3.

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foresee instructions.)	eign founda	tions,
ı	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
_	· ·	Service 1	14,422,740.
a h	Average monthly fair market value of securities	1a   1b	14,774.
D	Average of monthly cash balances	1c	14,774.
ن	Fair market value of all other assets (see instructions)	1d	14,437,514.
u	Total (add lines 1a, b, and c)  Reduction claimed for blockage or other factors reported on lines 1a and		14,437,314.
е		***	
,	1c (attach detailed explanation)	<u> </u>	
2	Acquisition indebtedness applicable to line 1 assets	2	14 427 514
-	Subtract line 2 from line 1d  Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see	3	14,437,514.
1			216 562
	Instructions)  Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	4	216,563.
5		5	14,220,951.
<u>;</u>	Minimum investment return. Enter 5% of line 5	. 6	711,048.
Pa	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ and do not complete this	part )	
1	Minimum investment return from Part X, line 6	1	711,048.
2a	Tax on investment income for 2011 from Part VI, line 5 2a 4, 295		
b	Income tax for 2011 (This does not include the tax from Part VI)	10. (6)	
		2c	4,295.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	706,753.
1	Recoveries of amounts treated as qualifying distributions		<u>-</u>
5	Add lines 3 and 4	1 - 1	706,753.
3	Deduction from distributable amount (see instructions)	6	
7	Deduction from distributable amount (see instructions)  Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	1 1	706,753.
Pa	art XII Qualifying Distributions (see instructions)		
Ī	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	V13,7	
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	645,366.
b	Program-related investments - total from Part IX-B	1b	
2	Program-related investments - total from Part IX-B  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.	79 12 18	
а			
b		3b	
1	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	645,366.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	,	<u> </u>
	Enter 1% of Part I, line 27b (see instructions)	5	0
3	Adjusted qualifying distributions. Subtract line 5 from line 4	6	645,366.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when concluding for the section 4940(e) reduction of tax in those years		

Form 990-PF (2011)

THE ROBERT F STOICO/FIRSTFED CHARITABLE Form 990-PF (2011) Page 9 Part XIII 'Undistributed Income (see instructions) (b) (c) (d) Years prior to 2010 2010 2011 Distributable amount for 2011 from Part XI, Corpus 706,753. Undistributed income, if any, as of the end of 2011 597,458. Enter amount for 2010 only . . . Total for prior years 20 09, 20 08, 20 07 Excess distributions carryover, if any, to 2011 a From 2006 ..... From 2007 . . . . . . c From 2008 . . . . . . d From 2009 . . . . . . e From 2010 ..... Total of lines 3a through e . . . . . . . . . . . . Qualifying distributions for 2011 from Part XII, line 4 ▶ \$ 645,366. 597,458 a Applied to 2010, but not more than line 2a . . . b Applied to undistributed income of prior years (Election required - see instructions) . . . . . . c Treated as distributions out of corpus (Election required - see instructions) . . . . . . . . . . . . 47,908. d Applied to 2011 distributable amount ..... Remaining amount distributed out of corpus . . Excess distributions carryover applied to 2011. (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: Corpus Add lines 3f, 4c, and 4e Subtract line 5 Prior years' undistributed income Subtract line 4b from line 2b Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed . . . . . . . . . . . . d Subtract line 6c from line 6b Taxable amount - see instructions . . Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount - see f Undistributed income for 2011 Subtract lines 4d and 5 from line 1. This amount must be 658,845. distributed in 2012 .......... Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)... Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions) Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a

Form 990-PF (2011)

10 Analysis of line 9

Excess from 2007 b Excess from 2008 . . . Excess from 2009 d Excess from 2010 . . . e Excess from 2011 .

