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Form **990-PF****Return of Private Foundation**OMB No. 1545-0052 **PP-10R** PCDepartment of the Treasury
Internal Revenue Service

or **Section 4947(a)(1) Trust Treated as Private Foundation**
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Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

2013

Open to Public Inspection

For calendar year 2013 or tax year beginning

, 2013, and ending

, 20

Name of foundation **THE DUNKIN' DONUTS & BASKIN ROBBINS
COMMUNITY FOUNDATION INC**

A Employer identification number
26-0593784

Number and street (or P O box number if mail is not delivered to street address)

Room/suite

B Telephone number (see instructions)
(781) 737-3821

130 ROYALL STREET - MAIL STOP 2WA

City or town, state or province, country, and ZIP or foreign postal code

CANTON, MA 02021

C If exemption application is pending, check here ☐

G Check all that apply☐ Initial return☐ Initial return of a former public charity☐ Final return☐ Amended return☒ Address change☐ Name change**D 1 Foreign organizations, check here** ☐**2 Foreign organizations meeting the 85% test, check here and attach computation** ☐**H Check type of organization** ☒ Section 501(c)(3) exempt private foundation☐ Section 4947(a)(1) nonexempt charitable trust☐ Other taxable private foundation**E If private foundation status was terminated under section 507(b)(1)(A), check here** ☐

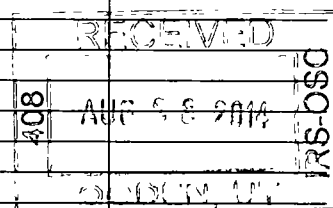
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 3,408,881.

J Accounting method: ☐ Cash ☒ Accrual

☐ Other (specify) _____
(Part I, column (d) must be on cash basis)

F If the foundation is in a 60-month termination 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 necessarily equal the amounts in column (a) (see instructions))

	(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 (attach schedule)	2,480,743.			
2 Check ☐ if the foundation is not required to attach Sch. B				
3 Interest on savings and temporary cash investments	4,090.	4,090.		
4 Dividends and interest from securities				
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10				
b Gross sales price for all assets on line 6a				
7 Capital gain net income (from Part IV, line 2)		0		
8 Net short-term capital gain				
9 Income modifications				
10a Gross sales less returns and allowances				
b Less Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule)				
12 Total. Add lines 1 through 11	2,484,833.	4,090.		
13 Compensation of officers, directors, trustees, etc.	0			
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees (attach schedule)	14,196.			14,196.
b Accounting fees (attach schedule)	64,008.			64,008.
c Other professional fees (attach schedule)	160,363.			160,363.
17 Interest	741.			741.
18 Taxes (attach schedule) (see instructions)				
19 Depreciation (attach schedule) and depletion	50,385.			
20 Occupancy	14,066.			14,066.
21 Travel, conferences, and meetings	21,866.			21,866.
22 Printing and publications	3,385.			3,385.
23 Other expenses (attach schedule) ATCH. 1.	499,365.			499,365.
24 Total operating and administrative expenses. Add lines 13 through 23	828,375.			777,990.
25 Contributions, gifts, grants paid	1,747,781.			802,463.
26 Total expenses and disbursements. Add lines 24 and 25	2,576,156.	0		1,580,453.
27 Subtract line 26 from line 12				
a Excess of revenue over expenses and disbursements	-91,323.			
b Net investment income (if negative, enter -0-)		4,090.		
c Adjusted net income (if negative, enter -0-)				



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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
Assets	1	Cash - non-interest-bearing		2,444,131.	3,163,396.	3,163,396.
	2	Savings and temporary cash investments				
	3	Accounts receivable ▶ 164,802.				
		Less: allowance for doubtful accounts ▶		320,063.	164,802.	164,802.
	4	Pledges receivable ▶				
		Less: allowance for doubtful accounts ▶		50,000.		
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule) ▶				
		Less: allowance for doubtful accounts ▶				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges		5,808.	19,570.	19,570.
	10 a	Investments - U S and state government obligations (attach schedule),				
	b	Investments - corporate stock (attach schedule)				
	c	Investments - corporate bonds (attach schedule),				
	Liabilities	11	Investments - land, buildings, and equipment basis ▶ Less: accumulated depreciation (attach schedule) ▶			
12		Investments - mortgage loans				
13		Investments - other (attach schedule)				
14		Land, buildings, and equipment basis ▶ 251,925. Less: accumulated depreciation (attach schedule) ▶ 190,812.		111,498.	61,113.	61,113.
15		Other assets (describe ▶)				
16		Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)		2,931,500.	3,408,881.	3,408,881.
17		Accounts payable and accrued expenses		106,984.	69,823.	
18		Grants payable		381,585.	992,325.	
19		Deferred revenue				
20		Loans from officers, directors, trustees, and other disqualified persons				
Net Assets or Fund Balances	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe ▶ ATCH 2)		18,440.	13,565.	
	23	Total liabilities (add lines 17 through 22)		507,009.	1,075,713.	
		Foundations that follow SFAS 117, check here, ☒ and complete lines 24 through 26 and lines 30 and 31.				
Net Assets or Fund Balances	24	Unrestricted		2,324,491.	2,333,168.	
	25	Temporarily restricted		100,000.		
	26	Permanently restricted				
		Foundations that do not follow SFAS 117, . . . ▶ ☐ check here and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds				
	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
	29	Retained earnings, accumulated income, endowment, or other funds				
	30	Total net assets or fund balances (see instructions),		2,424,491.	2,333,168.	
31	Total liabilities and net assets/fund balances (see instructions)		2,931,500.	3,408,881.		

