See a Social Security Number? Say Something!
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Or call the IRS Identity Theft Hotline at 1-800-908-4490
**Exempt Organization Business Income Tax Return**  
(and proxy tax under section 6033(e))

**For calendar year 2010 or other tax year beginning** _______ and ending _______

<table>
<thead>
<tr>
<th><strong>A.</strong> Check box if address changed</th>
<th><strong>C.</strong> Book value of all assets at end of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ]</td>
<td>39,034,221.</td>
</tr>
</tbody>
</table>

**B.** Exempt under section

<table>
<thead>
<tr>
<th>501(c)(3)</th>
<th>501(c)(2)</th>
<th>501(c)(4)</th>
<th>501(c)(5)</th>
<th>501(c)(6)</th>
</tr>
</thead>
<tbody>
<tr>
<td>[X]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Print or Type**

Name of organization ( [ ] Check box if name changed and see instructions.)

**C/O** HARRIS & LLOYD  2 BRIGHTON STREET  
BELMONT, MA 02478  
900001

**D.** Employer identification number (Employees' trust, see instructions)

36-3479461

**E.** Unrelated business activity codes (See instructions)

**F.** Group exemption number (See instructions)

**G.** Check organization type [ ] 501(c) corporation [ ] 501(c) trust [ ] 401(a) trust [ ] Other trust

**H.** Describe the organization's primary unrelated business activity.  
**PARTNERSHIP INVESTMENTS**

[ ] Yes [ ] No

**I.** During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?

[ ] Yes [X] No

**J.** The books are in care of  
**BOARDMAN LLOYD**  
Telephone number [ ] 617-489-7300

<table>
<thead>
<tr>
<th><strong>Part I</strong> Unrelated Trade or Business Income</th>
<th><strong>(A) Income</strong></th>
<th><strong>(B) Expenses</strong></th>
<th><strong>(C) Net</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Gross receipts or sales</td>
<td>1c</td>
<td>1c</td>
<td></td>
</tr>
<tr>
<td>b Less returns and allowances</td>
<td></td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>c Balance</td>
<td></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>2 Cost of goods sold (Schedule A, line 7)</td>
<td>4a</td>
<td>4b</td>
<td></td>
</tr>
<tr>
<td>3 Gross profit. Subtract line 2 from line 1c</td>
<td>4c</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Capital gain net income (attach Schedule D)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Income (loss) from partnerships and S corporations (attach statement)</td>
<td>5</td>
<td>-8,733</td>
<td>STMT 16</td>
</tr>
<tr>
<td>6 Rent income (Schedule C)</td>
<td>6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Unrelated debt-financed income (Schedule E)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Interest, annuities, royalties, and rents from controlled organizations (Sch. F)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Investment income of a section 501(c)(7), (9), or 501(c)(19) organization (Schedule G)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Exploited exempt activity income (Schedule I)</td>
<td>10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Advertising income (Schedule J)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Other income (See instructions; attach schedule.)</td>
<td>12</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Total, Combine lines 9 through 12</td>
<td>13</td>
<td></td>
<td>-8,733</td>
</tr>
</tbody>
</table>

**Part II** Deductions Not Taken Elsewhere  
(See instructions for limitations on deductions.)  
(Except for contributions, deductions must be directly connected with the unrelated business income.)

| **14** Compensation of officers, directors, and trustees (Schedule K) | 14             |
| **15** Salaries and wages | 15             |
| **16** Repairs and maintenance | 16             |
| **17** Bad debts | 17             |
| **18** Interest (attach schedule) | 18             |
| **19** Taxes and licenses | 19             |
| **20** Charitable contributions (See instructions for limitation rules.) | 20             |
| **21** Depreciation (attach Form 4562) | 21             |
| **22** Less depreciation claimed on Schedule A and elsewhere on return | 22a            |
| **23** Depletion | 23             |
| **24** Contributions to deferred compensation plans | 24             |
| **25** Employee benefit programs | 25             |
| **26** Excess exempt expenses (Schedule I) | 26             |
| **27** Excess readership costs (Schedule J) | 27             |
| **28** Other deductions (attach schedule) | 28             |
| **29** Total deductions. Add lines 14 through 28 | 29             |
| 30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 | 30             |
| 31 Net operating loss deduction (limited to the amount on line 30) | 31             |
| 32 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30 | 32             |
| 33 Specific deduction (Generally $1,000, but see instructions for exceptions.) | 33             |
| 34 Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32 | 34             |

