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# Form **990-P**F

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

2012

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

FOI	r cai	endai	r year 2012, or ta	ax year beginning	, 2012	, and ending		,	
Ρ.	0.	BOX	AMILY FOUND	DATION			В	Employer identification null 45-2774866 Telephone number (see the	instructions)
DF	KI.	EN,	CT 06820				_	(917) _885-054	
G	Che	ck all	I that apply:	Initial return	Initial return of a fori	mar public charity	С	If exemption application is	pending, check here
_	01.10	ock un	r triat apply.	Final return	Amended return	mer public charity	D	1 Foreign organizations, che	ck here
Н		hack	type of organiza	Address change	Name change 1(c)(3) exempt private	foundation		2 Foreign organizations meethere and attach computation	ting the 85% test, check
	Ĭ	_		nonexempt charitable		private foundation	E	If private foundation status	s was terminated
T			ket value of all assets rt II, column (c), line	s at end of year J Acc	counting method: XC	ash Accrual		under section 507(b)(1)(A)	
	▶\$		84,	714. (Part 1	Other (specify) , column (d) must be o	n cash basis ) — — —	F	If the foundation is in a 60 under section 507(b)(1)(B)	-month termination ), check here
Pa	ant i		nalysis of Re	venue and total of amounts in	(a) Revenue and	(b) Net investmen	nt	(c) Adjusted net	(d) Disbursements
		co. sa.	lumns (b), (c), a rily equal the am ee instructions) )	nd (d) may not neces- nounts in column (a) )	expenses per books	income		income	for charitable purposes (cash basis only)
		1 2		grants, etc, received (att sch) undn is <b>not</b> reg to att Sch B		1. 3 4 2 2 2 3 4 4 - 0			
		3	Interest on savi	ngs and temporary	TOTAL TO THE STREET STREET	<u> 19 - 14 - 14 発表を表現を行うして</u>	21.31	Mary Mary Strand Comment of the Comm	
		4	cash investmen Dividends and intere		56.	ļ <u> </u>	6.	***	
			Gross rents Net rental income		30.		,		
ī	2		or (loss).	sale of assets not on line 10	174.				
Ē	Z		Gross sales price for assets on line 6a		356 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
Ė		7 8	Capital gain net inco Net short-term	me (from Part IV, line 2).		17	_		
į	ַ נַ	9	Income modifica	, -					
•	-	10a	Gross sales less returns and allowances.						
		b	Less Cost of goods sold				2 3 8 5 T		
			Gross profit/(loss)	(att sch). attach schedule)		MAN TO THE PROPERTY OF THE PARTY OF THE PART	\$1.5		
		• •	Other income (a	attach schedule)					Constitution (Constitution Constitution Cons
			Total. Add lines		230.	23	0.	0.	
			Other employee sala	cers, directors, trustees, etc aries and wages	0.				
				employee benefits	FOECEN	ED			
	A		Legal fees (attach se Accounting fees (att	•	NLO3	700			
	M I N		Other prof fees (atta	•	APR 2-2	2013 8			
O P	1		Interest		<b>A</b>	1.1			
SCANNED AND	S T R	18 19	Taxes (attach schedule)(se Depreciation (at	ttach	- OCPEN	L. UI			Land Curren
	Ą Į	20	sch) and deplet Occupancy	ion					
≨ ä	Ĕ	21	Travel, conferen	nces, and meetings					
	E X P		Printing and pull Other expenses	blications (attach schedule)					
	ΕI		S	<u>ee Statement 1</u>	5.		5.		
NEW .	N S E S	24	Total operating expenses. Add	and administrative lines 13 through 23.	5.		5.	<del></del>	
<b>₽</b>	Ĭ		Contributions, gifts,	grants paid Stmt 2	6,500.	A-1 1 1		1.00	6,500.
2013	_			and disbursements. d 25.	6,505.		5.	0.	6,500.
ಹ			Subtract line 26	from line 12: nue over expenses	e is the state of	7 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	*	3° , ,	- , ,
			and disburseme	ents	-6,275.	· · · · · · · · · · · · · · · · · · ·		,	.,
				me (if negative, enter -0-) (if negative, enter -0-)		22	5.		
		·	Aujustea net income	r (ii riegative, enter -U-)		I am and the street of the	-, <u>]</u>	0.	h