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

ATTACHMENT 18

JSA
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69314Q 2912 8/9/2012 9:33:51 AM V 11-5

APPLICATIONS OR GRANT PROPOSALS MAY BE SUBMITTED THROUGH-OUT THE YEAR

Any submission deadlines

Part XV Supplementary Information (	continued)			
3 Grants and Contributions Paid Duri Recipient Name and address (home or business)	ng the Year or Appr	oved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	contribution	
a Paid during the year				
ATTACHMENT 19				
	ļ			
			:	
	}			
		}		
		1		
Total			▶ 3a	472,347.
<b>b</b> Approved for future payment		1		
b Approved for factive payment				
ATTACHMENT 20				
		j		
Total	<u> </u>		<b>▶</b> 2h	850,000.
Total	<del> </del>	<del></del>		000,000.

er gross a	amounts unless otherwise indicated	Unrela	ated business income	Excluded by	y section 512, 513, or 514	(e)
Program :	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
a						
b						
c						
d						
е						
f						
	and contracts from government agencies					
Members	thip dues and assessments					
	n savings and temporary cash investments			1	001 750	
	s and interest from securities			14	201,758.	
	I income or (loss) from real estate		,		,	
	financed property					
	ebt-financed property					
	income or (loss) from personal property			+		
	vestment income	1		18	-13 660	
•	oss) from sales of assets other than inventory			10	-13,660.	
	me or (loss) from special events			+		
	ofit or (loss) from sales of inventory			<del>                                     </del>		
	renue a			+		
		<del></del>				
d	<del></del>	<del>-</del>				
		1				
	Add solumns (b) (d) and (s)			<del>                                     </del>	188,098	
	Add columns (b), (d), and (e)	•			188,098.	188.09
Subtotal Total. Add	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calc	ulations)			13	188,09
Subtotal Total. Add e workshe	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calc	ulations) s to the Ac	complishment of Ex	kempt Purp	ooses e) of Part XVI-A contrib	uted importantly to
Subtotal Total. Add e workshe art XVI-E ne No.	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calc  Relationship of Activities  Explain below how each activity	ulations) s to the Ac	complishment of Ex	kempt Purp	ooses e) of Part XVI-A contrib	uted importantly to
Subtotal Total. Add e workshe irt XVI-E ne No.	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calc  Relationship of Activities  Explain below how each activity	ulations) s to the Ac	complishment of Ex	kempt Purp	ooses e) of Part XVI-A contrib	uted importantly to
Subtotal Total. Add e workshe rt XVI-E ne No.	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calc  Relationship of Activities  Explain below how each activity	ulations) s to the Ac	complishment of Ex	kempt Purp	ooses e) of Part XVI-A contrib	uted importantly to
Subtotal Total. Add e workshe rt XVI-E ne No.	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calc  Relationship of Activities  Explain below how each activity	ulations) s to the Ac	complishment of Ex	kempt Purp	ooses e) of Part XVI-A contrib	uted importantly to
Subtotal Fotal. Add workshe rt XVI-E	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calc  Relationship of Activities  Explain below how each activity	ulations) s to the Ac	complishment of Ex	kempt Purp	ooses e) of Part XVI-A contrib	uted importantly to
Subtotal  Total. Add  workshe  rt XVI-E  ne No.	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calc  Relationship of Activities  Explain below how each activity	ulations) s to the Ac	complishment of Ex	kempt Purp	ooses e) of Part XVI-A contrib	uted importantly to
Subtotal  Total. Add  workshe  rt XVI-E  ne No.	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calc  Relationship of Activities  Explain below how each activity	ulations) s to the Ac	complishment of Ex	kempt Purp	ooses e) of Part XVI-A contrib	uted importantly to
Subtotal Total. Add workshe rt XVI-E	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calc  Relationship of Activities  Explain below how each activity	ulations) s to the Ac	complishment of Ex	kempt Purp	ooses e) of Part XVI-A contrib	uted importantly to
Subtotal Total. Add workshe rt XVI-E	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calc  Relationship of Activities  Explain below how each activity	ulations) s to the Ac	complishment of Ex	kempt Purp	ooses e) of Part XVI-A contrib	uted importantly to
Subtotal Total. Add e workshe rt XVI-E ne No.	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calc  Relationship of Activities  Explain below how each activity	ulations) s to the Ac	complishment of Ex	kempt Purp	ooses e) of Part XVI-A contrib	uted importantly to
Subtotal Total. Add workshe rt XVI-E	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calc  Relationship of Activities  Explain below how each activity	ulations) s to the Ac	complishment of Ex	kempt Purp	ooses e) of Part XVI-A contrib	uted importantly to
Subtotal Total. Add workshe rt XVI-E	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calc  Relationship of Activities  Explain below how each activity	ulations) s to the Ac	complishment of Ex	kempt Purp	ooses e) of Part XVI-A contrib	uted importantly to
Subtotal Total. Add e workshe rt XVI-E ne No.	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calc  Relationship of Activities  Explain below how each activity	ulations) s to the Ac	complishment of Ex	kempt Purp	ooses e) of Part XVI-A contrib	uted importantly to
Subtotal Total. Add e workshe rt XVI-E ne No.	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calc  Relationship of Activities  Explain below how each activity	ulations) s to the Ac	complishment of Ex	kempt Purp	ooses e) of Part XVI-A contrib	uted importantly to
Subtotal Total. Add e workshe irt XVI-E ne No.	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calc  Relationship of Activities  Explain below how each activity	ulations) s to the Ac	complishment of Ex	kempt Purp	ooses e) of Part XVI-A contrib	uted importantly to
Subtotal Total. Add e workshe rt XVI-E ne No.	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calc  Relationship of Activities  Explain below how each activity	ulations) s to the Ac	complishment of Ex	kempt Purp	ooses e) of Part XVI-A contrib	uted importantly to
Subtotal Total. Add e workshe rt XVI-E ne No.	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calc  Relationship of Activities  Explain below how each activity	ulations) s to the Ac	complishment of Ex	kempt Purp	ooses e) of Part XVI-A contrib	uted importantly to