**023701**  
**03-03-11**  
LHA  
For Paperwork Reduction Act Notice, see instructions.
Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

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

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

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part 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

Type or print

Name of exempt organization

COYDOG FOUNDATION

Employer identification number

36-3479461

Number, street, and room or suite no. If a P.O. box, see instructions

C/O HARRIS & LLOYD 2 BRIGHTON STREET

Cty, town or post office, state, and ZIP code For a foreign address, see instructions

BELMONT, MA 02478

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

07

Application Is For

Return Code

Application Is For

Return Code

Form 990

01

Form 990-T (corporation)

07

Form 990-BL

02

Form 1041-A

08

Form 990-EZ

03

Form 4720

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

BOARDMAN LLOYD

The books are in the care of

C/O HARRIS & LLOYD 2 BRIGHTON STREET - BELMONT, MA 02478

Telephone No. 617-489-7300

FAX No.

If the organization does not have an office or place of business in the United States, check this box

If this is 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 request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until

NOVEMBER 15, 2011, to file the exempt organization return for the organization named above. The extension

is for the organization's return for

X calendar year 2010 or

X tax year beginning , and ending

2 If the tax year entered in line 1 is for less than 12 months, check reason

Initia l 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 fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 1-2011)
Application for Extension of Time To File an Exempt Organization Return  

File a separate application for each return.  

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- 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.

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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.

<table>
<thead>
<tr>
<th>Type or print</th>
<th>Name of exempt organization</th>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>COYDOG FOUNDATION</td>
<td>36-3479461</td>
</tr>
<tr>
<td></td>
<td>C/O HARRIS &amp; LLOYD 2 BRIGHTON STREET</td>
<td></td>
</tr>
<tr>
<td></td>
<td>BELMONT, MA 02478</td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Application Is For</th>
<th>Return Code</th>
<th>Application Is For</th>
<th>Return Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Form 990</td>
<td>01</td>
<td>Form 990-T (corporation)</td>
<td>07</td>
</tr>
<tr>
<td>Form 990-BL</td>
<td>02</td>
<td>Form 1041-A</td>
<td>08</td>
</tr>
<tr>
<td>Form 990-EZ</td>
<td>03</td>
<td>Form 4720</td>
<td>09</td>
</tr>
<tr>
<td>Form 990-PF</td>
<td>04</td>
<td>Form 5227</td>
<td>10</td>
</tr>
<tr>
<td>Form 990-T (sec. 401(a) or 408(a) trust)</td>
<td>05</td>
<td>Form 6609</td>
<td>11</td>
</tr>
<tr>
<td>Form 990-T (trust other than above)</td>
<td>06</td>
<td>Form 8870</td>
<td>12</td>
</tr>
</tbody>
</table>

BOARDMAN LLOYD  
- The books are in the care of C/O HARRIS & LLOYD 2 BRIGHTON STREET - BELMONT, MA 02478  
- Telephone No | 617-489-7300 | 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 AUGUST 15, 2011, to file the exempt organization return for the organization named above. The extension is for the organization’s return for calendar year 2010 or tax year beginning , and ending .

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  $ 9,287

3b  
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  $ 11,931

3c  
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  $ 0

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

LHA  For Paperwork Reduction Act Notice, see Instructions.
<table>
<thead>
<tr>
<th>DESCRIPTION</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>EL PASO PIPELINE PARTNERS, LP</td>
<td>-933.</td>
</tr>
<tr>
<td>ENBRIDGE ENERGY PARTNERS, LP</td>
<td>-7,800.</td>
</tr>
<tr>
<td>TOTAL TO FORM 990-T, PAGE 1, LINE 5</td>
<td>-8,733.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FORM 990-T</th>
<th>NAME OF FOREIGN COUNTRY IN WHICH ORGANIZATION HAS FINANCIAL INTEREST</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>CAYMAN ISLANDS</td>
</tr>
</tbody>
</table>
### Part III - Tax Computation