Par	t II	Balance Sheets  Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		or year
		(See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash — non-interest-bearing			
	2	Savings and temporary cash investments	99,158.	84,714	. 84,714.
	3	Accounts receivable	The same		, in b
		Less: allowance for doubtful accounts			
	4	Pledges receivable		, , , , , , , , , , , , , , , , , , , ,	
	1_	Less: allowance for doubtful accounts			
	5	Grants receivable	<u> </u>		
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions).			
	7	Other notes and loans receivable (attach sch)			
A	'	Less allowance for doubtful accounts	- C. 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 .	T-150 a 15 a 25	
5	8	Inventories for sale or use			
A S E T	9	Prepaid expenses and deferred charges			
S	10	a Investments – U.S. and state government obligations (attach schedule)			
		b Investments — corporate stock (attach schedule)			
	1 .	c Investments — corporate bonds (attach schedule)			
	1	Investments - land, buildings, and	The state of the s		4 - No. 35 - A6 - A
		equipment basis	To the state of th	THE STATE OF THE S	
		Less: accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	13	Investments — other (attach schedule)			
	14		等。2016年2月 1	ALL THE RESERVE TO	
		Less: accumulated depreciation (attach schedule)			
		Other assets (describe			
_	16	Total assets (to be completed by all filers — see the instructions Also, see page 1, item I)	99,158.	84,714	. 84,714.
Ļ	17	Accounts payable and accrued expenses			
Å	18	Grants payable			
В	19	Deferred revenue			
Ļ	20	Loans from officers, directors, trustees, & other disqualified persons.			
†	21	Mortgages and other notes payable (attach schedule)			
Ī	22	Other liabilities (describe )			
E S	23	Total liabilities (add lines 17 through 22)	0.	0	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
NF	24	Unrestricted			
E U	25	Temporarily restricted		·	The production of the state of
D	26	Permanently restricted			
ASSETSN		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
ΕL	27	Capital stock, trust principal, or current funds	99,158.	84,714	
TA	28	Paid-in or capital surplus, or land, building, and equipment fund			
O E	29	Retained earnings, accumulated income, endowment, or other funds			
ŔŜ	30	Total net assets or fund balances (see instructions)	99,158.	84,714	• v, r
	31	Total liabilities and net assets/fund balances (see instructions)	99,158.	84,714	
Par	tIII	Analysis of Changes in Net Assets or Fund Balanc		· · · · · · · · · · · · · · · · · · ·	
1	Tota	Il net assets or fund balances at beginning of year — Part II, colu	umn (a), line 30 (must a	igree with	
	end-	of-year figure reported on prior year's return)	•	1	99,158.
2		er amount from Part I, line 27a	•	2	<del></del>
3		increases not included in line 2 (itemize)	<b>-</b>	3	
4		lines 1, 2, and 3	2	4	3-7-0
5		eases not included in line 2 (itemize)  See Statement		<u> </u>	<del></del>
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5)	, — Fart II, Column (b),	line 30 . 6	84,714.

Par	(a) List and describe	the kind(s) of property sold (e.g., re; or common stock, 200 shares MI	eal estate.	(b) How acc P — Purch D — Dona	nase	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a	7500 ESPRIT_HOLDING	S HK		P		8/02/12	11/07/12
	2500 ESPRIT HOLDING			P		8/17/12	11/07/12
C							
d							
е							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other base plus expense of sale	sis le		(h) Gain or (e) plus (f) m	(loss) iinus (g)
а	3,042.			2,765.			277.
b	1,014.			1,117.			-103.
	7.7						
d	<u></u>						
е							
		ng gain in column (h) and owned b	<del></del>			(I) Gains (Col	
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a			ain minus column (k an -0-) <b>or</b> Losses (fi	
a							277.
b							-103.
С							
d							
е							·
2	Capital gain net income or (net	capital loss) — If gain, also	o enter in Part I, line 7 hter -0- in Part I, line 7	-	2		174.
3	Net short-term capital gain or (	loss) as defined in sections 1222(5	) and (6).	•			
	If gain, also enter in Part I, line in Part I, line 8	8, column (c) (see instructions). If	(loss), enter -0-	-	3		0.
Par	t V 📆 Qualification Under	Section 4940(e) for Reduce	ed Tax on Net Investm	ent Inco	me	•	
If 'Ye	s,' the foundation does not qual	tion 4942 tax on the distributable ar ify under section 4940(e) Do not con n each column for each year, see the	omplete this part		ies	Yes	No
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use ass			<b>(d)</b> Distribution umn (b) divided	
	2011						
	2010						
	2009					<del></del>	_
	2008						
	2007					•	•
	Total of line 1, column (d)		<del></del>		2		
3	Average distribution ratio for th number of years the foundation	e 5-year base period — divide the t has been in existence if less than	otal on line 2 by 5, or by the 5 years	:	3		
4	-	table-use assets for 2012 from Par	•		4		
5	Multiply line 4 by line 3				5		<del></del>
		(10/ of Post Libra 07/)					
6	Enter 1% of net investment inc	ome (1% of Mart I, line 2/b)			6		
7	Add lines 5 and 6			1	7		<del></del>
8	Enter qualifying distributions fro	·	line 1h and complete that	part usino	8 19	4 tay rata Sas 4	
	Part VI instructions	nan line 7, check the box in Part VI	, ime 10, and complete that	part using	a 17		ne n <b>990-PF</b> (2012

