

## See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



#### **Return of Private Foundation**

or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

Do not enter Social Security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

For calendar year 2013 or tax year beginning		, and ending		
Name of foundation			A Employer identification	number
THE BAKER FAMILY FOUNDATIO	<del></del>	<del></del>	04-3535659	
Number and street (or PO box number if mail is not delivered to street 14 GARFIELD ROAD	Room/suite	B Telephone number 781-848-98	21	
City or town, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is p	ending, check here
MILTON, MA 02186  G Check all that apply Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations	s, check here
Final return	Amended return		Foreign organizations me check here and attach co	eeting the 85% test,
H Check type of organization X Section 501(c)(3) ex	Name change			
	Other taxable private founda	tion	E If private foundation sta under section 507(b)(1)	_ 1 1
I Fair market value of all assets at end of year J Accounting	•	Accrual	F If the foundation is in a	
(from Part II, col. (c), line 16)  ►\$ 597,782. (Part I, colu	ther (specify)	pasis )	under section 507(b)(1)	)(B), check here
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net	(d) Disbursements for chantable purposes (cash basis only)
necessarily equal the amounts in column (a) )  1 Contributions, gifts, grants, etc., received	DAPONOCO POT DOCKO	70	N/A	(cash basis only)
2 Check ► X If the foundation is not required to attach Sch. B				
3 Interest on savings and temporary cash investments	16,259.	16,259.		STATEMENT 1
4 Dividends and interest from securities 5a Gross rents	10,239.	10,239.		DEFIELDIEN I
b Net rental income or (loss)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
68 Net gain or (loss) from sale of assets not on line 10	-28,360.			
b Gross sales price for all 906, 307.  7 Capital gain net income (from Part IV, line 2)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0.		
8 Net short-term capital gain				
9 Income modifications Gross sales less returns				
and allowances		H	} 	
C Gross profit or (loss)				
11 Other income	10 101	16 250		
12 Total Add lines 1 through 11	-12,101. 0.	16,259.		0.
<ul><li>13 Compensation of officers, directors, trustees, etc</li><li>14 Other employee salaries and wages</li></ul>				
15 Pension plans, employee benefits				
16a Legal fees	2 400	1 245		1,245.
b Accounting fees STMT 2  C Other professional fees STMT 3	2,490. 3,091.	1,245. 3,091.	<u> </u>	0.
b Accounting fees STMT 2 c Other professional fees STMT 3  17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications	3,0320			
18 Taxes				<del></del>
19 Depreciation and depletion				
20 Occupancy 21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses STMT 4	65.	0.		65.
23 Other expenses STMT 4  Total operating and administrative expenses. Add lines 13 through 23	5,646.	4,336.		1,310.
expenses. Add lines 13 through 23  Contributions, gifts, grants paid	28,080.	1,550		28,080.
26 Total expenses and disbursements.	22.726	4 226		20 200
Add lines 24 and 25	33,726.	4,336	•	29,390.
27 Subtract line 26 from line 12  a Excess of revenue over expenses and disbursements	-45-827.	VEL a		
b Net investment income (if negative, enter -0-)		2010 10,923		
C Adjusted net income (if negative, enter -0-)	AUG 0	Zora legi	N/A	5 000 DE (05:5)
323501 10-10-13 LHA For Paperwork Reduction Act Notice, see	instructions.	00 000		Form <b>990-PF</b> (2013)

Form 990-PF (2013) THE BAKER FAMILY FOUNDATION, INC.				04-3535659 Page 2			
p,	ari	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	<u>·                                     </u>		
			(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing	25 260	101 775	101 775		
	2	Savings and temporary cash investments	25,360.	101,775.	101,775.		
	3	Accounts receivable					
		Less allowance for doubtful accounts			<del> </del>		
	4	Pledges receivable					
	_	Less allowance for doubtful accounts					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons					
	7	Other notes and loans receivable		1			
	_	Less allowance for doubtful accounts					
ets		Inventories for sale or use					
Assets		Prepaid expenses and deferred charges	<del></del>		<u> </u>		
		Investments - U.S. and state government obligations	14,157.	0.	0.		
		Investments - corporate stock STMT 5	14,137.				
		Investments - corporate bonds					
	11	Investments - land, buildings, and equipment basis		İ			
		Less accumulated depreciation	-		· <del></del>		
	l	Investments - mortgage loans Investments - other STMT 6	584,881.	476,796.	496,007.		
	13		304,001.	410,100.	450,007.		
	14	Land, buildings, and equipment basis		1			
	l . <u>.</u>	Less accumulated depreciation					
		Other assets (describe					
	16	Total assets (to be completed by all filers - see the	624,398.	578,571.	597,782.		
	47	instructions Also, see page 1, item 1)	024/370.	370/3710	33,7,021		
	l .	Accounts payable and accrued expenses					
	18	Grants payable					
Liabilities	19	Deferred revenue					
Ē	20	Loans from officers, directors, trustees, and other disqualified persons					
Ë	21	Mortgages and other notes payable					
	22	Other liabilities (describe					
	23	Total liabilities (add lines 17 through 22)	0.	0.			
_	20	Foundations that follow SFAS 117, check here					
		and complete lines 24 through 26 and lines 30 and 31.					
Š	24	Unrestricted	624,398.	578,571.	:		
anc	25	Temporarily restricted					
Bal	26	_ '					
5		Foundations that do not follow SFAS 117, check here					
Ŀ		and complete lines 27 through 31					
ō	27						
set	28	Paid-in or capital surplus, or land, bldg, and equipment fund					
Net Assets or Fund Balances	29	Retained earnings, accumulated income, endowment, or other funds					
ket	30	Total net assets or fund balances	624,398.	578,571.			
_							
	31	Total liabilities and net assets/fund balances	624,398.	578,571.			
F	art	Analysis of Changes in Net Assets or Fund B	alances				
_		al 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)		1	624,398.		
9	•	er amount from Part I, line 27a		2	-45,827.		
3		er increases not included in line 2 (itemize)		3	0.		
4		lines 1, 2, and 3		4	578,571.		
5		reases not included in line 2 (itemize)		5	0.		
		al net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	578,571.		
<u>-</u>					Form <b>990-PF</b> (2013)		

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

Form **990-PF** (2013)

31,015.