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	2,424,491.
2	Enter amount from Part I, line 27a	2	-91,323.
3	Other increases not included in line 2 (itemize) ▶	3	0
4	Add lines 1, 2, and 3	4	2,333,168.
5	Decreases not included in line 2 (itemize) ▶	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	2,333,168.

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Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)			(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a					
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a					
b					
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))		
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any			
a					
b					
c					
d					
e					
2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }			2		
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8			3		

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2012	1,453,258.	2,181,913.	0.666048
2011	1,067,720.	1,609,648.	0.663325
2010	823,579.	1,154,182.	0.713561
2009	918,211.	1,021,860.	0.898568
2008	1,553,484.	1,181,069.	1.315320
2 Total of line 1, column (d)			4.256822
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			0.851364
4 Enter the net value of noncharitable-use assets for 2013 from Part X, line 5			2,744,382.
5 Multiply line 4 by line 3			2,336,468.
6 Enter 1% of net investment income (1% of Part I, line 27b)			41.
7 Add lines 5 and 6			2,336,509.
8 Enter qualifying distributions from Part XII, line 4			1,580,453.

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.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

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)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☐ and enter 1% of Part I, line 27b	1	0
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	
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		
a	2013 estimated tax payments and 2012 overpayment credited to 2013	6a	3.
b	Exempt foreign organizations - tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d	7	3.
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	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	3.
11	Enter the amount of line 10 to be Credited to 2014 estimated tax ☐ Refunded ☐	11	3.

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?		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?		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		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ☐ \$ 0		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?		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		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?		X
If "Yes," attach the statement required by General Instruction T		
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ☐		
----- ATTACHMENT - 3 -----		
b 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	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV.		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

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Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions).	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
Website address SEE ATTACHMENT				
14	The books are in care of CHRISTINE RILEY	Telephone no	781-737-3946	
	Located at ATTACHMENT 1	ZIP+4	02021	
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	15		
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?	16	Yes	No
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes," enter the name of the foreign country			X

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.

	Yes	No
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?	☐ Yes	☒ No
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	☐ Yes	☒ No
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	☐ Yes	☒ No
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	☐ Yes	☒ No
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	☐ Yes	☒ No
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days).	☐ Yes	☒ No
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)?		
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?		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))		
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?	☐ Yes	☒ No
If "Yes," list the years		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions)		
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 during the year?	☐ Yes	☒ 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, Form 4720, to determine if the foundation had excess business holdings in 2013)		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		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?		X

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Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

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))? ☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions) ☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? ☐ **5b**

Organizations relying on a current notice regarding disaster assistance check here ☐

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ **6b** X

If "Yes" to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ **7b**

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ATCH 5		0	0	0

2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). 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				

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

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
ATCH 6		219,702.

Total number of others receiving over \$50,000 for professional services ▶

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
All other program-related investments See instructions	
3 NONE	
Total. Add lines 1 through 3 ▶	

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	2,766,605.
c	Fair market value of all other assets (see instructions)	1c	19,570.
d	Total (add lines 1a, b, and c)	1d	2,786,175.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	2,786,175.
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see instructions)	4	41,793.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,744,382.
6	Minimum investment return. Enter 5% of line 5	6	137,219.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part)

1	Minimum investment return from Part X, line 6	1	137,219.
2a	Tax on investment income for 2013 from Part VI, line 5	2a	
b	Income tax for 2013 (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	137,219.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	137,219.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	137,219.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	1,580,453.
b	Program-related investments - total from Part IX-B	1b	
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	1,580,453.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	1,580,453.

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.

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Page **9****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				137,219.
2 Undistributed income, if any, as of the end of 2013				
a Enter amount for 2012 only				
b Total for prior years 20 <u>11</u> , 20 <u>10</u> , 20 <u>09</u>				
3 Excess distributions carryover, if any, to 2013				
a From 2008 1,394,644.				
b From 2009				
c From 2010 823,579.				
d From 2011 1,067,720.				
e From 2012 1,344,254.				
f Total of lines 3a through e	4,630,197.			
4 Qualifying distributions for 2013 from Part XII, line 4 ▶ \$ <u>1,580,453.</u>				
a Applied to 2012, 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)				
d Applied to 2013 distributable amount				137,219.
e Remaining amount distributed out of corpus	1,443,234.			
5 Excess distributions carryover applied to 2013 . (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	6,073,431.			
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				
d Subtract line 6c from line 6b Taxable amount - see instructions				
e Undistributed income for 2012 Subtract line 4a from line 2a Taxable amount - see instructions				
f Undistributed income for 2013 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2014				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8 Excess distributions carryover from 2008 not applied on line 5 or line 7 (see instructions)	1,394,644.			
9 Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a	4,678,787.			
10 Analysis of line 9				
a Excess from 2009				
b Excess from 2010 823,579.				
c Excess from 2011 1,067,720.				
d Excess from 2012 1,344,254.				
e Excess from 2013 1,443,234.				

Form **990-PF** (2013)

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

NOT APPLICABLE

- 1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2013, enter the date of the ruling: ▶

b Check box to indicate whether the foundation is a private operating foundation described in section

4942(1)(3) or

4942(1)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2013	(b) 2012	(c) 2011	(d) 2010	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed .					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test - enter					
(1) Value of all assets . . .					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i).					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed . . .					
c "Support" alternative test - enter					
(1) Total support other than gross investment income (interest dividends, rents payments on securities loans (section 512(a)(5)) or royalties).					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(ii)					
(3) Largest amount of support from an exempt organization.					
(4) Gross investment income .					