Form	990-PF (2012) RILEY FAMILY FOUNDATION 45	-2774866		Р	age 4
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se	e instruction	ıs)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here				
	Date of ruling or determination letter (attach copy of letter if necessary – see instrs)				
ь	Domestic foundations that meet the section 4940(e) requirements in Part V,	1 1			5.
	check here ► and enter 1% of Part I, line 27b				<i>چ</i> لا
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)		<b></b>		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable				
	foundations only Others enter -0-)	2			0.
3	Add lines 1 and 2	3			<u>5.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5		* 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	5.
6	Credits/Payments:				
	2012 estimated tax pmts and 2011 overpayment credited to 2012	_ "	:2	<i>γ</i> Φ. ε	K. Jakobar Jarif
	Exempt foreign organizations — tax withheld at source	4 1 .	<b>%</b>	/s 6	5. m
	Tax paid with application for extension of time to file (Form 8868)	4	*	1	
	Backup withholding erroneously withheld 6d	- 2 3 ·	<u> </u>		<u>*</u>
7	Total credits and payments Add lines 6a through 6d	7			0.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			5.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	<b>10</b>			
11	Enter the amount of line 10 to be: Credited to 2013 estimated tax	► 11			
Par	t VII-A Statements Regarding Activities				
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		1 a	Yes	No X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		1 b		Х
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published		\$	· %	
	or distributed by the foundation in connection with the activities.			4.4	in.il
C	Did the foundation file Form 1120-POL for this year?		1 c		X
C	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation   (2) On foundation managers	0.	12 ~	الم ا	
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on		13	,	34.53
•	foundation managers >\$ 0.		القر المراجعة	ة عدد	
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.		. %	° 75 48	4°2
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			,,	5 B
			3		X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4 a		X
t	If 'Yes,' has it filed a tax return on Form 990-T for this year?		4 b	N	/A
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.		أدعوالاك	รอย์เลษ"	- 4 2 00
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.				<b> </b>
	By language in the governing instrument, or		<b>* *</b>	29	,
	• 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	
	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV		7	Х	
<b>8</b> a	Enter the states to which the foundation reports or with which it is registered (see instructions)				4
	CT		`		1
t	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		- <u>-</u> -		
	(or designate) of each state as required by General Instruction G? If 'No,' attach explanation		8 b	<u>X</u>	<del> </del>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If 'Yes,' compl	or 4942(j)(5)	9		
		CIG I GIL AIV	1-		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses		10		x

Form **990-PF** (2012)

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Par	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		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  Website address  N/A	13	X	
14	The books are in care of ► TRACY SCOTT  Telephone no ► (508)	981	-59 <del>6</del>	 51
	Located at ► 19 WESTVIEW DRIVE MANSFIELD MA ZIP + 4 ► 02048	,		· = -
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	N/ <i>F</i>		
	and enter the amount of tax-exempt interest received or accrued during the year			N/A
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If 'Yes,' enter the name of the foreign country ►	*	4	? **/
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.	8	Yes	No
1 a	a During the year did the foundation (either directly or indirectly):		*ŝ″	2
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No	,	<b>4€</b> 5	ned
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?  Yes X No	**, (		4
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1.00-1-5	1	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?  Yes X No			#
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)  Yes  X No			
ь	If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	3		/3
	Organizations relying on a current notice regarding disaster assistance check here	1 b	N	/A
_				🖠
	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 2012?	1 c	-	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 $4942(j)(5)$ ):	,		, 2
а	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d	, ×	*	7.4
	and 6e, Part XIII) for tax year(s) beginning before 2012?	<b>&gt;</b>	â	1
	If 'Yes,' list the years ▶ 20 _ , 20 _ , 20	1.		3
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)	Y	٠.	4.3
	(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 )	2 b	NT.	<u> </u>
c	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	20	. 11	/A
	► 20, 20, 20		ζ√ξ	*
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	i,	i	,
b	olf 'Yes,' did it have excess business holdings in 2012 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 diff 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 foundation had excess business holdings in 2012.)	3 b	N	/A
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	14	X
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 2012?	4 b	1	Х
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Total number of other employees paid over \$50,000 BAA