29,390.

7 Add lines 5 and 6

8 Enter qualifying distributions from Part XII, line 4

7

8

	990-PF (2013) THE BAKER FAMILY FOUNDATION, INC. 04-35 rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - s	535659		Page 4
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1		CLIOI	
14	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)			
h	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%		2	38.
U	of Part I, line 27b		······· <del>·</del>	***************************************
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0.
	Add lines 1 and 2		2	38.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		2	38.
	Credits/Payments Credits/Payments	., .,		
	2013 estimated tax payments and 2012 overpayment credited to 2013   6a   356 .			
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868)  6c			
	Backup withholding erroneously withheld 6d			
	Total credits and payments Add lines 6a through 6d		3	56.
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			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		1	18.
11	Enter the amount of line 10 to be Credited to 2014 estimated tax ▶ 118. Refunded ▶ 11			0.
Pa	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 intervene in		Yes	
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	1b	<u> </u>	X
	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			
C	Did the foundation file Form 1120-POL for this year?	10		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ► \$ 0. (2) On foundation managers ► \$ 0.	İ		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	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 incorporation, or			.,
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	<u> </u>	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?			v
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		v	
	remain in the governing instrument?	7	X	$\vdash$
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		_ ^_	
_	The second secon			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	MA	—		
t	if the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	8b	X	
_	of each state as required by General Instruction G? If "No," attach explanation	00	<del>  ^</del>	
g	is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	9	ľ	х
	year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV	10	l	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	Form QQ(	)_DE	

If "Yes," attach statement (see instructions)
section"512(b)(13)? If "Yes," attach schedule (see instructions)  12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?  12 If "Yes," attach statement (see instructions)  13 Ud the foundation comply with the public inspection requirements for its annual returns and exemption application?  14 The books are in care of PEDWARD BAKER  15 Section 4947(a)(1) nonexempt charitable trusts filling Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year  16 At any time during calendar year 2013, 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?  See the instructions for exceptions and filling requirements for Form TD F 90-22 1 If "Yes," enter the name of the foreign country Part 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.  10 During the year did the foundation (either directly or indirectly)  11 Engage in the sale or exchange, or leasing of property with a disqualified person?  12 Yes No  13 Furnish goods, services, or facilities to (or accept them from) a disqualified person?  14 Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  15 Yes X No  16 Transfer any income or assets to a disqualified person (or make any of either available)
If "Yes," attach statement (see instructions)  Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  Website address ► N/A  14 The books are in care of ► EDWARD BAKER Located at ► 14 GARFIELD RD, MILTON, MA  15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year  16 At any time during calendar year 2013, 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?  See the instructions for exceptions and filing requirements for Form TD F 90-221 If "Yes," enter the name of the foreign country  Part 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.  1a 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?  (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
13 Indicate the foundation comply with the public inspection requirements for its annual returns and exemption application?  Website address ► N/A  The books are in care of ► EDWARD BAKER Located at ► 14 GARFIELD RD, MILTON, MA  15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year  16 At any time during calendar year 2013, 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?  See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of the foreign country  Part 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.  1a 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?  (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
14 The books are in care of ▶ EDWARD BAKER  Located at ▶ 14 GARFIELD RD, MILTON, MA  15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year  16 At any time during calendar year 2013, 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?  See the instructions for exceptions and filling requirements for Form TD F 90-22 1. If "Yes," enter the name of the foreign country.  Part 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.  1a 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?  (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
Located at > 14 GARFIELD RD, MILTON, MA  2IP+4 > 02186  15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year  16 At any time during calendar year 2013, 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?  See the instructions for exceptions and filing requirements for Form TD F 90-221 If "Yes," enter the name of the foreign country >  Part 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.  1a 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?  (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
Section 4947(a)(1) nonexempt charitable trusts filling Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year  16 At any time during calendar year 2013, 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?  See the instructions for exceptions and filling requirements for Form TD F 90-22 1 If "Yes," enter the name of the foreign country  Part 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.  1a 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?  (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
and enter the amount of tax-exempt interest received or accrued during the year  16 At any time during calendar year 2013, 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?  See the instructions for exceptions and filling requirements for Form TD F 90-22 1 If "Yes," enter the name of the foreign country  Part 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.  1a 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?  (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
16 At any time during calendar year 2013, 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?  See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of the foreign country  Part 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.  1a 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?  (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
securities, or other financial account in a foreign country?  See the instructions for exceptions and filling requirements for Form TD F 90-22 1 If "Yes," enter the name of the foreign country  Part 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.  1a 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?  (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
See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of the foreign country  Part 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.  1a 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?  (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
Part 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.  1a 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?  (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
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  1a 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?  (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
1a 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?  (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) Engage in the sale or exchange, or leasing of property with a disqualified person?  (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) 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
(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
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
(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
(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
(5) Transfer any income or assets to a disqualified person (or make any of either available
for the benefit or use of a disqualified person)?
(6) As a standard and the standard of the stan
(6) Agree to pay money or property to a government official? (Exception. Check "No"
If the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)
b If any answer is "Yes" to 1a(1)-(6), did <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)?  N/A
section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?  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 2013?
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))
a At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning
before 2013?
If "Yes," list the years $\blacktriangleright$
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach
statement - see instructions ) N/A 2b
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here
<u> </u>
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time  during the year?  Yes X No
b If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or disqualified persons after
May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose
of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,
1 0/11/47 E0, to doto///mile if the real field of the series in the real field in th
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 2013?  4b X
Form 990-PF (2013