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations Part XVII

			gage in any of the following			Yes No
		ode (other than sec	ction 501(c)(3) organization	ons) or in section 527,	relating to political	
	ganızatıons?					2 4 4 4 4 4 A
	•	-	noncharitable exempt org			
						1a(1) X
				• • • • • • • • • • • •		14(2)
	ther transactions					1
			organization			1b(1) X
			exempt organization			1b(2) X
			sets			1b(3) X
						1b(4) X
						1b(5) X
•	•		or fundraising solicitations			10(0)
		-	other assets, or paid empl	-		
			complete the following			
	•	·	given by the reporting to			
	<u> </u>	<del></del>	nent, show in column (d)			<del></del>
(a) Line		(c) Name of nonc	haritable exempt organization	N/A	sfers, transactions, and sha	nng arrangements
	N/A	<del></del>	· · · · · · · · · · · · · · · · · · ·	N/A		<del></del>
		<del> </del>	<del></del>			<del></del>
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		•	ted with, or related to, o		-	Yes X No
	•		r than section 501(c)(3))	or in section 52/7		Yes _A_ No
b it	"Yes," complete the folio		(b) Type of organization		(c) Description of relation	chin
	(a) Name of organization	J11	(b) Type of organization		(c) Description of relation	silip
	<del></del>					
<del></del>	<del></del>			<del></del>		
		<del>-</del> -	<del></del>			
	Under penalties a penury I dec	har that I have examined	this return including accompanying	schedules and statements and	to the best of my knowled	ne and belief it is true
Sign	correct, and complete Declaration of	of preparer (other than taxpa	this return, including accompanying yer) is based on all information of whi	ch preparer has any knowledge		
_		1-	> 18/30/12	CHOSIN UN +	May the IR	S discuss this return
Here	Signature of officer or trustee		Date	Title	with the p	reparer shown below
	Signature of officer of dusice	•	54.0	11110	(see instruction	ns)? A Yes No
	Print/Type preparer's	's name	Preparer's signature	Date 1	Chack	PTIN
Paid	ANTHOM T. CA		Matter of B In	L.CAD 8/8/12	CiteCk  iii	P00171579
Prepa	rer Tay	OLF & COMPANY	PC ALMAN	<del>7 · · · · · · · · · · · · · · · · · · ·</del>	Firm's EIN ▶ 04-2	
Use C	Firm's name - "	<u> </u>	<u> </u>		FILLIS EIN POT 2	
	• 1	OSTON, MA	.,	02110	Phone no 617-4	39-9700
						orm <b>990-PF</b> (2011)