•					
Form 990-PF (2012) RILEY FAMILY FOUNT Part VII-B   Statements Regarding Activiti		4720 May Be Reg	45-277	74866 Page	: 6
		14720 may be need	anea (continuea)	<del></del>	
<ol> <li>5 a During the year did the foundation pay or incu</li> <li>Carry on propaganda, or otherwise attempt</li> </ol>	=	n (section 4945(e))?	Yes X	No	,
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	lic election (see section ation drive?	4955); or to carry	Yes X	No Zá sa z	u,
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	Yes X	No l	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	han a charitable, etc, or 4940(d)(2)? (see instru	ganization described actions)	Yes X	No	\$
(5) Provide for any purpose other than religio educational purposes, or for the prevention	us, charitable, scientific in of cruelty to children	:, literary, or or animals?	Yes X	No 🎄 😘	°.,
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to on a current notice regard	qualify under the exceptions disaster assistance	tions	5 b N/A	a r
Organizations relying on a current notice rega	irding disaster assistand	ce check here	▶ 🗌		,C,
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	the foundation claim ex sibility for the grant?	emption from the	N/A Yes	No S	ر ب رد دا
If 'Yes,' attach the statement required by Reg	ulations section 53 4945	5-5(d)			
6a Did the foundation, during the year, receive at on a personal benefit contract?		•	∐Yes X	No Significant Sig	. <u></u>
<b>b</b> Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870.	iums, directly or indirec	tly, on a personal bene	iit contract?	<del></del>	X
7a At any time during the tax year, was the found	dation a party to a proh	ibited tax shelter transa	iction? Yes X	No .	» t.
<b>b</b> If 'Yes,' did the foundation receive any proceed				I/A 7b	
Part VIII Information About Officers, D	irectors, Trustees,	Foundation Manag	gers, Highly Paid E	mployees,	
and Contractors					
1 List all officers, directors, trustees, foundation	on managers and their o	compensation (see inst	ructions).		
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account other allowances	
TIMOTHY M. RILEY	Trustee	0.	0.		0
P.O. BOX 2113	0.50				
DARIEN, CT 06820	Trustee	0.	0.		0
ANGELA A. RILEY P.O. BOX 2113	0.50	0.	0.		
DARIEN, CT 06820	0.50				
DIACIDIA, CI 00020			-		
	No and the second secon		> K		
2 Compensation of five highest-paid employees (o	T				
(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 accour other allowances	ıt, S
None			•		
			,		
					_
				1	
					_

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Pā	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	mployees,
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
No	ne	
- <b>-</b>		
~ <b>_</b>		
T-4-	I number of others receiving over \$50,000 for professional services	
lota	I number of others receiving over \$50,000 for professional services.	0
Pa	Summary of Direct Charitable Activities	
List t	ne foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of izations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	N/A	
2		
3		
4		
Pa	Summary of Program-Related Investments (see instructions)	
		A
	cribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	N /N	
	<u>N/A</u>	
2		
_		
ΔII	other program-related investments. See instructions	<u> </u>
3	one program related introductions and manufactions	
J		
Tota	I. Add lines 1 through 3	0.

Form 990-PF (2012) RILEY FAMILY FOUNDATION 45-2774866 F Partition Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes a Average monthly fair market value of securities	1 a	
	<b>b</b> Average of monthly cash balances	1 b	28,820.
	c Fair market value of all other assets (see instructions)	1 c	55,894.
	d Total (add lines 1a, b, and c)	1 d	84,714.
	e Reduction claimed for blockage or other factors reported on lines 1a and 1c	14	
	(attach detailed explanation) 1 e 0		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	84,714.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	1,271.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	83,443.
6	Minimum investment return. Enter 5% of line 5	6	4,172.
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operations	ating for	
	and certain foreign organizations check here ▶ and do not complete this part.)		
1	Minimum investment return from Part X, line 6.	1	4,172.
2	a Tax on investment income for 2012 from Part VI, line 5		
	<b>b</b> Income tax for 2012 (This does not include the tax from Part VI )		
	c Add lines 2a and 2b	2 c	5.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	4,167.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	4,167.
6	Deduction from distributable amount (see instructions)	6	·
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	4,167.
Pa	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	1 a	6,500.
	<b>b</b> Program-related investments — total from Part IX-B	1 b	0,500.
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)	3 a	
	b Cash distribution test (attach the required schedule)	3 b	
4		4	6,500.
		+	6,300.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	6,500.
	Note. The amount on line 6 will be used in Part V. column (b), in supsequent years when calculating whether the for	ındatını	

The amount on line 6 will be used in Part V, column (b), in subsequent year qualifies for the section 4940(e) reduction of tax in those years

BAA

Form **990-PF** (2012)