Part XV **Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see instructions.)**

1 Information Regarding Foundation Managers:

- a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

N/A

- b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

N/A

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

- a** The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

- b. The form in which applications should be submitted and information and materials they should include.**

- c Any submission deadlines**

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

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
ATCH 7				
Total			3a	802,463.
b Approved for future payment				
Total			3b	

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income	Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
f _____					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	4,090.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property .					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events . . .					
10 Gross profit or (loss) from sales of inventory . .					
11 Other revenue a _____					
b _____					
c _____					
d _____					
e _____					
12 Subtotal Add columns (b), (d), and (e)				4,090.	0
13 Total. Add line 12, columns (b), (d), and (e)				4,090.	4,090.

(See worksheet in line 13 instructions to verify calculations)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes[illegible]

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

- | | | | | |
|---|---|-------|-----|----|
| 1 | Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? | | Yes | No |
| a | Transfers from the reporting foundation to a noncharitable exempt organization of | | | |
| | (1) Cash | 1a(1) | | X |
| | (2) Other assets | 1a(2) | | X |
| b | Other transactions. | | | |
| | (1) Sales of assets to a noncharitable exempt organization | 1b(1) | | X |
| | (2) Purchases of assets from a noncharitable exempt organization | 1b(2) | | X |
| | (3) Rental of facilities, equipment, or other assets | 1b(3) | | X |
| | (4) Reimbursement arrangements | 1b(4) | | X |
| | (5) Loans or loan guarantees | 1b(5) | | X |
| | (6) Performance of services or membership or fundraising solicitations | 1b(6) | | X |
| c | Sharing of facilities, equipment, mailing lists, other assets, or paid employees | 1c | | X |
| d | If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received | | | |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No
- b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

**Sign
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer or trustee

8/12/14
Date

► Co-Chair Founder
Title

May the IRS discuss this return with the preparer shown below (see instructions)? ☒ Yes ☐ No

**Paid
Preparer
Use Only**

Print/Type preparer's name

Donald F. Anderson

Preparer's signature _____

Donald T. Hoff

Date _____

8/11/19

Check		
-------	--	--

self-employed

PTN

P00237591

Firm's name ► KPMG LLP

Firm's address ► 60 SOUTH STREET
BOSTON, MA

02111

Firm's EIN ▶ 13-5565207

Phone no 617-988-1000

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

OMB No 1545-0047

2013▶ **Attach to Form 990, Form 990-EZ, or Form 990-PF.**▶ **Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990****Name of the organization**THE DUNKIN' DONUTS & BASKIN ROBBINS
COMMUNITY FOUNDATION INC**Employer identification number**

26-0593784

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

☒ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck 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**

- ☒
- 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 its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization THE DUNKIN' DONUTS & BASKIN ROBBINS
COMMUNITY FOUNDATION INC

Employer identification number
26-0593784

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DEAN FOODS 14760 TRINITY BLVD. FORT WORTH, TX 76155	\$ 17,761.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
2	TAYLOR CONSULTING AND CONTRACTING, LLC 44 SCHOOL ST BOSTON, MA 02108	\$ 12,563.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
3	MISS CHOCOLATE, INC. 300 SPAGNOLI RD. MELVILLE, NY 11747	\$ 10,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
4	DUNKIN BRANDS, INC. 130 ROYALL ST MAIL STOP 2WA CANTON, MA 02021	\$ 166,667.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
5	ANTON AND LILIAN NADER 19 CHARLOTTE HILL DRIVE BERNARDSVILLE, NJ 07924	\$ 10,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
6	ERNIE DIBENEDETTO 3925 BROOKSIDE PKWY ALPHARETTA, GA 30022	\$ 5,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)

Name of organization **THE DUNKIN' DONUTS & BASKIN ROBBINS
COMMUNITY FOUNDATION INC**

Employer identification number
26-0593784

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	CARY GAGNON 49 CRYSTAL RIDGE SO. GLASTONBURY, CT 06073	\$ 5,400.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
8	CAFUA MGMT 280 MERRIMACK ST METHUEN, MA 01844	\$ 12,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
9	LISA JOANNE ELMS 3925 BROOKSIDE PKWY ALPHARETTA, GA 30022	\$ 12,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
10	RONALD PORTNOY, CHERYL PORTNOY 575 JERICHO TPK JERICHO, NY 11753	\$ 17,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
11	LAURA WARNER 3975 NW 120TH AVE CORAL SPRINGS, FL 33065	\$ 15,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
12	COCA-COLA ENTERPRISES 2500 WINDY RIDGE PKWY ATLANTA, GA 30339	\$ 30,500.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)

Name of organization **THE DUNKIN' DONUTS & BASKIN ROBBINS
COMMUNITY FOUNDATION INC**

Employer identification number
26-0593784

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	HILL HOLIDAY 53 STATE STREET BOSTON, MA 02109	\$ 10,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
14	CARINE GORDON ELECTRONIC ARTS SUITE 3600 1515 BROADWAY NEW YORK, NY 10036	\$ 5,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
15	DONALD A LUCCHETTI 38 RIVER RIDGE SLEEPY HOLLOW, IL 60118	\$ 5,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
16	DISNEY WORLDWIDE SERVICES LAKE BUENA VISTA, FL 32830	\$ 5,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
17	BARCLAYS 125 HIGH STREET BOSTON, MA 02110	\$ 5,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
18	GOLDMAN SACHS 125 HIGH STREET BOSTON, MA 02110	\$ 5,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)

