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Form 990-PF

EXTENSION GRANTED 08/15/13 Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545-0052

Dept	ertmer	nt of the Treasury wenue Service Note. The foundation may	be able to use a copy of this	return to satisfy state repo	orting requirements.	Open to public Inspection
		ndar year 2012 or tax year beginning SEI	21, 2012	, and ending	DEC 31, 2012	
		f foundation GINE, INC.			A Employer identification	number
		SULLIVAN TIRE CO. INC.			61-1694939	
		and street (or PO box number if mail is not delivered to stree ACCORD PARK DRIVE	et address)	Room/sulte	B Telephone number 617-330-70	60
					 	. [56]
		own, state, and ZIP code WELL, MA 02061			C If exemption application is pe	ending, check here .
		k all that apply:	Initial return of a fo	ormer public charity	D 1. Foreign organizations	, check here>
		Final return	Amended return		2 Familia accominations and	
		Address change	Name change	 .	2. Foreign organizations med check here and attach cor	mputation test,
누_(xempt private foundation	42	E If private foundation stat	
<u>L.</u>		action 4947(a)(1) nonexempt charitable trust Larket value of all assets at end of year J. Account	Other taxable private foundating method: X Cash	Accrual	1	(A), check here
		· · · · · · · · · · · · · · · · · · ·	Other (specify)	L Acciual	F If the foundation is in a 6 under section 507(b)(1)(
•	• \$		umn (d) must be on cash i	basis.)	dilogi section 201(b)(1)((D), CHECK HEID
P.	irt (Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	50,149.		N/A	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	2	Check if the foundation is not required to attach Sch. B		,	·	
	3	Interest on savings and temporary cash investments				- `
	4	Dividends and interest from securities				
	ł	Gross rents				*
	1 -	Net rental income or (loss)				***************************************
S.	ba	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all				
Revenue	"	assets on line 6a Capital gain net income (from Part IV, line 2)		0.		***************************************
æ	8	Net short-term capital gain	·			
	9	Income modifications	ł .		:	
	10a	Gross sales less returns and allowances				
	b	Less Cost of goods sold			` .	
	1	Gross profit or (loss)				
	11	Other income		0.		
	12	Total. Add lines 1 through 11		0.		0.
	14	Other employee salaries and wages			<u> </u>	
	15	Pension plans, employee benefits				
Ses	15a	Legal fees STMT 1	2,595.	0.		2,695.
e d		Accounting fees		· · · · · · · · · · · · · · · · · · ·		
Ä	C	Other professional fees				
tive	17	Interest	-			
Administrative Expenses	18 19	Depreciation and depletion ECEIVED	 			
nin	20	Occupancy	8			
Adr	21	Travel, conferences and meetings 2.9.2013.	RS-08			
Pu	22	Printing and publications JUL 2011	<u>K</u>			
5	23	Other expenses				
Operating and	24	Other expenses Total operating and administrative EN, UT	0.505			
Ş	1	expenses. And integral of though 20		0.	,	2,695.
		Contributions, gifts, grants paid	750.			750.
Operatir	26	Total expenses and disbursements. Add lines 24 and 25	3,345.	0.	ļ	3,445.
	27		3,343.			3,443.
	l	Excess of revenue over expenses and disbursements	46,804.		•	•
		Net investment income (if negative, enter -0-)	Territoria de la constitución de	0.	,	
	ε	Adjusted net income (if negative, enter -0-)			N/A	
200	n4					