## Part.XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	<b>(c)</b> 2011	<b>(d)</b> 2012
Distributable amount for 2012 from Part XI, line 7	) / =		-	4,167.
2 Undistributed income, if any, as of the end of 2012.	1		41.5	1,10
a Enter amount for 2011 only		voc en . Tark	1,960.	~a , 7 /28 / 4/4
<b>b</b> Total for prior years 20 , 20 , 20	- (e U	0.		, e
3 Excess distributions carryover, if any, to 2012:	The state of the state of the	",""分战"。除"""	٠٠٠ ١٥ م ١٥ م ١٥ م ١٥ م ١٥ م	\$ 15 miles
a From 2007			, , , , , , ,	,
<b>b</b> From 2008	7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	8 . n. s.		7 , "
<b>c</b> From 2009	*			
<b>d</b> From 2010			, der	
e From 2011			, , , ,	a r Sai
f Total of lines 3a through e	0.	1 1 2 N		· · · · · · · · · · · · · · · · · · ·
4 Qualifying distributions for 2012 from Part	, a , d	San Ser Hilliam	\$ ' } '	
XII, line 4 \( \)				22 2 2
a Applied to 2011, but not more than line 2a		The state of	1,960.	, , , , , , , , , , , , , , , , , , ,
<b>b</b> Applied to undistributed income of prior years			1.50	14, 91
(Election required – see instructions)	31. W. 31.	0.	\$1 04 5 1 37 37 38 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
c Treated as distributions out of corpus				, , , , , , , , , , , , , , , , , , ,
(Election required – see instructions)	0.	A CONTRACTOR OF THE STATE OF TH		1
<ul> <li>d Applied to 2012 distributable amount</li> <li>e Remaining amount distributed out of corpus</li> </ul>	Sales Contraction			4,167.
	373.	552 C 1885 C 1887 C 2 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	2 (4) ( 1) (4) ( 1) (4) ( 1) (4) ( 1) ( 1	0.
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the	<b>U.</b>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		U.
same amount must be shown in column (a))				
ਵਰੋ.				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	373.	1 4 6 7 1 4 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6		
i-1-1	3,3:	F 10 F 2000 20 1 7	200 200 00 00 00 00 00 00 00 00 00 00 00	
<b>b</b> Prior years' undistributed income. Subtract line 4b' from line 2b.	to the same of	0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency	The war to be a second		3 0 3 2 0 1 E	
ed 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	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		المالية	u I. II.
amount — see instructions	6 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0.	2. 1 2. 4 4 10 12 3 10 10 10 10 10 10 10 10 10 10 10 10 10	, i
e Undistributed income for 2011 Subtract line 4a from	e Maria de la Constitución de la			4
line 2a Taxable amount — see instructions		The state of the s	0.	
f Undistributed income for 2012 Subtract lines	-c 30 - 1 - 1 - 1 - 1	, 2" & 4, 3" " & 5 - 1	" 30° o	
4d and 5 from line 1. This amount must be				
distributed in 2013	7 43° , 5, 5	9 ( 1 %)		0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed			,	
by section 170(b)(1)(F) or 4942(g)(3)			,	
(see instructions)	0.			
8 Excess distributions carryover from 2007 not		fi '		'
applied on line 5 or line 7 (see instructions).	0.	, , , ,		
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a	373.	n "		ļ
10 Analysis of line 9:	3/3.			
a Excess from 2008				
b Excess from 2009.	-		O	
c Excess from 2010	1	<u> </u>	·	
d Excess from 2011	1			
e Excess from 2012 373.				
<u> </u>	l	<u> </u>	<u> </u>	Form 990 DE (2012)

Form 990-PF (2012) RILEY FAMILY FOUR				45-2774866	Page 10
Private Operating Foundat					N/A
1 a If the foundation has received a ruling or determined is effective for 2012, enter the date of the	ruling				
<b>b</b> Check box to indicate whether the foundate		erating foundation of		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		
investment return from Part X for each year listed	(a) 2012	<b>(b)</b> 2011	(c) 2010	(d) 2009	(e) Total
<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					
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c</li> </ul>					
3 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					
Supplementary Information assets at any time during the			e foundation had	\$5,000 or more	in
1 Information Regarding Foundation Managers of the foundation who have close of any tax year (but only if they have See Statement 4	gers:	than 2% of the total o	contributions received be section 507(d)(2))	by the foundation befo	re the
<b>b</b> List any managers of the foundation who own	10% or more of the	e stock of a corporation	on (or an equally large	portion of the owners	hip of
a partnership or other entity) of which the None	foundation has a	10% or greater inter	rest.		
2 Information Regarding Contribution, Gran Check here  X if the foundation only marequests for funds. If the foundation make complete items 2a, b, c, and d	kes contributions to s gifts, grants, etc	preselected charitab (see instructions) t	ole organizations and d to individuals or organ	nizations under othe	
a The name, address, and telephone number o	r e-mail of the perso	on to whom application	ons should be addresse	ed	
<b>b</b> The form in which applications should be	submitted and info	ormation and materi	als they should includ	de:	
c Any submission deadlines:					
d Any restrictions or limitations on awards,	such as by geogra	phical areas, charita	able fields, kinds of in	nstitutions, or other	factors
	<del></del>		s.··		<u> </u>

3 Grants and Contributions Paid During the Ye	ear or Approved for Fut	ure Paymen	<u> </u>	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient	Contribution	
a Paid during the year				
- ,				
	•			
	!		İ	
	1			
Total		L	   ▶ 3a	
b Approved for future payment			3a	
b Approved for lattice payment				
	1			
Total		l	 	
ıotai			<b>-</b> 3b	