Name of organization **THE DUNKIN' DONUTS & BASKIN ROBBINS
COMMUNITY FOUNDATION INC**

Employer identification number
26-0593784

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	COGNIZANT US CORP 211 QUALITY CIRCLE COLLEGE STATION, TX 77848	\$ 5,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
20	KPMG LLP 60 SOUTH STREET BOSTON, MA 02110	\$ 5,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
21	NIGEL TRAVIS 98 LIVINGSTON RD WELLESLEY, MA 02482	\$ 5,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
22	ORACLE 1 BEACON STREET BOSTON, MA 02108	\$ 5,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
23	JP MORGAN CHASE 712 MAIN ST STE 4E HOUSTON, TX 77002	\$ 5,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
24	STANLEY B&D 65 SCOTT SWAMP RD FARMINGTON, CT 06032	\$ 5,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)

Name of organization **THE DUNKIN' DONUTS & BASKIN ROBBINS
COMMUNITY FOUNDATION INC**

Employer identification number
26-0593784

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	MANUEL ROCHA PO BOX 937 NIANTIC, CT 06357	\$ 7,350.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
26	AIRPORT MART, INC. 25 ST CHARLES STREET THORNWOOD, NY 10594	\$ 7,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
27	CASEY ROLLINS 4941 QUEENSLAND RD VANCOUVER BC V6T 1G5	\$ 5,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
28	LARRY MULLER 130 ROYALL STREET CANTON, MA 02021	\$ 12,500.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)

Name of organization THE DUNKIN' DONUTS & BASKIN ROBBINS
COMMUNITY FOUNDATION INC

Employer identification number
26-0593784

Part II Noncash Property (see instructions). Use duplicate copies of Part 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
---	----- ----- ----- -----	\$-----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
---	----- ----- ----- -----	\$-----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
---	----- ----- ----- -----	\$-----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
---	----- ----- ----- -----	\$-----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
---	----- ----- ----- -----	\$-----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
---	----- ----- ----- -----	\$-----	-----

Name of organization **THE DUNKIN' DONUTS & BASKIN ROBBINS
COMMUNITY FOUNDATION INC**

Employer identification number
26-0593784

Part III **Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry.**

For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ► \$ _____

Use duplicate copies of Part III if additional space is needed.

(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
	----- ----- -----		----- ----- -----
(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
	----- ----- -----		----- ----- -----

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

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return. See instructions	Name of exempt organization or other filer, see instructions THE DUNKIN' DONUTS & BASKIN ROBBINS COMMUNITY FOUNDATION INC	Employer identification number (EIN) or 26-0593784
	Number, street, and room or suite no. If a P.O. box, see instructions 130 ROYALL STREET	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions CANTON, MA 02021	

Enter the Return code for the return that this application is for (file a separate application for each return) ☐ 0 ☐ 4

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ► CHRISTINE RILEY MILLER

Telephone No ► 781 737-3946

FAX No ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 08/15, 2014, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
- ☒ calendar year 2013 or
- ☐ tax year beginning _____, 20____, and ending _____, 20____.

- 2 If the tax year entered in line 1 is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a \$	0
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b \$	0
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c \$	0

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

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

Form **8868** (Rev. 1-2014)

JSA

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PAGE 1

FORM 990PF - GENERAL EXPLANATION ATTACHMENT

990 PF, PART VII-A, LINE 13 - WEBSITE ADDRESS

[HTTP://NEWS.DUNKINBRANDS.COM/FOUNDATION/ABOUT-THE-FOUNDATION-3E9.ASPX](http://news.dunkinbrands.com/foundation/about-the-foundation-3e9.aspx)

ATTACHMENT 1

FORM 990PF, PART I - OTHER EXPENSES

DESCRIPTION OTHER EXPENSES	REVENUE AND EXPENSES PER BOOKS 499,365.	NET INVESTMENT INCOME	CHARITABLE PURPOSES 499,365.
TOTALS	499,365.		499,365.

ATTACHMENT 2FORM 990PF, PART II - OTHER LIABILITIES

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>
NOTE PAYABLE	13,565.
TOTALS	<u>13,565.</u>

ATTACHMENT 3

FORM 990PF, PART VII-A, LINE 8A - STATES

AL, AK, AZ, AR, CA, CO, CT, DC, FL, GA, IL,
KS, KY, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY,
NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI,

ATTACHMENT 4

FORM 990PF, PART VII-A, LINE 14 - LOCATION OF BOOKS

130 ROYALL STREET - MAIL STOP 2WA
CANTON, MA 02021

THE DUNKIN' DONUTS & BASKIN ROBBINS

26-0593784

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEESATTACHMENT 5

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION</u>	<u>COMPENSATION</u>	<u>CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS</u>	<u>EXPENSE ACCT AND OTHER ALLOWANCES</u>
ALEX SMIGELSKI 130 ROYALL STREET - MAIL STOP 2WA CANTON, MA 02021	TREASURER 16.00	0	0	0
DOMINIC LASKERO 130 ROYALL STREET - MAIL STOP 2WA CANTON MA, 02021	DIRECTOR 1.00	0	0	0
FRANK BASLER 130 ROYALL STREET - MAIL STOP 2WA CANTON, MA 02021	SECRETARY 4.00	0	0	0
GARY HECKEL 130 ROYALL STREET - MAIL STOP 2WA CANTON, MA 02021	DIRECTOR 4.00	0	0	0
KATE JASPON 130 ROYALL STREET - MAIL STOP 2WA CANTON, MA 02021	DIRECTOR 1.00	0	0	0