THE ROBERT F STOICO/FIRSTFED CHARITABLE

04-3343529

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kind of 8	Property		Desc	ription		þή	Date	Date sold
Gross sale	Depreciation	Cost or	FMV	Adj basis	Excess of	P	acquired Gain	<del></del>
price less	allowed/	other	as of	as of	FMV over	$  \  $	or	
price less expenses of sale	allowable	basis	12/31/69	12/31/69	adj basis	Ц	(loss)	
				_				
		WEBSTER FIN				P	11/22/1996	12/08/201
		PROPERTY TY	PE: SECURI	TIES				
201,638.							201,638.	
		GENERAL MOT	ORS			P	08/10/2004	03/31/201
		PROPERTY TY		TIES			1	
		129,070.					-129,070.	
						Ш	,	
						Ш		
OTAL GAIN(I	oss)	1					72,568.	
YEAR GWIN (T	000/			• • • • • • • • • •	• • • • • • • • •		12,300.	
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SECURITIES	
FROM SECUI	
INTEREST	
AND	
DIVIDENDS	
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PART	
990PF,	
FORM	

ADJUSTED NET INCOME		
NET INVESTMENT INCOME	201,758.	201,758.
REVENUE AND EXPENSES PER BOOKS	201,758.	201,758.
		TOTAL
DESCRIPTION	DIVIDENDS AND INTEREST	

FEES	
ACCOUNTING	
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990PF	

CHARITABLE PURPOSES	26,920.	26,920.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	26,920.	26,920.
		TOTALS
DESCRIPTION	WOLF & COMPANY	

PROFESSIONAL FEES	
PROF	
OTHER	
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CHARITABLE	568.	20,481.
ADJUSTED NET INCOME	٠	
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	568. 19,913.	20,481.
DESCRIPTION	OTHER PROFESSIONAL SERVICES BAYCOAST BANK	TOTALS

EXPENSE	
INTEREST	
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CHARITABLE PURPOSES		
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	22,526.	22,526.
REVENUE AND EXPENSES PER BOOKS	22,526.	22,526.
		TOTALS
DESCRIPTION	INTEREST EXPENSE	

TAXES
1
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PART
990PF,
FORM

CHARITABLE PURPOSES	7,531.	7,531.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	7,531.	7,377.
		TOTALS
DESCRIPTION	PAYROLL TAXES DEFERRED TAX BENEFIT	

# FORM 990PF, PART I - OTHER EXPENSES

CHARITABLE	PURPOSES 1,111. 1,461.	5,364. 769.	6,273. 634.	2,986. 1,250.	83.	19,931.
ADJUSTED NET	INCOME					
NET INVESTMENT	INCOME					
REVENUE AND EXPENSES	PER BOOKS 1,111. 1,461.	5,364. 769.	6,273. 634.	2,986. 1,250.	83.	19,931.
						TOTALS
	DESCRIPTION SUPPLIES POSTAGE	INSURANCE EXPENSES OTHER EXPENSES	DUES & SUBSCRIPTIONS PAYROLL SERVICE	IT & WEB DESIGN TELEPHONE	BANK SERVICE CHARGE	

- PREPAID EXPENSES AND DEFERRED CHARGES PART II FORM 990PF,

22,698. ENDING BOOK VALUE BEGINNING BOOK VALUE DESCRIPTION

ENDING FMV

PREPAID EXPENSES

35,709. 35,709.