35 **Organizations Taxable as Corporations** See instructions for tax computation.
   - Controlled group members (sections 1561 and 1563) check here □
   - See instructions and:
     - a. Enter your share of the $50,000, $25,000, and $9,925,000 taxable income brackets (in that order):
       - (1) $ □
       - (2) $ □
       - (3) $ □
     - b. Enter organization's share of: (1) Additional 5% tax (not more than $1,750) $ □
     - (2) Additional 3% tax (not more than $100,000) $ □
     - c. Income tax on the amount on line 34 □

36 **Trusts Taxable at Trust Rates.** See instructions for tax computation. Income tax on the amount on line 34 from:
   - □ Tax rate schedule or □ Schedule D (Form 1041)

37 **Proxy tax.** See instructions □

38 **Alternative minimum tax** □

39 **Total.** Add lines 37 and 38 to line 35c or 36, whichever applies □

### Part IV - Tax and Payments

40a **Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)** □

40b **Other credits (see instructions)** □

40c **General business credit. Attach Form 3800** □

40d **Credit for prior year minimum tax (attach Form 8801 or 8827)** □

40e **Total credits.** Add lines 40a through 40d □

41 **Subtract line 40e from line 39** □

42 **Other taxes.** Check if from: □ Form 4255 □ Form 8611 □ Form 8697 □ Form 8866 □ Other (attach schedule)

43 **Total tax.** Add lines 41 and 42 □

44a **Payments.** A 2009 overpayment credited to 2010 □

44b **2010 estimated tax payments** □

44c **Tax deposited with Form 8866** □

44d **Foreign organizations: Tax paid or withheld at source (see instructions)** □

44e **Backup withholding (see instructions)** □

44f **Credit for small employer health insurance premiums (Attach Form 8941)** □

45 **Other credits and payments:** □ Form 2439 □ Form 4136 □ Other □

**Total □**

46 **Estimated tax penalty (see instructions).** Check if Form 2220 is attached □

47 **Tax due.** If line 46 is less than the total of lines 43 and 46, enter amount owed □

48 **Overpayment.** If line 45 is larger than the total of lines 43 and 46, enter amount overpaid □

49 **Enter the amount of line 48 you want: Credited to 2011 estimated tax □ Refunded □**

### Part V - Statements Regarding Certain Activities and Other Information (see instructions)

1 **At any time during the 2010 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country?** Yes □ No □

   If YES, the organization may have to file Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here □

   **SEE STATEMENT 17**

2 **During the tax year, did the organization receive a distribution from or was it the grantor of, or intestate of, a foreign estate?** Yes □

   If YES, see instructions for other forms the organization may have to file □

3 **Enter the amount of tax-exempt interest received or accrued during the tax year □**

### Schedule A - Cost of Goods Sold. Enter method of inventory valuation □ N/A

<table>
<thead>
<tr>
<th>1. Inventory at beginning of year</th>
<th>2. Purchases</th>
<th>3. Cost of labor</th>
<th>4a. Additional section 263A costs</th>
<th>4b. Other costs (attach schedule)</th>
<th>5. Total. Add lines 1 through 4b</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4a</td>
<td>4b</td>
<td>5</td>
</tr>
</tbody>
</table>

### 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 a person (other than taxpayer) is based on all information of which he or she has any knowledge.

**Signature of officer**

**Date**

**Title**

**Vice President**

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

### Paid Preparer

**Name**

**Signature**

**Date**

**Check if self-employed**

**PTIN**

** Firm's EIN **

**Phone no.**

**Firm's address**

**Firm's name**

**Preparer's address**

**Preparer's name**

**Preparer's signature**

**Date**

**Check if self-employed**

**PTIN**

**Firm's EIN **

**Phone no.**

**Firm's address**

**Firm's name**

**Preparer's name**

**Preparer's signature**

**Date**

**Check if self-employed**

**PTIN**

**Firm's EIN **

**Phone no.**

**Firm's address**