		90-PF (2012) C/O SULLIVAN TIRE CO.]	Beginning of year	End of	1694939 Page 2
1	ari	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1			46,804.	
	1 2			40,004.	40,004.
	_	A			
	3	Less: allowance for doubtful accounts	· · · /// /// /		
	١.	Pledges receivable	· · · · · · · · · · · · · · · · · · ·		
	•	Less: allowance for doubtful accounts	∮ ` '	` '	. `
	_ ا				 -
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	_	disqualified persons		,	
	7	Other notes and loans receivable	-{ `` · · -{	2 2.3	« , , ,
	_	Less: allowance for doubtful accounts			 _
Assets	8	Inventories for sale or use			
SS	9	Prepaid expenses and deferred charges			
•		Investments - U.S. and state government obligations			
		Investments - corporate stock			
		Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis	.∤		
		Less: accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis			
		Less: accumulated depreciation			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers)	0.	46,804.	46,804.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
g	19	Deferred revenue			
Ĕ	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable			
3	22				•
		· · · · · · · · · · · · · · · · · · ·			
	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.	!	ŀ	
és	24	Unrestricted	1		
ā	25	Temporarily restricted			
æ	26	Permanently restricted			
ā		Foundations that do not follow SFAS 117, check here		 [`	:
or Fund Balances	ĺ	and complete lines 27 through 31.		[`
Ď	27	Capital stock, trust principal, or current funds	0.	0.	
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	•
Ass	29	Retained earnings, accumulated income, endowment, or other funds	0.1	46,804.	
ë	30	Total net assets or fund balances	0.	46,804.	•
Z	"				
	31	Total liabilities and net assets/fund balances	0.1	46,804.	,
				10,0041	
P	art	Analysis of Changes in Net Assets or Fund B	lalances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		st agree with end-of-year figure reported on prior year's return)			Λ
					46 004
2	CHLC!	r amount from Part I, line 27a		2	46,804.
3	الالالالا د بديم م	r increases not included in line 2 (itemize)	 		46 004
4 . E	nuu l Door	ines 1, 2, and 3 eases not included in line 2 (itemize)		, i	46,804.
-			aluma (h) II 00	5	0.
<u> </u>	ıotal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	oiumn (b), line 30	<u> 6 </u>	46,804.

223511 12-05-12

0. 46,804. Form **990-PF** (2012)

IMAGINE, INC.
C/O SULLIVAN TIRE CO. INC.

(a) List and desc 2-story brick w	cribe the kind(s) of p arehouse; or commo	roperty sold (e.g	., real estate.	. HICOITIE	P-	ow acquired Purchase Donation	1 (-,	te acquired , day, yr)	(d) Date sold (mo., day, yr.)	
1a	_									
b NC	NE				l					
<u> </u>					<u> </u>		 			
<u>d</u>										
<u>8</u>										
(e) Gross sales price	(f) Depreciation (or allow			t or other basis expense of sale				Gain or (loss) lus (f) minus (
<u>a</u>										
<u>b</u>	 		 							
<u> </u>										
<u>d</u>										
Complete only for assets showi	no onin in column /h) and owned by	the foundation	on 12/21/60		 -	(I) O-1	40 1 41 1		
Complete only for assets shown			Т	·				(Col. (h) gain It not less thar		
(i) F.M.V. as of 12/31/69	(j) Adjuste as of 12/			cess of col. (i) col. (j), if any	\perp		Loss	es (from col. (h))	
<u>a</u>			 							
D			ļ						· · · · · · · · · · · · · · · · · · ·	
<u>c </u>			 		-+					
1	 -	 	 		 -					
<u>e</u>	L		L		- +					
Capital gain net income or (net ca	apıtal loss) { i	If gain, also enter If (loss), enter -0	r in Part I, line - ın Part I, line	7 7	. }	2				
Net short-term capital gain or (lo If gain, also enter in Part I, line 8,	, column (c).				7					
If (loss), enter -0- in Part I, line 8		4040/-) 4-			ىلى	3				
Part V Qualification U							income			
For optional use by domestic privat f section 4940(d)(2) applies, leave t	his part blank.					,			N/A	
/as the foundation liable for the sec "Yes," the foundation does not qua Enter the appropriate amount in	lify under section 49	40(e) <u>Do not co</u>	mplete this pa	rt.					Yes N	
Enter the appropriate amount in (a)	each column for each		istructions bei	ore making any e					741	
Base periód years Calendar year (or tax year beginni	ing ın) Adjust	(b) ed qualifying dist	tributions	Net value of no	(c) ncharil	table-use ass	ets	Distribution ratio (col (b) divided by col. (c))		
2011	 -									
2010										
2009	 -									
2008					· · · · · · · · · · · · · · · · · · ·					
2007			<u>. </u>							
Total of line 1, column (d)							. 2		_ 	
•				-	•		١.			
the foundation has been in existe	nce it less than 5 yea	ars					3			
Enter the net value of noncharitat	ole-use assets for 20	112 from Part X, I	line 5				. 4			
Multiply line 4 by line 3							5	 		
Enter 1% of net investment incom	ne (1% of Part I, line	27b)	·				6	<u> </u>		
Add lines 5 and 6				···· · · · · · · · · · · · · · · · · ·			7			
Enter qualifying distributions from	n Part XII, line 4		· · · · · · · · · · · · · · · · · · ·				8			
If line 8 is equal to or greater than See the Part VI instructions	line 7, check the bo	ox in Part VI, line	1b, and comp	ete that part using	g a 1%	tax rate.				