TOTALS

22,698.

22,698.

22,698.

### PART II - CORPORATE STOCK FORM 990PF,

ENDING <u>FMV</u>	2,489,296. 9,629,876. 27,150. 12,146,322.
ENDING BOOK VALUE	2,489,296. 9,629,876. 27,150. 12,146,322.
BEGINNING BOOK VALUE	2,428,914. 9,317,443. 27,890. 11,774,247.
	TOTALS
	CORP
DESCRIPTION	CORPORATE STOCKS WEBSTER FINANCIAL CORP PREFERRED STOCK

ATTACHMENT 8

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- CORPORATE BONDS	
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PART	
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FORM	

ENDING	20.	20.
ENDING BOOK VALUE	20.	20.
BEGINNING BOOK VALUE	20.	20.
		TOTALS
DESCRIPTION	CORPORATE BONDS	

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# FORM 990PF, PART II - OTHER INVESTMENTS

ENDING <u>FMV</u>	3,513,512.	3,513,512.
ENDING BOOK VALUE	3,513,512.	3,513,512.
BEGINNING BOOK VALUE	3,572,095.	3,572,095.
		TOTALS
DESCRIPTION	MUTUAL FUNDS	

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## FORM 990PF, PART II - OTHER ASSETS

ENDING <u>FMV</u>	180.	
ENDING BOOK VALUE	180.	
BEGINNING BOOK VALUE	180.	
DESCRIPTION	ACCRUED INTEREST RECEIVABLE TOTALS	

FORM 990PF, PART II - MORTGAGES	AND	OTHER	NOTES	PAYABLE
---------------------------------	-----	-------	-------	---------

LENDER: PAYABLE TO BROKER

583,556. ORIGINAL AMOUNT:

583,556. BEGINNING BALANCE DUE .....

876,323. ENDING BALANCE DUE .....

TOTAL BEGINNING MORTGAGES AND OTHER NOTES PAYABLE <u>583,556.</u>

TOTAL ENDING MORTGAGES AND OTHER NOTES PAYABLE 876,323.

FORM 990PF, PART II - OTHER LIABILITIES

DESCRIPTION

BEGINNING ENDING BOOK VALUE BOOK VALUE

DEFERRED TAX LIABILITY

93,054. 103,175.

TOTALS

93,054.

103,175.

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

AMOUNT

UNREALIZED GAINS ON SECURITIES

506,052.

TOTAL

506,052.

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES	
ROBERT F STOICO P.O. BOX 438 SWANSEA, MA 02777	PRESIDENT 40.00	74,114.	6,255.	0	
PETER PANAGGIO P.O. BOX 438 SWANSEA, MA 02777	TREASURER 3.00	0	0	0	
JOHN HOLDEN JR P.O. BOX 438 SWANSEA, MA 02777	DIRECTOR 1.00	0	0	0	
ANTHONY SYLVIA P.O. BOX 438 SWANSEA, MA 02777	DIRECTOR 1.00	0	0	0	
RICHARD W CEDERBERG P.O. BOX 438 SWANSEA, MA 02777	DIRECTOR 1.00	0	0	0	
GILBERT C OLIVEIRA P.O. BOX 438 SWANSEA, MA 02777	DIRECTOR 1.00	0	0	0	

_   ,				
ATTACHMENT 15 (CONT'D)	EXPENSE ACCT AND OTHER ALLOWANCES	0	0	0
ATTACH	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	0	6,143.	12,398.
	COMPENSATION	0	29,827.	103,941.
FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	DIRECTOR 1.00	EXECUTIVE DIRECTOR 22.00	GRAND TOTALS
FORM 990PF, PART VIII -	NAME AND ADDRESS	DR PAUL RAYMOND P.O. BOX 438 SWANSEA, MA 02777	CECILIA VIVEIROS P.O. BOX 438 SWANSEA, MA 02777	

### FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

ROBERT F STOCIO PO BOX 438 SWANSEA, MA 02777 508-679-8181

### 990PF, PART XV - FORM AND CONTENTS OF SUBMITTED APPLICATIONS

APPLICATIONS AVAILABLE UPON REQUEST OR CHARITY'S OWN GRANT PROPOSAL. COPY OF IRS DETERMINATION LETTER MUST BE PROVIDED.