10-10-13

Form 990-PF (2013) THE BAKER FAMILY FOUNDAT	ION, INC.		04-353565	59 Page <b>6</b>
Part VII-B Statements Regarding Activities for Which F		equired (continu	ued)	
5a During the year did the foundation pay or incur any amount to (1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Ye	s X No	
<ul> <li>(2) Influence the outcome of any specific public election (see section 4955), o any voter registration drive?</li> <li>(3) Provide a grant to an individual for travel, study, or other similar purposes:</li> </ul>		Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization 509(a)(1), (2), or (3), or section 4940(d)(2)?			s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals?	or educational purposes, or fo		s X No	
b If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify und section 53 4945 or in a current notice regarding disaster assistance (see instru		n Regulations	N/A 5	b
Organizations relying on a current notice regarding disaster assistance check h  t If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	rom the tax because it maintai			
expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53.4945	5-5 <i>(d)</i> .	/A LYe	s L No	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract?		Ye	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p If "Yes" to 6b, file Form 8870			177	ib X
7a At any time during the tax year, was the foundation a party to a prohibited tax s b if "Yes," did the foundation receive any proceeds or have any net income attribution.	itable to the transaction?			'b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their	,	nagers, Highly	/	
List all officers, directors, trustees, roundation managers and them		(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	account, other allowances
	PRESIDENT, DI	RECTOR		
14 GARFIELD ROAD	1.00	0.	0.	0.
MILTON, MA 02186		RECTOR	0.	
	TREASURER, DI	RECION		
PO BOX 863	1.00	0.	0.	0.
NORWOOD, MA 02062	CLERK, DIRECT		0.	· · ·
DANIEL W. LEVERONI	CLERK, DIRECT	OK		
45 BRAINTREE HILL OFFICE PARK	1.00	0.	0.	0.
BRAINTREE, MA 02184	1.00	0.	0.	
2 Compensation of five highest-paid employees (other than those inc	luded on line 1) If none	enter "NONE "		
(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 account, other allowances
NONE				
				_
				0
Total number of other employees paid over \$50,000			<u> </u>	990-PF (2013)

Form **990-PF** (2013)

	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, s	see instructions.)
<u> </u>	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	559,996.
		1b	559,996. 44,386.
C	Fair market value of all other assets	1c	•
	Total (add lines 1a, b, and c)	1d	604,382.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	604,382.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	9,066.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	595,316.
6	Minimum investment return Enter 5% of line 5	6	29,766.
P	foreign organizations check here and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	29,766.
	Tax on investment income for 2013 from Part VI, line 5		
b			
C	Add lines 2a and 2b	2c	238.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	238. 29,528.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	29,528.
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	29,528.
_	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		00 000
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	29,390. 0.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	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	29,390.
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	29,390.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years	qualifies for	the section

Form **990-PF** (2013)

# Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI, line 7				29,528.
2 Undistributed income, if any, as of the end of 2013			· · · · · · · · · · · · · · · · · · ·	
a Enter amount for 2012 only			27,490.	
b Total for prior years	· · · · · · · · · · · · · · · · · · ·			
		0.		
3 Excess distributions carryover, if any, to 2013				
a From 2008				
b From 2009				
c From 2010				
d From 2011		į		
e From 2012		į		
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2013 from				
Part XII, line 4 ► \$ 29,390.				
a Applied to 2012, but not more than line 2a	· · · · · · · · · · · · · · · · · · ·		27,490.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		· ······
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			1 000
d Applied to 2013 distributable amount				1,900.
e Remaining amount distributed out of corpus	0.		· · · · · · · · · · · · · · · · · · ·	····
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2012 Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2013 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2014			···············	27,628.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2008	•			
not applied on line 5 or line 7	0.			······
9 Excess distributions carryover to 2014.	•			
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2009				
b Excess from 2010				
c Excess from 2011				
d Excess from 2012				
e Excess from 2013	<del></del>	1		Form 000 DE /2012\

		OUNDATION,			535659 Page 10
Part XIV Private Operating F	<b>oundations</b> (see In	structions and Part V	II-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter tha	t it is a private operating			
foundation, and the ruling is effective fo	r 2013, enter the date of	the ruling	<b>&gt;</b>		
b Check box to indicate whether the found	iation is a private operati	ng foundation described	in section	4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
investment return from Part X for					
each year listed					
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not				<del></del>	
used directly for active conduct of					1
•					
exempt activities		<del>                                     </del>			
e Qualifying distributions made directly				ļ	
for active conduct of exempt activities					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the	<u> </u>				-
alternative test relied upon					
a "Assets" alternative test - enter					
(1) Value of all assets			<del> </del>		
(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		1			
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)		İ			
(2) Support from general public					
and 5 or more exempt			1		
organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from				-,	
an exempt organization					
(4) Gross investment income					<del> </del>
Part XV Supplementary Info	rmation (Comple	ete this part only	if the foundation	n had \$5,000 or m	nore in assets
at any time during 1			, ii tiio iodiidalio		
1 Information Regarding Foundation			· · · · · · · · · · · · · · · · · · ·	<u> </u>	
a List any managers of the foundation wh		than 2% of the total co	ntributions received by th	e foundation before the cl	ose of any tax
year (but only if they have contributed i	nore than \$5,000) (See	section 507(d)(2) )			
EDWARD H. BAKER					
b List any managers of the foundation wh	no own 10% or more of t	he stock of a corporation	n (or an equally large por	tion of the ownership of a	partnership or
other entity) of which the foundation ha	is a 10% or greater inter	est		·	
NONE					
2 Information Regarding Contribut	ion, Grant, Gift, Loar	n, Scholarship, etc., I	Programs:		
Check here ► X if the foundation				not accept unsolicited re-	quests for funds If
the foundation makes gifts, grants, etc	(see instructions) to ind	ividuals or organizations	under other conditions,	complete items 2a, b, c, a	nd d
a The name, address, and telephone num					· <del>- · · · · · · · · · · · · · · · · · ·</del>
a The harrie, address, and telephone harr					
b The form in which applications should	be submitted and inform	ation and materials they	should include		
c Any submission deadlines					
d Any restrictions or limitations on award	ls, such as hy deodraphi	cal areas, charitable field	s, kinds of institutions of	r other factors	<del>-</del>
a Any restrictions of irritations on award	is, such as by geographi	our areas, enantable liciu	o, ando of montations, o		
					Form <b>QQD_PF</b> /2013