### Part XVI-A Analysis of Income-Producing Activities

Enter'oross amoi	unts unless otherwise indicated	1 Unrelate	ed business income	LXCIUGEU	by section 512, 513, or 514	(-)
		(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income (See instructions)
1 Program se	ervice revenue.			code		
a					<del></del>	
b				-		-
d		+				
e		-			·	
·						
g Fees and c	ontracts from government agencies	<del>                                     </del>			-	
-	p dues and assessments.			<del>                                     </del>	· · ·	
	vings and temporary cash investments	-			•	
	and interest from securities			14	56.	
5 Net rental i	ncome or (loss) from real estate:				% sa ;	,
a Debt-financ	ced property					
<b>b</b> Not debt-fir	nanced property					
6 Net rental inco	ome or (loss) from personal property					
7 Other inves	stment income					
	from sales of assets other than inventory					174.
	or (loss) from special events					
•	t or (loss) from sales of inventory	In a second	wastast 150	2 4500 72 4	ad See Novaldia a Sanka	Notes we now on the season of
11 Other rever	nue.	<b>4</b> 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<b>のできる。 かっという はいり</b> かっとう かっとう かっとう かっとう かっとう かっとう かっとう かっとう	1, 1, 1, 1, 1		all
a					· · · · · · · · · · · · · · · · · · ·	
b		-				
c						
d	<del></del>	+		<del>├</del>		
Δ.						
e Subtotal A	dd columns (h) (d) and (e)			1.	56	174
	dd columns (b), (d), and (e)				<u>56.</u>	174.
13 Total. Add	line 12, columns (b), (d), and (e)			,	56. 13	174. 230.
13 Total. Add (See worksheet i	line 12, columns (b), (d), and (e) n line 13 instructions to verify calculate	ions )	ish work of Evous	A Provence	13	
13 Total. Add (See worksheet i	line 12, columns (b), (d), and (e) n line 13 instructions to verify calculat Relationship of Activities to the	ons)			oses	230.
13 Total. Add (See worksheet i	line 12, columns (b), (d), and (e) n line 13 instructions to verify calculate	ons)			oses	230.
13 Total. Add (See worksheet   Part XVI-B   Line No. Expl. acco	line 12, columns (b), (d), and (e) n line 13 instructions to verify calculat Relationship of Activities to the	ons)			oses	230.
13 Total. Add (See worksheet i	line 12, columns (b), (d), and (e) n line 13 instructions to verify calculat Relationship of Activities to the	ons)			oses	230.
13 Total. Add (See worksheet   Part XVI-B   Line No. Expl. acco	line 12, columns (b), (d), and (e) n line 13 instructions to verify calculat Relationship of Activities to the	ons)			oses	230.
13 Total. Add (See worksheet   Part XVI-B   Line No. Expl. acco	line 12, columns (b), (d), and (e) n line 13 instructions to verify calculat Relationship of Activities to the	ons)			oses	230.
13 Total. Add (See worksheet   Part XVI-B   Line No. Expl. acco	line 12, columns (b), (d), and (e) n line 13 instructions to verify calculat Relationship of Activities to the	ons)			oses	230.
13 Total. Add (See worksheet   Part XVI-B   Line No. Expl. acco	line 12, columns (b), (d), and (e) n line 13 instructions to verify calculat Relationship of Activities to the	ons)			oses	230.
13 Total. Add (See worksheet   Part XVI-B   Line No. Expl. acco	line 12, columns (b), (d), and (e) n line 13 instructions to verify calculat Relationship of Activities to the	ons)			oses	230.
13 Total. Add (See worksheet   Part XVI-B   Line No. Expl. acco	line 12, columns (b), (d), and (e) n line 13 instructions to verify calculat Relationship of Activities to the	ons)			oses	230.
13 Total. Add (See worksheet   Part XVI-B   Line No. Expl. acco	line 12, columns (b), (d), and (e) n line 13 instructions to verify calculat Relationship of Activities to the	ons)			oses	230.
13 Total. Add (See worksheet   Part XVI-B   Line No. Expl. acco	line 12, columns (b), (d), and (e) n line 13 instructions to verify calculat Relationship of Activities to the	ons)			oses	230.
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13 Total. Add (See worksheet   Part XVI-B   Line No. Expl. acco	line 12, columns (b), (d), and (e) n line 13 instructions to verify calculat Relationship of Activities to the	ons ) e Accompl			oses	230.
13 Total. Add (See worksheet   Part XVI-B   Line No. Expl. acco	line 12, columns (b), (d), and (e) n line 13 instructions to verify calculat Relationship of Activities to the	ons ) e Accompl			oses	230.
13 Total. Add (See worksheet   Part XVI-B   Line No. Expl. acco	line 12, columns (b), (d), and (e) n line 13 instructions to verify calculat Relationship of Activities to the	ons ) e Accompl			oses	230.
13 Total. Add (See worksheet   Part XVI-B   Line No. Expl. acco	line 12, columns (b), (d), and (e) n line 13 instructions to verify calculat Relationship of Activities to the	ons ) e Accompl			oses	230.
13 Total. Add (See worksheet   Part XVI-B   Line No. Expl. acco	line 12, columns (b), (d), and (e) n line 13 instructions to verify calculat Relationship of Activities to the	ons ) e Accompl			oses	230.
13 Total. Add (See worksheet   Part XVI-B   Line No. Expl. acco	line 12, columns (b), (d), and (e) n line 13 instructions to verify calculat Relationship of Activities to the	ons ) e Accompl			oses	230.
13 Total. Add (See worksheet   Part XVI-B   Line No. Expl. acco	line 12, columns (b), (d), and (e) n line 13 instructions to verify calculat Relationship of Activities to the	ons ) e Accompl			oses	230.
13 Total. Add (See worksheet   Part XVI-B   Line No. Expl. acco	line 12, columns (b), (d), and (e) n line 13 instructions to verify calculat Relationship of Activities to the	ons ) e Accompl			oses	230.
13 Total. Add (See worksheet   Part XVI-B   Line No. Expl. acco	line 12, columns (b), (d), and (e) n line 13 instructions to verify calculat Relationship of Activities to the	ons ) e Accompl			oses	230.
13 Total. Add (See worksheet   Part XVI-B   Line No. Expl. acco	line 12, columns (b), (d), and (e) n line 13 instructions to verify calculat Relationship of Activities to the	ons ) e Accompl			oses	230.
13 Total. Add (See worksheet   Part XVI-B   Line No. Expl. acco	line 12, columns (b), (d), and (e) n line 13 instructions to verify calculat Relationship of Activities to the	ons ) e Accompl			oses	230.
13 Total. Add (See worksheet   Part XVI-B   Line No. Expl. acco	line 12, columns (b), (d), and (e) n line 13 instructions to verify calculat Relationship of Activities to the	ons ) e Accompl			oses	230.