### 990PF, PART XV - RESTRICTIONS OR LIMITATIONS ON AWARDS

QUALIFIED 501(C)(3) PUBLIC CHARITIES THAT SUPPORT THE FOUNDATION'S MISSION TO PROVIDE GRANTS IN SUPPORT OF EXPANDING HOME OWNERSHIP AND CONTRIBUTE TO THE QUALITY OF LIFE IN THE COMMUNITIES SERVED BY THE FOUNDATION.

04-3343529

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

472,347.

AMOUNT

ATTACHMENT 19

NONE

501 (C) (3)

PLEASE REFER TO LIST ATTACHED

RECIPIENT NAME AND ADDRESS

EXEMPT PURPOSE

472,347.

TOTAL CONTRIBUTIONS PAID

ATTACHMENT 19

9:33:51 AM 69314Q 2912 8/9/2012

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### THE REOBERT F. STOICO/FIRSTFED CHARITABLE FOUNDATION CHARITABLE CONTRIBUTIONS FOR THE YEAR ENDED March 31, 2012

Name	Amount
Providence Performing Arts Center	50,000
Providence Performing Arts Center	15,000
Saint Vincent's	100
University of Massachusetts	75,000
Bristol Community College Foundation	75,000
Roger Williams University	75,000
RI Zool Society - Roger Williams Zoo	50,000
Roger Williams University	1,000
Newport Hospital Foundation	500
Bishop Stang High School	7,500
Boys and Girls Club of Fall River	17,897
Swansea Police Patrolman's Association	100
Attleboro Scholarship Foundation	100
Diocese of Fall River	1,000
Catholic Charities Appeal	800
United Way of Greater Fall River	1,000
Saint Vincent's	100
Lions Club of Attleboro/Taunton	500
Rhode Island Community Food Bank	150
SouthCoast Mentoring Initiative for Learning	200
RI Zool Society - Roger Williams Zoo	26,000
Providence Performing Arts Center	15,000
Bishop Stang High School	7,500
Roger Williams University	1,000
Providence Performing Arts Center	50,000
University of Massachusetts	250
SouthCoast Mentoring Initiative for Learning	1,500
Durfee Parents Advisory Council	150
	472.347

FOR FUTURE PAYMENT	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	NOT RELATED 501(C)(3)	
FORM 990PF, PART XV - CONTRIBUTIONS APPROVED FOR FUTURE PAYMENT	RECIPIENT NAME AND ADDRESS	DETAILS UPON REQUEST	

850,000.

AMOUNT

PURPOSE OF GRANT OR CONTRIBUTION

EXEMPT PURPOSE

ATTACHMENT 20

850,000.

TOTAL CONTRIBUTIONS APPROVED

ATTACHMENT 20

9:33 51 AM

### SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

### **Capital Gains and Losses**

► Attach to Form 1041, Form 5227, or Form 990-T. See the Instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