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or contribution show any relationship to Foundation **Amount** any foundation manager status of Name and address (home or business) or substantial contributor recipient a Paid during the year ALS FAMILY CHARITABLE FOUNDATION, INC. N/A SUPPORT P.O. BOX 229 BUZZARDS BAY, MA 02532 115. AMERICAN CANCER SOCIETY N/A N/A SUPPORT 30 SPEEN STREET 1,000. FRAMINGHAM, MA 01701 BETH ISRAEL SUPPORT N/A N/A 333 BROOKLINE AVENUE BOSTON, MA 02215 1,200. SUPPORT BOSTON COLLEGE N/A N/A 140 COMMONWEALTH AVENUE 5,000. CHESTNUT HILL, MA 02467 SUPPORT BOURNE BRAVES BASEBALL N/A N/A P.O. BOX 895 MONUMENT BEACH, MA 02553 22<u>5.</u> SEE CONTINUATION SHEET(S) ➤ 3a 28,080. **b** Approved for future payment NONE **▶** 3b Total

(e)

Part XVI-A Analysis of Income-Pro	oducing Activi	ties		
Enter gross amounts unless otherwise indicated	Unrelate	d business income	Excluded by	section 512, 513
<del>g</del>	(a)	(b)	(C) Exclu-	(d)

Program service revenue     a	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
	_				
	1		$\vdash$		
d					
u					
f	_		<del>  </del>		
g Fees and contracts from government agencies		<del></del>			
2 Membership dues and assessments	<u> </u>				<del></del>
3 Interest on savings and temporary cash	<del></del>	<del></del>			<del>-</del>
Investments					
4 Dividends and interest from securities	<del></del>		14	16,259.	
5 Net rental income or (loss) from real estate			1.		
a Debt-financed property	<del></del>		1		<u> </u>
b Not debt-financed property					
6 Net rental income or (loss) from personal	<del>-</del>			·	
property					
7 Other investment income				<del></del>	
8 Gain or (loss) from sales of assets other			$\vdash$		
than inventory			18	-28,360.	
9 Net income or (loss) from special events			10		<del></del>
O Gross profit or (loss) from sales of inventory	<del>                                     </del>		1	<del>-</del>	
1 Other revenue					
	Į.				
		_ <del></del>	<del> </del>		·····
b					
<u> </u>			-		
d	- <del>    -</del>				
E	_ <del>                                    </del>	0.	-	-12,101.	0
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>		<u>'                                    </u>	12/1010	-12,101
See worksheet in line 13 instructions to verify calculations  Part XVI-B Relationship of Activities		nolishment of E	xemp	t Purposes	
Line No. Explain below how each activity for which in the foundation's exempt purposes (other the	ncome is reported in	column (e) of Part XVI-A			iplishment of
		-			
323621 10-10-13		<del></del> _		<del></del>	Form <b>990-PF</b> (201

Part	XVII	Exempt Organ		sters To a	ınd Transactions a	and Relations	hips With Non	charitable	•
1 D	d the or			of the fellows	- with any other arganization	an described in sect		[	Yes No
					g with any other organization		10ft 50 f (c) 0f		Tes No
					7, relating to political organ	ilzations /			
		from the reporting found:	ation to a noncharital	ole exempt org	janization of			4 - (4 )	v
	) Cash	annata.						1a(1)	$-\frac{x}{x}$
	) Other							1a(2)	
	ther trans		hla					4.4	v
		of assets to a noncharita						1b(1)	- X X
	•	ases of assets from a no		rganization				1b(2)	- X
•	•	of facilities, equipment,						1b(3)	X
-	•	oursement arrangements						1b(4)	$\frac{\lambda}{X}$
		or loan guarantees mance of services or me						1b(5)	X
•	1b(6)	$\frac{X}{X}$							
	-	facilities, equipment, ma	• .		•	wave chair the fair m	markat valua of the ac	16 l	
				-	dule Column (b) should al ed less than fair market vali	=	_		oto,
	<del> </del>	the value of the goods,	<del>,</del>						
(a) Line	no	(b) Amount involved	(c) Name of	N/A	exempt organization	(U) Description	of transfers, transaction	s, and sharing am	angements
	-			14/ 21					
	_				· · · · · · · · · · · · · · · · · · ·				
									<del></del>
	_								<del></del> .
	<del></del>					-	<del></del>		
	<del> </del> -								
	<del></del>					<del> </del>	<del></del>		
	+		<del> </del>		****	_			
	-				· · · · · · · · · · · · · · · · · · ·				
							<del></del>		
2a 19	the four	idation directly or indirec	tly affiliated with, or i	related to, one	or more tax-exempt organ	izations described			
Ir	section	501(c) of the Code (othe	r than section 501(c)	(3)) or in sect	ion 527?			Yes	X No
<u>b</u> if	"Yes," co	mplete the following sch			<del></del>	<del></del>			
		(a) Name of org	ganization		(b) Type of organization		(c) Description of rela	ationship	
		N/A	·			ļ			
						<del>                                     </del>			
			· · · · · · · · · · · · · · · · · · ·			-			
					g accompanying schedules and			May the IRS o	iscuss this
Sign		elief, it is true, correct, and cor	mplete Declaration of pr	eparer (other tha	n taxpayer) is based on all infor	mation of which program	DENT ,	return with the shown below	preparer
Here						DIRECT	ror	X Yes	
	Sign	ature of officer or trustee	9		Date	Title		<u> </u>	
		Print/Type preparer's na	ame	Preparer's s	ignature	Date	. —	PTIN	
<b>.</b> .					1	05/14/11	self- employed	200160	407
Paid		JOHN MCGON		<del></del>	CGONACLE	05/14/14		P00168	
-	oarer	Firm's name ►LIV	INGSTON &	HAYNE	S, P.C.		Firm's EIN ► 04	1-23301	13
use	Only	Firm's address > 40	CDOVE CO	<u>ក្នុកា</u>			-		
		Firm's address > 40	CLLESLEY,		82-7711		Phone no (78	31)237-	3339
		I WE	<u> </u>	141 024	JE IIII		Linone no (70		)-PF (2013)

