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# Return of Private Foundation

## or Section 4947(a)(1) Nonexempt Charitable Trust

### Treated as a Private Foundation

2010

Department of the Treasury  
Internal Revenue Service

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

For calendar year 2010, or tax year beginning

, and ending

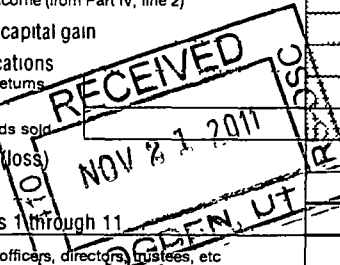
G Check all that apply

☐ Initial return☐ Initial return of a former public charity☐ Final return☐ Amended return☐ Address change☐ Name change

Name of foundation <b>THE MARK WENTWORTH HOME</b>		A Employer identification number <b>02-0222243</b>
Number and street (or P O box number if mail is not delivered to street address) <b>346 PLEASANT STREET</b>	Room/suite	B Telephone number <b>(603) 436-0169</b>
City or town, state, and ZIP code <b>PORTSMOUTH, NH 03801-4536</b>		C If exemption application is pending, check here <input type="checkbox"/>
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) <b>\$ 14,666,364.</b> (Part I, column (d) must be on cash basis)	J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input checked="" type="checkbox"/>

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))		(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		90,623.			
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B					
3 Interest on savings and temporary cash investments		2,002.	2,002.	2,002.	Statement 1
4 Dividends and interest from securities		226,634.	226,634.	226,634.	Statement 2
5a Gross rents		62,425.	62,425.	62,425.	Statement 3
b Net rental income or (loss)	43,376.				Statement 4
6a Net gain or (loss) from sale of assets not on line 10		160,759.			Statement 5
b Gross sales price for all assets on line 6a	5,512,275.				
7 Capital gain net income (from Part IV, line 2)			157,901.		
8 Net short-term capital gain				37,275.	
9 Income modifications					
10a Gross sales less returns and allowances					
b Less Cost of goods sold					
c Gross profit or (loss)					
11 Other income		4,896,057.	0.	4,896,057.	Statement 6
12 Total. Add lines 1 through 11		5,438,500.	448,962.	5,224,393.	
13 Compensation of officers, directors, trustees, etc		0.	0.	0.	0.
14 Other employee salaries and wages		2,579,216.	0.	2,579,216.	0.
15 Pension plans, employee benefits		474,304.	0.	474,304.	0.
16a Legal fees Stmt 7		347,463.	0.	347,463.	0.
b Accounting fees Stmt 8		56,927.	0.	56,927.	0.
c Other professional fees Stmt 9		294,833.	28,714.	294,833.	0.
17 Interest		688,160.	0.	688,160.	0.
18 Taxes Stmt 10		27,288.	0.	27,288.	0.
19 Depreciation and depletion		639,296.	6,110.	639,296.	
20 Occupancy		293,117.	12,939.	293,117.	0.
21 Travel, conferences, and meetings		26,650.	0.	26,650.	0.
22 Printing and publications					
23 Other expenses Stmt 11		1,876,669.	0.	1,876,669.	0.
24 Total operating and administrative expenses. Add lines 13 through 23		7,303,923.	47,763.	7,303,923.	0.
25 Contributions, gifts, grants paid		0.			0.
26 Total expenses and disbursements. Add lines 24 and 25		7,303,923.	47,763.	7,303,923.	0.
27 Subtract line 26 from line 12		-1,865,423.			
a Excess of revenue over expenses and disbursements			401,199.		
b Net investment income (if negative, enter -0-)					
c Adjusted net income (if negative, enter -0-)				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		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing	7,720.	152,706.	152,706.
	2 Savings and temporary cash investments	2,671,419.	793,070.	793,070.
	3 Accounts receivable ▶ 416,234.			
	Less allowance for doubtful accounts ▶ 21,249.	332,531.	394,985.	394,985.
	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 ▶			
	Less allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges	205,959.	70,529.	70,529.
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock Stmt 13	4,758,199.	5,266,813.	5,266,813.
	c Investments - corporate bonds Stmt 14	599,062.	1,101,191.	1,101,191.
Liabilities	11 Investments - land, buildings, and equipment basis ▶			
	Less accumulated depreciation ▶			
	12 Investments - mortgage loans			
	13 Investments - other Stmt 15	519,540.	545,302.	545,302.
	14 Land, buildings, and equipment basis ▶ 6,261,688.			
	Less accumulated depreciation Stmt 12 ▶ 259,964.	13,467,029.	6,001,724.	6,001,724.
	15 Other assets (describe ▶ Statement 16)	496,218.	340,044.	340,044.
	16 Total assets (to be completed by all filers)	23,057,677.	14,666,364.	14,666,364.
	17 Accounts payable and accrued expenses	459,260.	258,961.	
	18 Grants payable			
	19 Deferred revenue		647,033.	
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable Stmt 17	13,753,284.	7,420,650.	
	22 Other liabilities (describe ▶ Statement 18)	548,539.	500,285.	
Net Assets or Fund Balances	23 Total liabilities (add lines 17 through 22)	14,761,083.	8,826,929.	
	Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted	1,228,393.	-1,344,786.	
	25 Temporarily restricted	0.	90,258.	
	26 Permanently restricted	7,068,201.	7,093,963.	
	Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> 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	8,296,594.	5,839,435.	
	31 Total liabilities and net assets/fund balances	23,057,677.	14,666,364.	