2M11

OMB No 1545-0092

Name of estate or trust FOUNDATION THE ROBERT F STOICO/FIRSTFED CHARITABLE

Employer identification number

04-3343529

	Short-Term Capital Gains and L	(b) Date acquired	(c) Date sold		(e) Cost or other ba	2010	(f) Gain or (loss) for
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(mo, day, yr)	(mo , day, yr )	(d) Sales price	(see instructions		the entire year Subtract (e) from (d)
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	And the second s						
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h	Enter the short-term gain or (loss), if any	from Schedule D	_1 line 1h			1b	
D	enter the short-term gain or (loss), if any	, irom Schedule D	-1, IIIIe 1D		• • • • • • • •	15	
2	Short-term capital gain or (loss) from Fo	rms 4684, 6252,	6781, and 882	4	<u>.</u> _	2	
3 4	Net short-term gain or (loss) from partner Short-term capital loss carryover Enter					3	
4	Carryover Worksheet		•			4	(
5	Net short-term gain or (loss). Combin	e lines 1a throug	gh 4 in colum	n (f) Enter here ar	nd on line 13,		
_	column (3) on the back				▶	5	· · · · · · · · · · · · · · · · · · ·
a	Long-Term Capital Gains and L			nan One Year	422 02-4		(f) Gain or (loss) for
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price	(e) Cost or other b (see instructions		the entire year Subtract (e) from (d)
6a							
	-				<del>                                     </del>		
							70.560
b	Enter the long-term gain or (loss), if any,	from Schedule D-	1, line 6b		· · · · · · ·	6b	72,568
7	Long-term capital gain or (loss) from Fo	rms 2439, 4684.	6252, 6781, aı	nd 8824		7	
		, ,	, ,				
8 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts						8	
9	Capital gain distributions					9	
9	Capital gain distributions				• • • • • • • • •	,	
0	Gain from Form 4797, Part I					10	
-	Long-term capital loss carryover Ente	r the amount, if	any, from lir	ne 14 of the 2010	Capital Loss		
							/
1 2	Carryover Worksheet					11	(

Schedule D (Form 1041) 2011	_			Page 2
Part III Summary of Parts I and II		(1) Beneficiaries'	(2) Estate's	(3) Total
Caution: Read the instructions before completing this p	part.	(see instr )	or trust's	(3) Total
3 Net short-term gain or (loss)	13			
4 Net long-term gain or (loss):				
a Total for year	14a			72,568.
b Unrecaptured section 1250 gain (see line 18 of the wrksht.)	14b			
c 28% rate gain	14c			
	15			72,568.
Note: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (i				
rains, go to Part V, and <b>do not</b> complete Part IV If line 15, column (3), is a net loss, co	mpiec	e Part IV and the Capital	- Loss Carryover v	vorksneet, as necessary
Part IV Capital Loss Limitation				Τ
6 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, P	art I, I	ne 4c, if a trust), the sn		,
a The loss on line 15, column (3) or b \$3,000.  Note: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page	. <i>i</i> in	o 22 (or Form 000 T I	16	complete the Capital Loss
Carryover Worksheet in the instructions to figure your capital loss carryover	<i>5 1, 1111</i>	e 22 (or Fullit 990-1, III	16 34), IS a 1055, I	complete the Capital Doss
Part V Tax Computation Using Maximum Capital Gains Rate	s			
form 1041 filers. Complete this part only if both lines 14a and 15 in colu	mn (2	?) are gains, or an am	ount is entered	in Part I or Part II and
here is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more	e thai	n zero		
Caution: Skip this part and complete the Schedule D Tax Worksheet in the in	nstruc	ctions if		
Either line 14b, col (2) or line 14c, col (2) is more than zero, or				
Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero				ad in income in Dark I
F <b>orm 990-T trusts.</b> Complete this part <b>only</b> if both lines 14a and 15 are of Form 990-T, <b>and</b> Form 990-T, line 34, is more than zero. Skip this part a				
f either line 14b, col. (2) or line 14c, col. (2) is more than zero	110 00	implete the <b>Schedule</b>	D IAX WUIKS	neet in the instructions
	4)	47		T
Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	4) .	17		
8 Enter the smaller of line 14a or 15 in column (2)				
but not less than zero				
from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T)				
dividends included in income in Part I of Form 990-T)		<del>- </del>		
21 If the estate or trust is filing Form 4952, enter the		<del> </del>		
amount from line 4g, otherwise, enter -0 > 21				
22 Subtract line 21 from line 20 If zero or less, enter -0-		22		
23 Subtract line 22 from line 17 If zero or less, enter -0-		23		
Subtract line 22 from line 17 fr 2ero of less, enter -0-		23		
24 Enter the smaller of the amount on line 17 or \$2,300		24		
Is the amount on line 23 equal to or more than the amount on line 24		24		
Yes. Skip lines 25 and 26, go to line 27 and check the "No" box		1		
No. Enter the amount from line 23		25		
Subtract line 25 from line 24				
Are the amounts on lines 22 and 26 the same?				
Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or lin	ne 22	27		
Enter the amount from line 26 (If line 26 is blank, enter -0-)		28		
	• • •			
Subtract line 28 from line 27		29		
30 Multiply line 29 by 15% ( 15)			30	1
31 Figure the tax on the amount on line 23 Use the 2011 Tax Rate				
(see the Schedule Ginstructions in the instructions for Form 1041).			31	
•	•			
32 Add lines 30 and 31			32	
33 Figure the tax on the amount on line 17 Use the 2011 Tax Rate				
(see the Schedule Ginstructions in the instructions for Form 1041).			5	
Tax on all taxable income. Enter the smaller of line 32 or line 33 h				
G, line 1a (or Form 990-T, line 36)				
		·	_	edule D (Form 1041) 2011