Part IV   Capital Gains and Los	sses for Tax on Investment Income				
	describe the kind(s) of property solick warehouse, or common stock, 2		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a LPL · 0706 CAP G	AIN DIST	10 c d 42		VARIOUS	12/31/13
b LPL 0706				VARIOUS	12/31/13
c LPL 5017 CAP G	AIN DIST			VARIOUS	12/31/13
d RETAIL PROPERT	IES (INLAND)			VARIOUS	12/23/13
e RETAIL PROPERT				VARIOUS	05/10/13
f PIMCO TOTAL RE	TURN			VARIOUS	10/11/13
g					
1					
k					
<u> </u>					
m					
n					<u>.</u>
0					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		Gain or (loss) lus (f) minus (g)	
a 3,014.				-	3,014.
b 803,493.		792,576.			10,917.
c 2,459.					2,459.
d 69,759.		111,179.			-41,420.
e 7,602.		12,116.			-4,514.
f 19,980.		18,796.			1,184.
g					
<u>h</u>					
1					
1					
<u>k</u>					
1					
<u>m</u>					
<u>n</u>					
Complete only for assets shown	ng gain in column (h) and owned by	the foundation on 12/31/69	(1) L os	sses (from col (h))	
(i) F M V as of 12/31/69	(i) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	Gains (excess	of col (h) gain ove lot less than "-0-")	
	83 01 12/31/03				3,014.
<u>a</u>				<del>-</del> .	10,917.
<u>b</u>					2,459.
<u>C</u>		-	<del></del> -		-41,420.
<u>d</u>		<del>                                     </del>			-4,514.
f f					1,184.
g					
h					
<u>"</u>					· <del>-</del>
1					
k	7				
1					
m					
n					
0					
	e If anim alon ente	or in Part Lline 7			00 000
2 Capital gain net income or (net c	apital loss) ( If (loss), enter "	er in Part I, line 7 -0-" in Part I, line 7	2		<del>-28,360.</del>
3 Net short-term capital gain or (lo		<b>\</b>			
If gain, also enter in Part I, line 8	, column (c)	}		37 / P	
If (loss), enter "-0-" in Part I, line	8		3	N/A	

Part XV Supplementary Informa				
3 Grants and Contributions Paid During t	he Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
	Of Sobstantial Contributor	, voi.p.o.ix		
BOURNE CONSERVATION TRUST	N/A	N/A	SUPPORT	
1104 RTE 28A CATAUMET, MA 02534				200.
CATAOMBI, IN 02334		<u> </u>	<del> </del>	200.
GIRB GOD GIRBUON				
CAPE COD SYMPHONY 712A MAIN STREET	N/A	N/A	SUPPORT	
YARMOUTH PORT, MA 02675				200.
CURRY OOLI FOR	N/A	N/A	SUPPORT	
CURRY COLLEGE 1071 BLUE HILLS AVENUE	N/A	N/A	SUPPORT	
MILTON, MA 02186				1,100.
DANA TARRED CANCER INCH	7/2	N/A	SUPPORT	
DANA FARBER CANCER INST 10 BROOKLINE PLACE	N/A	N/A	SUPPORT	
BROOKLINE, MA 02445				1,100.
EASTER SEALS	N/A	N/A	SUPPORT	
484 MAIN ST	N/A	<b>1</b> /2	BOFFORT	
WORCESTER, MA 01608				200.
FRIENDS OF THE BLUE HILLS	N/A	N/A	SUPPORT	
P.O. BOX 416	17.5	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	por rowi	
MILTON, MA 02186				105.
HOSPICE OF THE SOUTH SHORE	N/A	N/A	SUPPORT	
100 BAY STATE DRIVE				i
BRAINTREE, MA 02185				200.
				<u> </u>
JOSLIN DIABETES CTR	N/A	N/A	SUPPORT	
ONE JOSLIN PLACE				
BOSTON, MA 02215				2,000.
				1
MARC A. SUSI FUND	N/A	N/A	SUPPORT	
62 DERBY ST				
HINGHAM, MA 02043		<del> </del>		100.
MASS AUDOBON SOCIETY	N/A	N/A	SUPPORT	
208 SOUTH GREAT ROAD LINCOLN, MA 01773				200.
Total from continuation sheets				20,540.

Part XV Supplementary Informat  3 Grants and Contributions Paid During th				
Recipient	If recipient is an individual,		T	
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
WITE DELIVE WENCELLY THE				
MIKE DEVIN MEMORIAL FUND 94 ANTWERP STREET	N/A	N/A	SUPPORT	
MILTON MA 02186				75
MILTON ANIMAL LEAGUE	N/A	N/A	SUPPORT	
181 GOVERNON STOUGHTON LANE				
MILTON, MA 02186		ļ		200
MILTON COUNCIL ON AGING	N/A	N/A	SUPPORT	]
10 WALNUT STREET				]
MILTON, MA 02186				100
MILTON FOUNDATION FOR EDUCTIONS	N/A	N/A	SUPPORT	
MILTON, MA		<u> </u>		65
MILTON HIGH BOOSTERS	N/A	N/A	SUPPORT	
25 GILE ROAD				
MILTON, MA 02186				200
MILTON HIGH SCHOOL SCHOLARSHIP	N/A	N/A	SUPPORT	
PROGRAM				
25 GILE ROAD				1
MILTON, MA 02186				1,200
····				
MILTON LIBRARY FOUNDATION 476 CANTON AVENUE	N/A	N/A	SUPPORT	
MILTON, MA 02186				350
MILTON ROTARY	N/A		SUPPORT	
61 SCHOOL STREET				
MILTON, MA 02186				100
NAME		N / 2	CUID DODGE	
NATIONAL WILDLIFE FED 11100 WILDLIFE CENTER	N/A	N/A	SUPPORT	
RESTON, VA 20190				200
NEW ENGLAND WILDLIFE CENTER	N/A	N/A	SUPPORT	
500 COLUMBIAN STREET				
SOUTH WEYMOUTH, MA 02190		<u> </u>		400
Total from continuation sheets				