# Form 990-PF (2012) RILEY FAMILY FOUNDATION 45-2774866 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		<del></del>						<del></del>			
describe	organization direct d in section 501(c to political organiz	tly or indirectly enga ) of the Code (other zations?	ige in any of the than section 50	following with 1(c)(3) organ	n any otl izations)	her organization or in section 5	n 527,			Yes	No
a Transfers	s from the reporti	ng foundation to a n	oncharitable exe	empt organiza	ition of			L	4º /	, .	. 1
<b>(1)</b> Cash	า							Ī	1 a (1)		X
(2) Othe	er assets								1 a (2)		X
<b>b</b> Other tra	ansactions							<u> </u>	~ -,	5	
(1) Sale	s of assets to a n	oncharitable exempt	t organization						1 b (1)		X
		rom a noncharitable	=	ation				F	1 b (2)		X
		uipment, or other as	, •					F	1 b (3)		X
<b>\-</b> /	nbursement arran	•	,0010					-	1 b (4)		X
<b>\</b> ->	ns or loan guarant	•			•				1 b (5)	_	$\frac{\Lambda}{X}$
			r fundraising sal	ioitotions				-		-	$\overline{}$
<b>\</b> -,		es or membership o	-						1 b (6)	_	X
<b>c</b> Snaring	or racilities, equip	ment, mailing lists,	other assets, or	paid employe	es			L	1 c		<u>X</u>
d If the and the goods any trans	swer to any of the s, other assets, or s saction or sharing	e above is 'Yes,' con services given by the arrangement, show	nplete the follow reporting foundation of the column (d) the colum	ing schedule on If the foun- ne value of th	Column dation red e goods,	(b) should alw ceived less than , other assets,	rays show the fair market voor services	ie fair ma value in received	arket val	ue of	
(a) Line no.	(b) Amount involved	(c) Name of no	ncharitable exempt of	rganization	(d)	Description of tran	sfers, transaction	ons, and st	naring arrar	ngement	s
N/A		1,,	<u> </u>	-							
.,, -											
	<u>-</u>	<del></del>									
					·			-			
	· · · · · · · · · · · · · · · · · · ·				<del></del> -						
<del>_</del> _											
describe	indation directly or d in section 501(c complete the follo	indirectly affiliated with c) of the Code (other owing schedule	th, or related to, o than section 50	ne or more ta 1(c)(3)) or in	x-exempt section	organizations 527?			Yes	X	No
(a)	Name of organization	ation	(b) Type of	organization		(c)	) Description	of relat	ionship		
N/A											
							,				
									<del></del> -		
					- +				_		
		clare that I have examined ion of preparer (other than						knowledge	May the	RS aisc	uss
Here	MICA VI	KILDIN	ا کا	1.12.12	▶ ╥	rustee			this retur preparer	n with th shown t	ne pelow
1 / 🔾	ture of office or trustee	garap	Date	• (21)					(see inst	ructions)	2
	Print/Type preparer's	name	Preparer's signa		<u> </u>	Date , ,	Ob	<b>.</b>	J IV	Yes	No
				()	bott	14/17/12	Check			1260	
Paid	Tracy Scot		Tracy Sc	:01.t 11/2	) W(I	1 1/10/12	self-emplo	yea	P01297	1200	
Preparer	Firm's name	Tracy Scott	<u> </u>		, 		Firm's EIN				
Jse Only Firm's address 19 Westview Dr					/F ^ - ·	005					
	<u></u>	<u>Mansfield, M</u>	A 02048				Phone no		981-		
2 Δ Δ									Form 990	-PF (2	012)