IMAGINE, INC.

Form	990-PF (2012) C/O SULLIVAN TIRE CO. INC.			1694			Page 4
₽a	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e)	, or 4	948	see i	nstr	uctio	ns)
. 1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.			. ,	`	,,	`
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		. >				`;
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	•	1				0.
	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				0.
3	Add lines 1 and 2		3				0.
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				0.
6	Credits/Payments:					٠.,	
a	2012 estimated tax payments and 2011 overpayment credited to 2012					,, ,	e e
	Exempt foreign organizations - tax withheld at source			* `	× /	,	
	Tax paid with application for extension of time to file (Form 8868)		, ,	*>> /			s
	Backup withholding erroneously withheld						•
7	Total credits and payments. Add lines 6a through 6d		7_				0.
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached		8_				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9_				0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	. •	10				
	Enter the amount of line 10 to be: Credited to 2013 estimated tax	ed 🕨	11	L			
	rt VII-A Statements Regarding Activities						
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or influence any national, state, or local legislation or did it participate or influence any national, state, or local legislation or did it participate or influence any national, state, or local legislation or did it participate or influence any national, state, or local legislation or did it participate or influence any national, state, or local legislation or did it participate or influence any national, state, or local legislation or did it participate or influence any national, state, or local legislation or did it participate or influence any national, state, or local legislation or did it participate or influence any national, state, or local legislation or did it participate or influence any national state and st	tervene	in			Yes	No
	any political campaign?		• • • • • • • • • • • • • • • • • • • •		1a		X
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definit	ion)?			1b	1	X
	If the answer is "Yes" to 18 or 1b, attach a detailed description of the activities and copies of any materials per	ublish	ed or		ļ	٠.	}
	distributed by the foundation in connection with the activities.						ţ
	Did the foundation file Form 1120-POL for this year?				16		X
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	_					
	(1) On the foundation > \$ (2) On foundation managers. > \$	<u> </u>].	ł	
9	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	n				1	
	managers > \$O.						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		X
	If "Yes," attach a detailed description of the activities.						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorpor	ation, d	r				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		••		_3_		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4a	<u> </u>	X
	If "Yes," has it filed a tax return on Form 990-T for this year?				4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5	ļ	X
	If "Yes," attach the statement required by General Instruction T.						
	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 				:		
	remain in the governing instrument?				6		X
	Did the foundation have at least \$5,000 in assets at any time during the year?	·		·· ··	7	X	
	If "Yes," complete Part II, col. (c), and Part XV.				,		1
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)						
	MA						
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)						
	of each state as required by General Instruction G? If "No," attach explanation				8b	X	ļ
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5)						`
	year 2012 or the taxable year beginning in 2012 (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		X

C/0	SULLI	WAV	TRE	CO.	TNC
-/	ВОППТ	A VIIA	TIKE	-	TIME.

	IMAGINE, INC.			
Form 990-PF (2012)	C/O SULLIVAN TIRE CO. INC.	61-1694939	•	Page 5
Part VII-A Stat	tements Regarding Activities (continued)			
11 At any time during	the year, did the foundation, directly or indirectly, own a controlled entity within the meaning o	f		
section 512(b)(13)? If "Yes," attach schedule (see instructions)	. 11	i l	X
12 Did the foundation	n make a distribution to a donor advised fund over which the foundation or a disqualified persor	n had advisory privileges?		
If "Yes," attach stat	tement (see instructions)	. 12	1	X
13 Did the foundation	comply with the public inspection requirements for its annual returns and exemption application	on? . 13	X	
Website address	►N/A			
14 The books are in c	are of MAUREEN CULLITY C/O SULLIVAN TIRE	Telephone no. ► 781-982-1	.550	