Part XV Supplementary Informati				
3 Grants and Contributions Paid During the	e Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
OLD COLONY HOSPICE	N/A	N/A	SUPPORT	
ONE CREDIT UNION WAY				
BRAINTREE, MA 02185		<u> </u>		100.
PINE STREET INN	N/A	İ	SUPPORT	
444 HARRISON AVE				
BOSTON, MA 02118				100.
RENAISSANCE CHARITABLE FOUNDATION	N/A		SUPPORT	
6100 W. 96TH ST. STE 105			ł	
INDIANAPOLIS, IN 46278				5,000.
SOUTH SHORE HOSPITAL SOC	N/A	N/A	SUPPORT	
44 FOGG ROAD				
SOUTH WEYMOUTH, MA 02190	_ <del>-</del>			125.
ST. AGATHAS PARISH	N/A	N/A	SUPPORT	
432 ADAMS ST			1	
MILTON, MA 02186				200.
ST. ELIZABETHS PARISH	N/A	N/A	SUPPORT	
350 REEDSDALE ROAD				
MILTON, MA 02186				200.
ST. JOHN'S PARISH	N/A	N/A	SUPPORT	
15 VIRGINIA ROAD				
POCASSET, MA 02559	_	<del>-</del>		200.
ST. MARY OF THE HILLS	N/A	N/A	SUPPORT	
29 ST. MARY'S ROAD		1		
MILTON, MA 02186				625.
ST. MICHAEL'S COLLEGE	N/A	N/A	SUPPORT	
ONE WINOOSKI PARK				3
COLCHESTER, VT	<del></del>	<del> </del>		3,100.
WGBH	N/A	N/A	SUPPORT	
P.O. BOX 200				220.
Total from continuation sheets				
rarai nom commingrion succis				

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) recipient or substantial contributor WORLD WILDLIFE FUND N/A N/A SUPPORT 1250 24 ST NW WASHINGTON, DC 20090 200. YAWKEY BASEBALL LEAGUE N/A SUPPORT N/A 31 ELY ROAD DORCHESTER, MA 02124 200. N/A SUPPORT BILL GREENS GOLF SCHOLARSHIP N/A 543 BRIDGE STREET LOWELL, MA 01850 200. CARING CIRCLE MILTON CATHOLIC N/A N/A SUPPORT COLLABORATIVE 440 ADAMS STREET 200. MILTON, MA 02186 SUPPORT FRIENDS OF MILTON HOSPITAL N/A N/A 199 REEDSDALE ROAD 100. MILTON, MA 02186 SUPPORT MILTON HIGH FOOTBALL N/A N/A 25 GILE ROAD MILTON, MA 02186 25. MILTON HIGH SCHOOL CREW N/A SUPPORT N/A 25 GILE ROAD 50. MILTON, MA 02186 NOTRE DAME ACADEMY N/A SUPPORT N/A 1073 MAIN STREET 100. HINGHAM, MA 02043 N/A SUPPORT PARKINSONS FOUNDATION N/A P.O. BOX 5018 1,000. HAGERSTOWN MD 21741 SUPPORT N/A N/A THOMAS S GUNNING FOUNDATION 100 GROSSMAN DRIVE SUITE 200 200. BRAINTREE, MA 02184 Total from continuation sheets

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Ye	ear (Continuation)			
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)	or substantial contributor	recipient	Contribution	
VNA CARE HOSPICE	N/A	N/A	SUPPORT	
120 THOMAS STREET				
WORCESTER, MA 01608	-	<u> </u>	<u> </u>	100.
				-
<del> </del>	<u> </u>	-	<u> </u>	
		1		
	1			
Total from continuation chapts				i

FORM 990-PF DIV	/IDENDS	AND INTER	EST FROM SECUR	ITIES ST	TATEMENT 1
	ROSS MOUNT	CAPITAL GAINS DIVIDENDS	REVENUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
DIVIDENDS AND INTEREST 1	16,259.		0. 16,259.	16,259.	
TO PART I, LINE 4	16,259.	(	0. 16,259.	16,259.	
FORM 990-PF		ACCOUNTI	NG FEES	Si	FATEMENT 2
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LIVINGSTON & HAYNES, PC		2,490.	1,245.		1,245.
TO FORM 990-PF, PG 1, LN 16B					
TO FORM 990-PF, PG 1, LN	N 16B	2,490.	1,245.		1,245.
TO FORM 990-PF, PG 1, LN FORM 990-PF			1,245. SIONAL FEES	S	1,245. TATEMENT 3
	ОТ		SIONAL FEES  (B)  NET INVEST-	(C) ADJUSTED NET INCOME	
FORM 990-PF	ОТ	HER PROFES  (A)  EXPENSES	SIONAL FEES  (B)  NET INVEST-  MENT INCOME	(C) ADJUSTED	TATEMENT 3  (D)  CHARITABLE
FORM 990-PF  DESCRIPTION	OT	HER PROFES  (A)  EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME  3,091.	(C) ADJUSTED	(D) CHARITABLE PURPOSES
FORM 990-PF  DESCRIPTION INVESTMENT FEES	OT	(A) EXPENSES PER BOOKS 3,091.	(B) NET INVEST- MENT INCOME  3,091.	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES  0.
FORM 990-PF  DESCRIPTION  INVESTMENT FEES  TO FORM 990-PF, PG 1, LN	OT N 16C	(A) EXPENSES PER BOOKS 3,091.	(B) NET INVEST- MENT INCOME  3,091.  3,091.  XPENSES  (B) NET INVEST-	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES  0.
FORM 990-PF  DESCRIPTION  INVESTMENT FEES  TO FORM 990-PF, PG 1, LN  FORM 990-PF	OT N 16C	(A) EXPENSES PER BOOKS 3,091. 3,091. OTHER E	(B) NET INVEST- MENT INCOME  3,091.  3,091.  XPENSES  (B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME  ST  (C) ADJUSTED	(D) CHARITABLE PURPOSES  0.  1ATEMENT 4  (D) CHARITABLE