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THE DUNKIN' DONUTS & BASKIN ROBBINS

26-0593784

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEESATTACHMENT 5 (CONT'D)

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION</u>	<u>COMPENSATION</u>	<u>CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS</u>	<u>EXPENSE ACCT AND OTHER ALLOWANCES</u>
JIM DAMICONE 130 ROYALL STREET - MAIL STOP 2WA CANTON, MA 02021	DIRECTOR 2.00	0	0	0
JOSEPH PRAZERES 130 ROYALL STREET - MAIL STOP 2WA CANTON, MA 02021	DIRECTOR 1.00	0	0	0
KAREN RASKOPF 130 ROYALL STREET - MAIL STOP 2WA CANTON, MA 02021	CO-CHAIR 4.00	0	0	0
MITCH COHEN 130 ROYALL STREET - MAIL STOP 2WA CANTON, MA 02021	CO CHAIR 10.00	0	0	0
ROD VALENCIA 130 ROYALL STREET - MAIL STOP 2WA CANTON, MA 02021	DIRECTOR 1.00	0	0	0

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THE DUNKIN' DONUTS & BASKIN ROBBINS

26-0593784

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEESATTACHMENT 5 (CONT'D)

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION</u>	<u>COMPENSATION</u>	<u>CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS</u>	<u>EXPENSE ACCT AND OTHER ALLOWANCES</u>
STEVEN KIM 130 ROYALL STREET - MAIL STOP 2WA CANTON, MA 02021	DIRECTOR 1.00	0	0	0
TOM MANCHESTER 130 ROYALL STREET - MAIL STOP 2WA CANTON, MA 02021	DIRECTOR 1.00	0	0	0
KEN FREITAS 130 ROYALL STREET - MAIL STOP 2WA CANTON, MA 02021	DIRECTOR 1.00	0	0	0
LINDA SULTAN 130 ROYALL STREET - MAIL STOP 2WA CANTON, MA 02021	DIRECTOR 1.00	0	0	0
BILL BODE 130 ROYALL STREET - MAIL STOP 2WA CANTON, MA 02021	DIRECTOR 1.00	0	0	0

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THE DUNKIN' DONUTS & BASKIN ROBBINS

26-0593784

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEESATTACHMENT 5 (CONT'D)

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
CHRISTINE RILEY 130 ROYALL STREET - MAIL STOP 2WA CANTON, MA 02021	EX-OFFICIO DIRECTOR 10.00	0	0	0
APRIL SCHRENKER 130 ROYALL STREET - MAIL STOP 2WA CANTON, MA 02021	EX-OFFICIO CSR MANAGER 10.00	0	0	0
STEPHANIE KENNEY 130 ROYALL STREET - MAIL STOP 2WA CANTON, MA 02021	EX-OFFICIO CSR SPECIALIST 10.00	0	0	0
GRAND TOTALS		0	0	0

990PF, PART VIII- COMPENSATION OF THE FIVE HIGHEST PAID PROFESSIONALSATTACHMENT 6

<u>NAME AND ADDRESS</u>	<u>TYPE OF SERVICE</u>	<u>COMPENSATION</u>
DUNKIN' BRANDS, INC. 130 ROYALL ST MAILSTOP 2WA CANTON, MA 02021	MANAGEMENT SERVICES	160,429.
BEST VENDORS, INC. 700 MEADOW LN. N, STE. 400 MINNEAPOLIS, MN 55422	CANISTER COLLECTION	59,273.
TOTAL COMPENSATION		<u>219,702.</u>

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 7

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
	RECIPIENT	FOUNDATION			
ANTHONY MUNOZ FOUNDATION 8919 ROSSASH RD ST M/S2WA CINCINNATI, OH 45236	NONE PC			UNRESTRICTED	1,000
ARTHRITIS FOUNDATION FL CHAPTER 3816 W LINEBAUGH AVE ST M/S2WA TAMPA, FL 33618	NONE PC			UNRESTRICTED	2,500
LUCKY DUCK RESALE FOR AUTISM 3244 NORTH MONROE ST ST M/S2WA TALLAHASSEE, FL 32303	NONE PC			UNRESTRICTED	1,998.
AUTISM SPEAKS INC 557 NORTH WYMORE RD ST M/S2WA MAITLAND, FL 32751	NONE PC			UNRESTRICTED	30,493
BARBARA BUSH CHILDRENS HOSPITAL 22 BRAMHALL STREET ST M/S2WA PORTLAND, ME 04102	NONE PC			UNRESTRICTED	7,500
BAYSTATE CHILDRENS HOSPITAL 280 CHESTNUT ST ST M/S2WA SPRINGFIELD, MA 01199	NONE PC			UNRESTRICTED	7,500