Name of estate or trust as shown on Form 1041. Do not enter name and employer identification number if shown on the other side Employer identification number THE ROBERT F STOICO/FIRSTFED CHARITABLE 04-3343529 Long-Term Capital Gains and Losses - Assets Held More Than One Year (b) Date (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (e) Cost or other basis (f) Gain or (loss) Subtract (e) from (d) (c) Date sold (d) Sales pnce acquired (mo, day, yr) (see instructions) (mo , day, yr ) 6a WEBSTER FINANCIAL CORP 11/22/1996 12/08/2011 201,638. 201,638. 08/10/2004 GENERAL MOTORS 03/31/2012 129,070. -129,070. 72,568. 6b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 6b.

### Form 8868

(Rev January 2012)

Department of the Treasury Internal Revenue Service

693140 2912 8/9/2012

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

File a separate application for each return.

OMB No 1545-1709

#7687341

 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 II 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. Part I 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 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. Enter filer's identifying number, see instructions Name of exempt organization or other filer, see instructions Employer identification number (EIN) or Type or THE ROBERT F STOICO/FIRSTFED CHARITABLE print X FOUNDATION 04-3343529 File by the Number, street, and room or suite no. If a P.O. box, see instructions Social security number (SSN) due date for P.O. BOX 438 filing your City, town or post office, state, and ZIP code. For a foreign address, see instructions return See instructions SWANSEA, MA 02777 Enter the Return code for the return that this application is for (file a separate application for each return) . . . . . . . . . . . . . . . . **Application** Return Application Return Is For Code Is For Code Form 990-T (corporation) Form 990 01 07 Form 990-BL 02 Form 1041-A 80 Form 990-EZ 01 Form 4720 09 Form 990-PF 04 Form 5227 10 Form 6069 Form 990-T (sec 401(a) or 408(a) trust) 05 11 Form 8870 Form 990-T (trust other than above) 06 12 The books are in the care of ► ROBERT F. STOICO Telephone No ▶ 508 679-8181 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 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 11/15 , 20 12 , to file the exempt organization return for the organization named above. The extension is until for the organization's return for calendar year 20 or 04/01 , 2011 , and ending ► X | tax year beginning \_\_\_\_\_\_ 03/31 20 12 If the tax year entered in line 1 is for less than 12 months, check reason Initial return Change in accounting period 3a 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 4,295. 3a \$ b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit 22,688. 3b \$ c 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 Form 8868 (Rev 1-2012) For Privacy Act and Paperwork Reduction Act Notice, see Instructions. JSA 1F8054 4 000

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