FORM 990-PF	CORPO	DRATE STOCK		STATEMENT	
DESCRIPTION			BOOK VALUE	FAIR MARKE VALUE	T
SPDR GOLD TRUST GOLD SHARES		-	0.		0.
DIDA GOLD INGOI GOLD DIMAND					
TOTAL TO FORM 990-PF, PART II,	LINE	10B :	0.	<del></del>	0.
FORM 990-PF	OTHER	INVESTMENTS		STATEMENT	6
DESCRIPTION		VALUATION METHOD	BOOK VALUE	FAIR MARKE VALUE	T
INLAND WESTERN RETAIL REAL ESTA	ATE	COST			
TRUST			0.		0.
PIMCO FDS PAC INVT MGMT SER		COST	22,066.	21,5	
PIMCO FDS TOTAL RETURN		COST	71,989.	71,4	
BLACKROCK GLOBAL		COST	20,503.	23,4	
FIRST EAGLE FUNDS GLOBAL		COST	21,105.	24,7	
IVY FUNDS ASSET STRATEGY		COST	20,426.	28,6	
EATON VANCE MUNI NATL INCME FD	_	COST	9,709.	9,6	
PIMCO FDS GLOBAL MULTI ASSET F	D	COST	21,194.	19,5	
DOUBLELINE TOTAL RETURN BOND		COST	12,256.	11,7	
COLUMBIA MARISCO GROWTH		COST COST	14,824. 5,365.	13,7 5,5	
DREYFUS APPRECIATION HARTFORD GROWTH OPPTYS		COST	12,366.	12,5	
ISHARES 1-3 YR CREDIT BOND		COST	2,004.	2,0	
ISHARES CORE TOTAL US BOND MKT		COST	16,665.	16,4	
ISHARES CORE S&P 500		COST	884.		28.
ISHARES FLOATING RATE BOND		COST	3,902.	3,9	
ISHARES MSCI EAFE		COST	17,905.	18,4	
ISHARES MSCI EMU		COST	2,278.	2,4	
ISHARES MSCI GERMANY		COST	5,570.	6,0	65.
ISHARES MSCI UNITED KINGDOM		COST	2,796.	2,8	81.
ISHARES RUSSELL 1000		COST	19,137.	20,1	18.
JOHN HANCOCK CLASSIC VALUE		COST	7,600.	7,8	
LEGG MASON OPPORTUNITY		COST	5,415.	5,8	20.
LOOMIS SAYLES INVESTMENT GRADE		COST			
BONDS		_	11,203.	10,7	
MAINSTAY HIGH YIELD CORP BOND		COST	4,374.	4,3	
MANAGERS YACKTMAN SERVICE		COST	7,725.	7,6	
OSTERWEIS STRATEGIC INCOME		COST	5,472.	5,4	
PARNASSUS SMALL CAP		COST	4,415. 5,427	4,3 5,3	
PIONEER GLOBAL HIGH YIELD	מחמט	COST	5,427. 6,138.	6,5	
SECTOR FINANCIAL SELECT SECTOR		COST COST	1,529.	1,6	
SECTOR HEALTHCARE SELECT SECTO SECTOR TECHNOLOGY SELECT SECTO		COST	4,452.	4,7	
PECTOR IFCUNOFORI PEFECT PECTO	1/	COSI	10,964.	10,7	10

THE BAKER FAMILY FOUNDATION, INC.			04-3535659
WISDOMTREE JAPAN HEDGED EQUITY ISHARES CORE S&P MID CAP ISHARES CORE S&P 500 ETF PROSHARES ULTRA S&P 500 PROSHARES ULTRA MID CAP 400	COST COST COST COST	2,406. 30,924. 30,901. 17,423. 17,484.	2,644. 31,981. 32,303. 19,179. 18,781.
TOTAL TO FORM 990-PF, PART II, LINE 13		476,796.	496,007.

### Form **8868**

(Rev. January 2014)

Department of the Treasury Internal Revenue Service

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

► File a separate application for each return.

Information about Form 8868 and its instructions is at www.irs.gov/form8868

OMB No. 1545-1709

**.** [37]

Form 8868 (Rev. 1-2014)