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 7 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
BE THE MATCH 10100 MARTIN LUTHER KING JR ST ST M/S2WA ST PETERSBURG, FL 33716	NONE PC	UNRESTRICTED	2,500
BERT'S BIG ADVENTURE 45 OLD IVY RD. NE ST M/S2WA ATLANTA, GA 30342	NONE PC	UNRESTRICTED	7,500.
BOSTON AREA GLEANERS 240 BEAVER ST ST M/S2WA WALTHAM, MA 02452	NONE PC	UNRESTRICTED	4,000
BROOKWOOD COMMUNITY FARM PO BOX 970093 ST M/S2WA MILTON VILLAGE, MA 02187	NONE PC	UNRESTRICTED	6,000.
CARNEGIE INSTITUTE 4400 FORBES AVENUE ST M/S2WA PITTSBURGH, PA 05213	NONE PC	UNRESTRICTED	10,000
CAROLINA HEALTHCARE FOUNDATION 1221 EAST MOREHEAD ST ST M/S2WA CHARLOTTE, NC 28204	NONE PC	UNRESTRICTED	7,500

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 7 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT		PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
CYSTIC FIBROSIS FOUNDATION 55 S PROGRESS AVE ST M/S2WA HARRISBURG, PA 17109	NONE PC		UNRESTRICTED	12,965
CHILDREN'S HEALTHCARE OF ATLANTA 1687 TULLIE CIRCLE, NE ST M/S2WA ATLANTA, GA 30329	NONE PC		UNRESTRICTED	13,127
CHILDRENS HOSP OF PHILADELPHIA FNDN 34TH ST & CIVIC CENTER BLVD ST M/S2WA PHILADELPHIA, PA 19104	NONE PC		UNRESTRICTED	10,000
CHILDREN'S HOSPITAL AT DARTMOUTH ONE MEDICAL CENTER DR ST M/S2WA LEBANON, NH 03756	NONE PC		UNRESTRICTED	7,500.
CHILDREN'S HOSPITAL BOSTON 300 LONGWOOD AVENUE ST M/S2WA BOSTON, MA 02215	NONE PC		UNRESTRICTED	7,500
CHILDRENS HOSPITAL OF THE KINGS DAUGHTERS 601 CHILDRENS LANE ST M/S2WA NORFOLK, VA 23507	NONE PC		UNRESTRICTED	11,322

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 7 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
CHILDREN'S HOSPITAL OF WISCONSIN 9000 W WISCONSIN AVE ST M/S2WA MILWAUKEE, WI 53201	NONE PC	UNRESTRICTED	5,000
CHILDREN'S MIRACLE NETWORK - CA 4900 BROADWAY BUILDING ST M/S2WA SACRAMENTO, CA 95820	NONE PC	UNRESTRICTED	3,100.
CHILDREN'S MIRACLE NETWORK - LA 4650 SUNSET BLVD #29 ST M/S2WA LOS ANGELES, CA 90027	NONE PC	UNRESTRICTED	3,100
CHILDREN'S OF ALABAMA 1600 7TH AVENUE ST M/S2WA BIRMINGHAM, AL 35233	NONE PC	UNRESTRICTED	437
CITY HARVEST FOOD BANK 6 E 32 STREET ST M/S2WA NEW YORK, NY 10016	NONE PC	UNRESTRICTED	12,965
COALITION TO SALUTE AMERICAS HEROS FND 12 GODFREY PLACE ST M/S2WA WILTON, CT 06897	NONE PC	UNRESTRICTED	1,000

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 7 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
COMMUNITY FOOD BANK OF NJ 31 EVANS TERMINAL RD ST M/S2WA HILLSDALE, NJ 07205	NONE PC	UNRESTRICTED	32,965
COMMUNITY SERVINGS, INC 18 MARBURY TERRACE ST M/S2WA JAMAICA PLAIN, MA 02130	NONE PC	UNRESTRICTED	5,000.
CONNECTICUT CHILDREN'S MEDICAL CTR 282 WASHINGTON ST ST M/S2WA HARTFORD, CT 06106	NONE PC	UNRESTRICTED	7,500.
CYSTIC FIBROSIS FOUNDATION - SC CHAPTER 537 LONG POINT ROAD ST M/S2WA MOUNT PLEASANT, SC 29464	NONE PC	UNRESTRICTED	873
CYSTIC FIBROSIS FOUNDATION (FL) 3443 NW 55 STREET ST M/S2WA FT LAUDERDALE, FL 33309	NONE PC	UNRESTRICTED	5,000
CYSTIC FIBROSIS FOUNDATION-GA CHAPTER 2302 PARKLAKE DR NE ST M/S2WA ATLANTA, GA 30325	NONE PC	UNRESTRICTED	2,500

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 7 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
	FOUNDATION STATUS OF RECIPIENT			
FIRE RESCUE SUPPORT 12647 SE 102ND AVENUE ST M/S2WA BELLEVUE, FL 34420	NONE PC		UNRESTRICTED	2,500
FOOD BANK OF NORTHWEST INDIANA 2248 WEST 35TH AVENUE ST M/S2WA GARY, IN 46408	NONE PC		UNRESTRICTED	1,000
FRANCISCAN HOSPITAL FOR CHILDREN 30 WARREN ST ST M/S2WA BOSTON, MA 01923	NONE PC		UNRESTRICTED	7,500
FRANKIE FOUNDATION ROSE DRIVE ST M/S2WA FORT LAUDERDALE, FL 33316	NONE PC		UNRESTRICTED	7,000
GEORGE MANDELL/MEMORIAL JIMMY FUND 150 DEPOT ST ST M/S2WA BELLINGHAM, MA 02019	NONE PC		UNRESTRICTED	25,000
GOLISANO CHILDREN'S HOSPITAL BOX 278996 ST M/S2WA ROCHESTER, NY 14627	NONE PC		UNRESTRICTED	7,500