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

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

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

OMB No 1545-0047

2012

Name of the organization		Employer identification number				
RILEY FAMILY FOUNDATION		45-2774866				
Organization type (check one):						
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number) organ	501(c)() (enter number) organization				
	4947(a)(1) nonexempt charitable trus	st <b>not</b> treated as a private foundation				
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
1 01111 330-1 1		at translation of a second forwards to the				
	4947(a)(1) nonexempt charitable trus	it treated as a private foundation				
	501(c)(3) taxable private foundation					
Check if your organization is covered b	y the General Rule or a Special Rule					
Note. Only a section 501(c)(7), (8), or (	(10) organization can check boxes for both the Ger	neral Rule and a Special Rule See instructions				
General Rule  For an organization filing Form 990, 9 contributor (Complete Parts I and	90-EZ, or 990-PF that received, during the year, \$5,00	00 or more (in money or property) from any one				
Special Rules						
509(a)(1) and 170(b)(1)(A)(vi) and	n filing Form 990 or 990-EZ that met the 33-1/3% s received from any one contributor, during the year 90, Part VIII, line 1h or (ii) Form 990-EZ, line 1. C	r, a contribution of the greater of (1) \$5,000 or				
total contributions of more than \$1.	ganization filing Form 990 or 990-EZ that received froi 000 for use <i>exclusively</i> for religious, charitable, sc or animals Complete Parts I, II, and III	m any one contributor, during the year, cientific, literary, or educational purposes, or				
If this box is checked, enter here the t purpose Do not complete any of the p	ganization filing Form 990 or 990-EZ that received froi ligious, charitable, etc, purposes, but these contributional contributions that were received during the year for sarts unless the <b>General Rule</b> applies to this organizations of \$5,000 or more during the year	or an <i>exclusively</i> religious, charitable, etc,				
Caution: An organization that is not covered by the answer 'No' on Part IV, line 2, of its Form 990, meet the filling requirements of Schedu	e General Rule and/or the Special Rules does not file Schedule B or check the box on line H of its Form 990-EZ or on Part I, II Ie B (Form 990, 990-EZ, or 990-PF)	Form 990, 990-EZ, or 990-PF) but it <b>must</b> line 2, of its Form 990-PF, to certify that it does not				
BAA For Paperwork Reduction Act No or 990-PF.	otice, see the Instructions for Form 990, 990EZ,	Schedule <b>B</b> (Form 990, 990-EZ, or 990-PF) (2012)				

Schedule	<b>B</b> (Form 990, 990-EZ, or 990-PF) (2012)	Page	1 of 1 of Part 1
Name of orga	•	' '	er identification number 774866
	FAMILY FOUNDATION	•	7/4000
	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed		
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		-   \$	Person Payroll Complete Part II if there is a noncash contribution )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 	Person Payroll Oncash Complete Part II if there is a noncash contribution )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II if there is a noncash contribution )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		  s	Person Payroll Complete Part II if there is a noncash contribution )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ -	Person Payroll Noncash Complete Part II if there is
		-	a noncash contribution.)
BAA	TEEA0702L 11/30/12	Schedule B (Form 9	90, 990-EZ, or 990-PF) (2012)

1 to

1 of Part II

Name of organization

Employer identification number

RILEY FAMILY FOUNDATION

45-2774866

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

1 to

of Part III

Name of organization
RILEY FAMILY FOUNDATION

Employer identification number

45-2774866

[FELTIM	Exclusively religious, charitable, etc, individual contributions to section 501(c)(7), (8) or (10 organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following For organizations completing Part III, enter total of exclusively religious, charitable, etc.						
	contributions of \$1,000 or less for the year. Use duplicate copies of Part III if additional	(Enter this information once, S	ee instruction	s)			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
	N/A	-					
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to t						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
	(e)  Transfer of gift  Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
	(e) Transfer of gift Transferee's name, address, and ZIP + 4			tionship of transferor to transferee			
(a) No. from Part I	(b) (c) Purpose of gift Use of gift			(d) Description of how gift is held			
			-				
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relat	tionship of transferor to transferee			

2012	Fe	deral Statements		Page 1
	RILE	Y FAMILY FOUNDATION	l	45-2774866
Statement 1 Form 990-PF, Part I, Line 23 Other Expenses				
Investment Fees	Total	Expenses Investor   per Books Investor   \$ 5. \$	Net (c) tment Adjusted come Net Income  5. 5. 5. 5. \$ 0.	(d) Charitable Purposes 0.
Statement 2 Form 990-PF, Part I, Line 25 Contributions, Gifts, and Gra	ants			
Cash Grants and Allocate Class of Activity: Donee's Name: Donee's Address: Relationship of Donee: Organizational Status of		Obie Harrington-Ho PO Box 2221 Darien, CT 06820 None 501(c)(3)	owes Foundation	
Amount Given:  Class of Activity: Donee's Name: Donee's Address:  Relationship of Donee:	or bonee.	Bridge the Gap 11 Waverly Rd Darien, CT 06820 None	\$	5,000.
Organizational Status o Amount Given:	of Donee:	501(c)(3)	Total <u>§</u>	1,500. 6,500.
Statement 3 Form 990-PF, Part III, Line 5 Other Decreases				
Net Unrealized Gains or	r Losses on	Investments	Total \$	8,169. 8,169.
Statement 4 Form 990-PF, Part XV, Line 1 Foundation Managers - 2% o	a or More Contrib	utors		
TIMOTHY M. RILEY ANGELA A. RILEY				