lf vo	are filing for an Automatic 3-Month Extension, com	piete only Pa	it i and check this box				
, -	are filing for an Additional (Not Automatic) 3-Month	Extension, o	complete only Part II (on page 2 of	this form).			
Do no	complete Part II unless you have already been grant	ed an automa	itic 3-month extension on a previou	sly filed For	m 8868.		
Electro	nic filing (e-file). You can electronically file Form 8868	I if you need a	a 3-month automatic extension of til	ne to file (6	months for	a corporation	
equire	to file Form 990-T), or an additional (not automatic) 3-	month extens	sion of time. You can electronically t	ile Form 88	68 to reque	st an extension	
of time	to file any of the forms listed in Part I or Part II with the	exception of	Form 8870, Information Return for	Transfers A	ssociated W	/ith Certain	
ersor	al Benefit Contracts, which must be sent to the IRS in	paper format	(see instructions). For more details	on the elect	ronic filing o	of this form,	
ısıt wı	w.irs gov/efile and click on e-file for Charities & Nonpre	ofits.					
Part	Automatic 3-Month Extension of Ti	me. Only s	submit original (no copies ne	eded).			
corp	ration required to file Form 990-T and requesting an ai						
art I c	nly					▶ □	
All oth	r corporations (including 1120-C filers), partnerships, F	REMICs, and t	rusts must use Form 7004 to reque	st an extens	ion of time		
o file i	come tax returns.			Enter file	r's identifyi	ng number	
Type or Name of exempt organization or other filer, see instructions.				Employer	Employer identification number (EIN		
rint							
	THE BAKER FAMILY FOUNDAT	ON, IN	C.		04 - 35	35659	
ile by th	No de la contraction de la Con	·		Social sec	urity numbe	er (SSN)	
ling you	14 GARFIELD ROAD	•		İ	·		
etum Si Istructio		a foreign add	Iress, see instructions.	1			
	MILTON, MA 02186	3	,				
				***	•		
nter t	ne Return code for the return that this application is fol	file a separa	te application for each return)			0 4	
Applic	ation	Return	Application			Return	
s For		Code	ls For			Code	
	90 or Form 990-EZ	01	Form 990-T (corporation)			07	
orm 9		02	Form 1041·A			08	
	720 (Individual)	03	Form 4720 (other than individual)			09	
	90-PF	04	Form 5227			10	
	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
	90-T (trust other than above)	06	Form 8870			12	
	EDWARD BAKER						
The	books are in the care of ▶ 14 GARFIELD I	RD - MI	LTON, MA 02186				
	phone No ▶ 781-848-9821		Fax No. ▶				
	e organization does not have an office or place of busi	– ness in the Ui					
	· · · · · · · · · · · · · · · · · · ·					roup abook this	
	s is for a Group Return, enter the organization's four o	lait Group Exc	emption Number (GEN) .	If this is for	the whole c	HOUD, CHECK HIS	
• If th	s is for a Group Return, enter the organization's four d		_				
lf th	. If it is for part of the group, check this box	and atta	ach a list with the names and EINs	of all memb			
lf th	. If it is for part of the group, check this box request an automatic 3-month (6 months for a corpora	and atta	ach a list with the names and EINs of to file Form 990-T) extension of time	of all membe e until	ers the exter	nsion is for	
lf th	request an automatic 3-month (6 months for a corpora AUGUST 15, 2014, to file the exception of the group, check this box.	and atta	ach a list with the names and EINs	of all membe e until	ers the exter	nsion is for	
● If the poox ■	request an automatic 3-month (6 months for a corpora AUGUST 15, 2014 , to file the exect of the organization's return for:	and atta	ach a list with the names and EINs of to file Form 990-T) extension of time	of all membe e until	ers the exter	nsion is for	
lf thoox ▶	request an automatic 3-month (6 months for a corpora AUGUST 15, 2014 , to file the exest of the organization's return for:  X calendar year 2013 or	and atta ation required empt organiza	ach a list with the names and EINs of to file Form 990-T) extension of time ation return for the organization name	of all membe e until	ers the exter	nsion is for	
● If the poox ■	request an automatic 3-month (6 months for a corpora AUGUST 15, 2014 , to file the exect of the organization's return for:	and atta ation required empt organiza	ach a list with the names and EINs of to file Form 990-T) extension of time	of all membe e until	ers the exter	nsion is for	
If thoox D	. If it is for part of the group, check this box request an automatic 3-month (6 months for a corpora AUGUST 15, 2014 , to file the exector of the organization's return for:  X calendar year 2013 or tax year beginning	and atta	ach a list with the names and EINs of to file Form 990-T) extension of time ation return for the organization named ending	of all memb e until ned above.	ers the extension	nsion is for	
If thoox D	. If it is for part of the group, check this box request an automatic 3-month (6 months for a corpora AUGUST 15, 2014, to file the exercise for the organization's return for:  X calendar year 2013 or tax year beginning	and atta	ach a list with the names and EINs of to file Form 990-T) extension of time ation return for the organization named ending	of all membe e until	ers the extension	nsion is for	
If the pox 1	. If it is for part of the group, check this box request an automatic 3-month (6 months for a corpora AUGUST 15, 2014, to file the exercise for the organization's return for:  X calendar year 2013 or tax year beginning  the tax year entered in line 1 is for less than 12 months. Change in accounting period	and atta	ach a list with the names and EINs of to file Form 990-T) extension of time ation return for the organization named ending	of all memb e until ned above.	ers the extension	nsion is for	
If the pox 1	If it is for part of the group, check this box request an automatic 3-month (6 months for a corpora AUGUST 15, 2014, to file the exist for the organization's return for:  X calendar year 2013 or tax year beginning  the tax year entered in line 1 is for less than 12 month Change in accounting period  this application is for Forms 990-BL, 990-PF, 990-T, 4	and atta	ach a list with the names and EINs of to file Form 990-T) extension of time ation return for the organization named ending	of all member of all members of all	The extension	nsion is for	
If the poor 1	. If it is for part of the group, check this box request an automatic 3-month (6 months for a corpora AUGUST 15, 2014, to file the exist for the organization's return for:  X calendar year 2013 or tax year beginning  the tax year entered in line 1 is for less than 12 month Change in accounting period this application is for Forms 990-BL, 990-PF, 990-T, 4 conrefundable credits. See instructions.	and attended and attended and attended	ach a list with the names and EINs of to file Form 990-T) extension of time ation return for the organization named ending	of all memb e until ned above.	ers the extension	nsion is for	
If the poor 1  2  3a  b	If it is for part of the group, check this box request an automatic 3-month (6 months for a corpora AUGUST 15, 2014, to file the exect of the organization's return for:  X calendar year 2013 or tax year beginning the tax year entered in line 1 is for less than 12 month Change in accounting period this application is for Forms 990-BL, 990-PF, 990-T, 4 conrefundable credits. See instructions.	and attention required empt organization, arms, check reased 720, or 6069, enter an	ach a list with the names and EINs of to file Form 990-T) extension of time ation return for the organization named ending	of all membre until ned above.	The extension	nsion is for	
If the poor 1	If it is for part of the group, check this box Prequest an automatic 3-month (6 months for a corpora AUGUST 15, 2014 , to file the excess for the organization's return for:  ■ X calendar year 2013 or  ■ tax year beginning  If the tax year entered in line 1 is for less than 12 months that the tax year beginning change in accounting period is this application is for Forms 990-BL, 990-PF, 990-T, 4 conrefundable credits. See instructions.  If this application is for Forms 990-PF, 990-T, 4720, or eastimated tax payments made. Include any prior year of the stimated tax payments made. Include any prior year of the stimated tax payments made.	and attention required empt organization, arms, check reasting, or 6069, enter anywerpayment at	ach a list with the names and EINs of to file Form 990-T) extension of time ation return for the organization named ending  son: Initial return  enter the tentative tax, less any by refundable credits and allowed as a credit.	of all member of all members of all	The extension	nsion is for	
lf the book 1  2  3a  b	If it is for part of the group, check this box request an automatic 3-month (6 months for a corpora AUGUST 15, 2014, to file the exect of the organization's return for:  X calendar year 2013 or tax year beginning the tax year entered in line 1 is for less than 12 month Change in accounting period this application is for Forms 990-BL, 990-PF, 990-T, 4 conrefundable credits. See instructions.	and atta atton required empt organiza , ar , ar , check reas 720, or 6069, 6069, enter an everpayment a r payment wi	ach a list with the names and EINs of to file Form 990-T) extension of time ation return for the organization named ending  son:  Initial return  enter the tentative tax, less any allowed as a credit.  th this form, if required,	of all membre until ned above.	The extension	nsion is for	

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

LHA 323841 12-31-13