FORM 990EF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 7 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
GOLISANO CHILDREN'S HOSPITAL 750 E ADAMS ST ST M/S2WA SYRACUSE, NY 13210	NONE PC	UNRESTRICTED	5,000
GOOD SAMARITAN MINISTRIES 100 N. ROAN ST ST M/S2WA JOHNSON CITY, TN 37601	NONE PC	UNRESTRICTED	811
GOOD SPORTS 1515 HANCOCK ST ST M/S2WA QUINCY, MA 02169	NONE PC	UNRESTRICTED	10,000
GRAHAMTASTIC CONNECTION 21 BRADEEN ST ST M/S2WA SPRINGVALE, ME 04083	NONE PC	UNRESTRICTED	2,500
HASBRO CHILDRENS HOSPITAL 593 EDDY STREET ST M/S2WA PROVIDENCE, RI 02903	NONE PC	UNRESTRICTED	7,429
HEALING TOUCH RIDING CENTER 2851 KISSIMMEE PARK RD ST M/S2WA ST CLOUD, FL 34773	NONE PC	UNRESTRICTED	5,000

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 7 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
HEMOPHILIA OF GEORGIA 8800 ROSWELL ROAD ST M/S2WA ATLANTA, GA 30350	NONE PC	UNRESTRICTED	1,500
HENRY VISCARDI SCHOOL 201 I U WILLETS RD ST M/S2WA ALBERTSON, NY 11507	NONE PC	UNRESTRICTED	22,287
HOMES FOR OUR TROOPS, FL 4444 EDGEWATER DR ST M/S2WA ORLANDO, FL 32804	NONE PC	UNRESTRICTED	2,500.
HOPE FOR THE WARRIORS 5101C BACKLICK RD ST M/S2WA ANNADALE, VA 22003	NONE PC	UNRESTRICTED	657
HOUSING PARTNERSHIP, INC 2001 W BLUE HERON BLVD ST M/S2WA RIVIERA BEACH, FL 33404	NONE PC	UNRESTRICTED	12,258
INTERFAITH FOOD SHUTTLE 1001 BLAIR DR ST M/S2WA RALEIGH, NC 27603	NONE PC	UNRESTRICTED	3,500

THE DUNKIN' DONUTS & BASKIN ROBBINS

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

ATTACHMENT 7 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
JACKSONVILLE SCHOOL FOR AUTISM 9000 CYPRESS GREEN DR ST M/S2WA JACKSONVILLE, FL 32256	NONE PC	UNRESTRICTED	11,725
JOE DIMAGGIO CHILDREN'S HOSP FND 3711 GARFIELD ST ST M/S2WA HOLLYWOOD, FL 33021	NONE PC	UNRESTRICTED	7,500
JOSLIN DIABETES CENTER ONE JOSLIN PLACE ST M/S2WA BOSTON, MA 02215	NONE PC	UNRESTRICTED	10,000
JUVENILE DIABETES RESEARCH FND 370 CENTERPOINTE CIRCLE ST M/S2WA ALTAMONTE SPRINGS, FL 32701	NONE PC	UNRESTRICTED	2,500.
KIND TO KIDS 100 WEST 10TH ST ST M/S2WA WILMINGTON, DE 19801	NONE PC	UNRESTRICTED	2,500
LEVINE CHILDREN'S HOSPITAL 1221 EAST MOREHEAD ST ST M/S2WA CHARLOTTE, NC 28204	NONE PC	UNRESTRICTED	4,225

FORM 990FE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 7 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
LIFENET4FAMILIES 1 NW 33 TERRACE ST M/S2WA LAUDERHILL, FL 33311	NONE PC	UNRESTRICTED	2,000
LONG ISLAND CARES INC 10 DAVIDS DR ST M/S2WA HAUPPAUGE, NY 11788	NONE PC	UNRESTRICTED	27,965
MARIA FARERI CHILDRENS HOSP FNDN 100 WOODS ROAD ST M/S2WA VALHALLA, NY 10595	NONE PC	UNRESTRICTED	5,000
MARYLAND FOOD BANK 2200 HALETHORPE FARMS RD ST M/S2WA BALTIMORE, MD 21227	NONE PC	UNRESTRICTED	7,500
MCLEOD'S CHILDREN'S HOSPITAL 800 EAST CHEVES ST ST M/S2WA FLORENCE, SC 29502	NONE PC	UNRESTRICTED	3,726
MEDICAL UNIV OF SC FNDN 59 BEE ST ST M/S2WA CHARLESTON, SC 29425	NONE PC	UNRESTRICTED	15,000

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 7 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT		PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
MIRACLE LEAGUE OF MANASOTA, INC 8466 N LOCKWOOD RIDGE RD ST M/S2WA SARASOTA, FL 34243	NONE PC		UNRESTRICTED	5,000.
MUSC CHILDREN'S HOSPITAL 59 BEE ST ST M/S2WA CHARLESTON, SC 29425	NONE PC		UNRESTRICTED	2,438
THE JIMMY FUND 10 BROOKLINE PLACE WEST ST M/S2WA BROOKLINE, MA 02445	NONE PC		UNRESTRICTED	5,317
NEW HANOVER REGIONAL MED CTR 259 S 17TH ST ST M/S2WA WILMINGTON, NC 28402	NONE PC		UNRESTRICTED	7,506
NORTH SHORE CHILDREN'S HOSPITAL 81 HIGHLAND AVE ST M/S2WA SALEM, MA 01970	NONE PC		UNRESTRICTED	7,500
ONE FUND BOSTON, INC 53 STATE ST ST M/S2WA BOSTON, MA 02109	NONE PC		UNRESTRICTED	100,000