14		no. ► 781-9	82-1	<u>550</u>	
	Located at ► 41 ACCORD PARK DRIVE, NORWELL, MA	ZIP+4 ▶0	2061		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			$\overline{}$	
	and enter the amount of tax-exempt interest received or accrued during the year	▶ _ 15	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,			Yes	No
	securities, or other financial account in a foreign country?		16		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 >				

16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		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 >			
Pa	art 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.		Yes	No
18	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available	1		
	for the benefit or use of a disqualified person)?	1		
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		1 1	
	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.)		1 1	
b	if any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A	16		
	Organizations relying on a current notice regarding disaster assistance check here			
C	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?	1c	1	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)):		1	
a	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2012?			
	If "Yes," list the years ▶ , , , ,			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	1		
	statement - see instructions.) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		1	
	during the year? Yes X No		İ	
b	If "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		l	
	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 foundation had excess business holdings in 2012.) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		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?	4b		X

Form **990-PF** (2012)

Form **990-PF** (2012)

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

Part VIII Information About Officers, Directors, Trustees, Foundation Manage Paid Employees, and Contractors (continued)	ers, Highly	Tu,	ye r
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."			
	b) Type of service	(c) Compensa	ation
			—
Total number of others receiving over \$50,000 for professional services		-	0
Part IX-A Summary of Direct Charitable Activities			_ <u> </u>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information s number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 N/A	uch as the	Expenses	
2			 -
3			
4			
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.			
1 N/A		Amount	—-
2			
All other program-related investments. See instructions. 3			
Total. Add lines 1 through 3	<u></u>	Form 990-PF (26	0.

FOI	m 990-PF (2012) C/O SULLIVAN TIRE CO. INC.	61-1694939	Page 8
P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, 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	1a	0.
b	Average of monthly cash balances	1b 20	,198.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d 20	,198.
8	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	_0.
3	Subtract line 2 from line 1d	3 20	,198.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	303.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5 19	,895.
6_	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	278.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	278.
22	Tax on investment income for 2012 from Part VI, line 5		
þ	Income tax for 2012. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2¢	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	278.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add tines 3 and 4	5	278.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	278.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
3	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a 3	,445.
þ	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b_	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4 3	,445.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6 3	,445.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies for the section	
	4940(e) reduction of tax in those years.		

Form 990-PF (2012)

Part XIII Undistributed Income (see instructions)

1 Distributable amount for 2012 from Part XI, line 7	278.
2 Undistributed income, if any, as of the end of 2012	
a Enter amount for 2011 only	
b Total for prior years.	
$0 \cdot 0 \cdot $	
3 Excess distributions carryover, if any, to 2012:	· · · · · ·
a From 2007	- N 1
b From 2008	
c From 2009	// //**
d From 2010	
e From 2011	•
f Total of lines 3a through e O .	
4 Qualifying distributions for 2012 from	
Part XII, line 4: ►\$ 3, 445.	,
a Applied to 2011, 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) 0.	······································
d Applied to 2012 distributable amount	278.
e Remaining amount distributed out of corpus 3, 167.	
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))	0.
6 Enter the net total of each column as indicated below:	
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	
b Prior years' undistributed income Subtract	
line 4b from line 2b	
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed 0 •	`
d Subtract line 6c from line 6b. Taxable	***************************************
amount - see instructions	
e Undistributed income for 2011. Subtract line	
4a from line 2a. Taxable amount - see instr.	
f Undistributed income for 2012. Subtract	
lines 4d and 5 from line 1. This amount must	
be distributed in 2013	0.
7 Amounts treated as distributions out of	
corpus to satisfy requirements imposed by	
section 170(b)(1)(F) or 4942(g)(3) 0 .	
B Excess distributions carryover from 2007	
not applied on line 5 or line 7	
9 Excess distributions carryover to 2013.	
Subtract lines 7 and 8 from line 6a 3, 167.	
O Analysis of line 9:	
a Excess from 2008	
b Excess from 2009	
c Excess from 2010	
d Excess from 2011	
e Excess from 2012 3, 167.	