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 7 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
PALMETTO HEALTH FOUNDATION 1600 MARION ST ST M/S2WA COLUMBIA, SC 29201	NONE PC	UNRESTRICTED	3,383
PHILABUNDANCE FOOD BANK 3616 SOUTH GALLOWAY ST ST M/S2WA PHILADELPHIA, PA 19148	NONE PC	UNRESTRICTED	20,000.
PHOENIX CHILDRENS HOSPITAL 2929 E CAMELBACK RD ST M/S2WA PHOENIX, AZ 85016	NONE PC	UNRESTRICTED	3,100
RADY CHILDREN'S HOSPITAL FOUNDATION 3020 CHILDREN'S WAY ST M/S2WA SAN DIEGO, CA 92123	NONE PC	UNRESTRICTED	3,100
SAFE KIDS FLORIDA -MIAMI -DADE 3100 SOUTHWEST 62ND AVE ST M/S2WA MIAMI, FL 33155	NONE PC	UNRESTRICTED	4,758
SAFE KIDS FLORIDA-BROWARD 4320 SHERIDAN ST ST M/S2WA HOLLYWOOD, FL 33021	NONE PC	UNRESTRICTED	4,758.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 7 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
SARAH'S KITCHEN 260 SW PRIMA VISTA BLVD ST M/S2WA PORT ST LUCIE, FL 34983	NONE PC	UNRESTRICTED	7,500
SOLI 819 GRAND BOULEVARD ST M/S2WA DEER PARK, NY 11729	NONE PC	UNRESTRICTED	17,287
SOUTH END COMMUNITY HEALTH CENTER 1601 WASHINGTON ST ST M/S2WA BOSTON, MA 02118	NONE PC	UNRESTRICTED	2,500.
SPECIAL OLYMPICS OF NY 819 GRAND BLVD ST M/S2WA DEER PARK , NY 11729	NONE PC	UNRESTRICTED	14,750
SPECIAL OLYMPICS PENNSYLVANIA 2570 BLVD OF THE GENERALS ST M/S2WA NORRISTOWN, PA 19403	NONE PC	UNRESTRICTED	15,000
ST JOSEPH'S HOSPITAL FOUNDATION 2700 W MARTIN LUTHER KING JR BLVD ST M/S2WA TAMPA, FL 33607	NONE PC	UNRESTRICTED	23,014

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 7 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
	FOUNDATION STATUS OF RECIPIENT	NONE PC		
ST JUDES - NY 14 PENN PLAZA, STE 1615 ST M/S2WA NEW YORK, NY 10122	NONE PC		UNRESTRICTED	17,287
T J. MARTELL FOUNDATION 15 MUSIC SQUARE WEST ST M/S2WA NASHVILLE, TN 37203	NONE PC		UNRESTRICTED	5,437.
TABLE TO TABLE 27-01 HIGH STREET ST M/S2WA FAIR LAWN, NJ 07410	NONE PC		UNRESTRICTED	10,000
THE CHILDRENS HOSPITAL AT ALBANY MEDICAL 43 SCOTLAND AVENUE ST M/S2WA ALBANY, NY 12208	NONE PC		UNRESTRICTED	5,000
THE UP SIDE OF DOWNS 4807 ROCKSIDE RD ST M/S2WA INDEPENDENCE, OH 44131	NONE PC		UNRESTRICTED	3,900
UMASS MEMORIAL CHILDRENS MED CTR 333 SOUTH ST ST M/S2WA SHREWSBURY, MA 01545	NONE PC		UNRESTRICTED	7,500

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 7 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
UM-NSU CENTER FOR AUTISM 6100 GRIFFIN ROAD ST M/S2WA DAVIE, FL 33314	NONE PC	UNRESTRICTED	2,500.
VERMONT CHILDREN'S HOSPITAL 111 COLCHESTER AVE ST M/S2WA BURLINGTON, VT 05401	NONE PC	UNRESTRICTED	7,500
VIETNAM VETERANS WORKSHOP 17 COURT ST. ST M/S2WA BOSTON, MA 02108	NONE PC	UNRESTRICTED	10,000
WOMEN & CHILDREN'S HOSPITAL 1260 DELAWARE AVENUE ST M/S2WA BUFFALO, NY 14222	NONE PC	UNRESTRICTED	5,000
YALE-NEW HAVEN CHILDREN'S HOSP 20 YORK STREET ST M/S2WA NEW HAVEN, CT 06510	NONE PC	UNRESTRICTED	7,500
YMCA BURLINGTON/CAMDEN 59 CENTERTON RD ST M/S2WA MT LAUREL, NJ 08054	NONE PC	UNRESTRICTED	17,500

THE DUNKIN' DONUTS & BASKIN ROBBINS

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

ATTACHMENT 7 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT
YMCA OF MIDDLE TN 3088 SMITH SPRINGS RD ST M/S2WA NASHVILLE, TN 37013	NONE PC

TOTAL CONTRIBUTIONS PAID

802,463