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient 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) recipient a Paid during the year CHILDRENS HOSPITAL TO PROVIDE FINANCIAL 300 LONGWOOD AVE ASSISTANCE TO BOSTON, MA 02115 CHARITABLE ORGANIZATION. 250. ONE LIFE AT A TIME TO PROVIDE PINANCIAL ASSISTANCE TO 400 WASHINGTON ST. BRAINTREE, MA 02184 CHARITABLE ORGANIZATION. 500. **№** 3а 750. b Approved for future payment NONE Total 0.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income			ded by section 512, 513, or 514	(e)	
•	(a) Business	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income	
1 Program service revenue:	code		adde			
8		·	<u> </u>	\ <u>-</u>		
b	ļ		<u> </u>			
¢	<u> </u>					
đ	<u></u> _		<u> </u>	l		
e		Ĺ				
f						
Pees and contracts from government agencies						
2 Membership dues and assessments					<u> </u>	
3 Interest on savings and temporary cash						
-	l	į				
investments	 	 	-	 		
4 Dividends and interest from securities		·	ļ			
5 Net rental income or (loss) from real estate:	<u> </u>					
a Debt-financed property	<u> </u>					
b Not debt-financed property	ļ	<u> </u>	ļ			
6 Net rental income or (loss) from personal			1			
property		<u> </u>	<u> </u>			
7 Other investment income			-			
8 Gain or (loss) from sales of assets other						
than inventory	ļ	ļ	ļ			
9 Net income or (loss) from special events	<u> </u>		 	 	 	
• •	 		 			
10 Gross profit or (loss) from sales of inventory				<u> </u>	 	
11 Other revenue.]		Ì			
a			├			
b		<u> </u>	Ь	<u> </u>	<u> </u>	
C	ļ		<u> </u>	<u> </u>	<u></u>	
d			<u> </u>			
e		<u></u>	ļ			
12 Subtotal Add columns (b), (d), and (e)		0.		0.		
13 Total. Add line 12, columns (b), (d), and (e)				13	0.	
(See worksheet in line 13 instructions to verify calculations.)						
	Also Ass	amentialism and of Fa		4 D		
Part XVI-B Relationship of Activities to	ne Acc	omplishment of Ex	æmp	t Purposes		
Line No. Explain below how each activity for which incom	ne is reported	in column (e) of Part XVI-A	contril	outed importantly to the accord	polishment of	
▼ the foundation's exempt purposes (other than b						
	 -					
						
						
						
						
						
						
						
			_			
						
				~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ 		
						
						
						
				:-		
223621					5 000 DE (0040)	

1 10	# *** ***	Exempt Organ		31613 10 6	and mansactions	and neiations	Stilbs Atifit IAO	nchantable	3	
1	Did the or			of the followin	ng with any other organizat	tion described in sec	tion 501(c) of		Yes	No
	the Code	(other than section 501(c)(3) organizations) o	r in section 52	27, relating to political orga	anizations?	, ,			<u> </u>
a	Transfers from the reporting foundation to a noncharitable exempt organization of:							\	1 :	
	(1) Cash							1a(1)	<u></u>	X
	(2) Other	r assets						1a(2)		X
b	b Other transactions:									,
										X
									Ļ	X
									ļ	X
									<u> </u>	X
									ļ	X
					ons					X
C					ployees				i	X
đ					edule. Column (b) should a				sets,	
		s given by the reporting to I) the value of the goods,			ed less than fair market va	liue in any transactio	n or snaring arrange	ment, snow in		
/2):	ine no.	(b) Amount involved			exempt organization	(d) December				
(4)	ine no.	(U) Alliouit ilivoiveu	(c) rearrie o	N/A	exempt organization	on of transfers, transactions, and sharing arrangemen				
				M/A						
		<u> </u>	 							
			 							
										
						- 				
										
										
										
										 -
	-+					 -				
										
										
										
										
								·		
	in section		than section 501(c		or more tax-exempt organicon 527?			Yes	X	□ No
	11 Tes, Co	(a) Name of org			(b) Type of organization	T	(c) Description of re	lationship		
		N/A			(c) type or organization	 -	(6) 2000	метолотр		
			\bigcap			 				
					 					
_						 				
_			- 11			· 				
Sig He	n 📐	penalties of perjury, I declare telef, it is true, correct, and con	that I have examined the opposite Declaration of pr	s return, includin	g accompanying schedules and texpayer) is based on all infor	d statements, and to the mation of which prepare		May the IRS of return with the shown below	e prepar (see ins	rer
	F_	Signature of officer or trustee			Date	Title		res	٠.	7 140
	1 8"	Print/Type preparer's name		Preparer's Signature		Date	Check If	PTIN		
		,,,,,	LAUREN CARNES		1 4 1		self- employed			
Pa	id	LAUREN CAR				07/18/13		P00297	040	
_	eparer	Firm's name O'CONNOR & DREW,					Firm's EIN ▶ 04-3000523			
	e Only									
_	-	Firm's address ▶ 25 BRAINTREE HILL OFC PK, SUITE 102				†				
			AINTREE,			. —	Phone no. 6	17-471-	112	0
								Form 990		

Schedule B (Form 990, 990-EZ, or 990-PF) Gepartment 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** IMAGINE, INC. C/O SULLIVAN TIRE CO. INC. 61-1694939 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization IMAGINE, INC.

Employer identification number

C/O SULLIVAN TIRE CO. INC.

61-1694939

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PAUL SULLIVAN 60 ROBBINS RD. #2 PLYMOUTH, MA 02360	\$ 50,149.	Person X Payroll
(a) No.	(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) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(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) No.	(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) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Occupate Part II if there is a noncash contribution.

Name of organization

IMAGINE, INC.

C/O SULLIVAN TIRE CO. INC.

Employer Identification number

61-1694939

Part II	Noncash Property (see instructions). Use duplicate copies of Part	t II if additional space is needed.	
(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
		s	
(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
		 \$	

Name of org	anization	·····	Employer identification number					
-	NE, INC.							
<u>c/o_st</u>	JLLIVAN TIRE CO. INC.		61–1694939					
Part III	exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc Use duplicate copies of Part III if additions	ne following line entry. For organizations, contributions of \$1,000 or less for)(7), (8), or (10) organizations that total more than \$1,000 for the ins completing Part III, enter the year. (Enter this Information once.)					
(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, ar	nd ZIP + 4	Relationship of transferor to transferee					
(a) No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
Part I								
-		(e) Transfer of gif	1					
	Transferee's name, address, ar	_	Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee							
(a) No. from 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							
-	riginaleree a figure, gouleas, ar		Relationship of transferor to transferee					
ĺ								

FORM 990-PF	LEGAL	FEES			STAT	EMENT 1	
DESCRIPTION	(A) EXPENSES PER BOOKS			(C ADJU: NET I	STED C	(D) HARITABLE PURPOSES	
LEGAL	2,595.		0.			2,695.	
TO FM 990-PF, PG 1, LN 16	A 2,595.		0.			2,695.	
	II - LIST OF OF TEES AND FOUNDA			ORS	STAT	EMENT 2	
NAME AND ADDRESS		LE AND HRS/WK		IPEN- 'ION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT	
PAUL SULLIVAN OROBBINS RD #2 PLYMOUTH, MA 02360	PRESI	DENT .00		0.	0.	0.	
MAUREEN CULLITY ON HOUGHTON ST. ORCHESTER, MA 02122	TREAS	URER .00		0.	0.	0.	
ALPH J. RIVKIND LEONARD LN ORWELL, MA 02061	CLERK · 0			0.	0.	0.	
ALPH J. RIVKIND LEONARD LN ORWELL, MA 02061	DIRECTO	ror .00		0.	0.	0.	
ILLIAM PATTERSON 5 POOR MEADOW LN . BRIDGEWATER, MA 02333	DIRECT	ror .00		0.	0.	0.	
OSEPH ZACCHEO 39 GORWIN DR. ANSON, MA 02341	DIRECT	TOR .00		0.	0.	0.	
OTALS INCLUDED ON 990-PF	, PAGE 6, PART V	VIII		0.	0.	0.	