## 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	8,296,594.
2	Enter amount from Part I, line 27a	2	-1,865,423.
3	Other increases not included in line 2 (itemize) ▶ NET UNREALIZED GAIN ON INVESTMENTS	3	106,764.
4	Add lines 1, 2, and 3	4	6,537,935.
5	Decreases not included in line 2 (itemize) ▶ IMPAIRMENT ON FIXED ASSETS	5	698,500.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	5,839,435.

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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.)
<b>1a PUBLICALLY TRADED SECURITIES</b>		P		
<b>b PUBLICALLY TRADED SECURITIES</b>		P		
<b>c</b>				
<b>d</b>				
<b>e</b>				

(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)
<b>a</b> 1,779,785.		1,659,159.	120,626.
<b>b</b> 3,729,632.		3,692,357.	37,275.
<b>c</b>			
<b>d</b>			
<b>e</b>			

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) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
<b>a</b>			120,626.
<b>b</b>			37,275.
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> 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	<b>2</b>	157,901.
<b>3</b> 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) If (loss), enter -0- in Part I, line 8		<b>3</b>	37,275.

**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)

N/A

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 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))
2009			
2008			
2007			
2006			
2005			

<b>2</b> Total of line 1, column (d)	<b>2</b>
<b>3</b> 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	<b>3</b>
<b>4</b> Enter the net value of noncharitable-use assets for 2010 from Part X, line 5	<b>4</b>
<b>5</b> Multiply line 4 by line 3	<b>5</b>
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>
<b>7</b> Add lines 5 and 6	<b>7</b>
<b>8</b> Enter qualifying distributions from Part XII, line 4 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	<b>8</b>

**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 <input checked="" type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter <u>05/26/87</u> (attach copy of letter if necessary-see instructions)	1	N/A
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b		
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	
3	Add lines 1 and 2	3	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	0.
6	Credits/Payments		
a	2010 estimated tax payments and 2009 overpayment credited to 2010	6a	
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	0.
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	
11	Enter the amount of line 10 to be Credited to 2011 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11	

**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
1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 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.		X
1c 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 <input type="checkbox"/> \$ <u>0.</u> (2) On foundation managers <input type="checkbox"/> \$ <u>0.</u>		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ <u>0.</u>		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	X	
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? If "Yes," attach the statement required by General Instruction T.		X
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) <input type="checkbox"/> NH		
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 2010 or the taxable year beginning in 2010 (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 acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>www.markwentworth.org</u>	13	X	
14	The books are in care of ► <u>NANCY KEANE</u> Telephone no ► <u>(603) 436-0169</u> Located at ► <u>346 PLEASANT STREET, PORTSMOUTH, NH</u> ZIP+4 ► <u>03801-4536</u>			
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	N/A	
16	At any time during calendar year 2010, 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 page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes," enter the name of the foreign country ►	16	Yes	No 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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here	1b	X
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 2010?	1c	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 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010? If "Yes," list the years ►	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
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 ►		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b If "Yes," did it have excess business holdings in 2010 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 2010.)	N/A	3b
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 2010?		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)?

☐ 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)?

N/A

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?

N/A

☐ 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?

If "Yes" to 6b, file Form 8870.

6b

X

**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?

N/A

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.

(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
See Statement 20		0.	0.	0.

**2** Compensation of five highest-paid employees (other than those included 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
DEBORAH RODIER - 346 PLEASANT STREET, PORTSMOUTH, NH 03801	EXEC DIR/ASSISTED LIV	114,313.	9,423.	0.
VERNA BREWER - 346 PLEASANT STREET, PORTSMOUTH, NH 03801	ASSISTED LIVING ADMINISTRATOR	98,776.	2,963.	0.
R. KRAIG BUTHY - 346 PLEASANT STREET, PORTSMOUTH, NH 03801	CONTROLLER	75,348.	2,410.	0.
SUZANNE RAPOZA - 346 PLEASANT STREET, PORTSMOUTH, NH 03801	REGISTERED NURSE	53,263.	13,846.	0.
GRETCHEN POEHLMAN - 346 PLEASANT STREET, PORTSMOUTH, NH 03801	DIRECTOR OF MARKETING	58,903.	3,309.	0.

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

4

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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. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
LIVING INNOVATIONS HOME CARE, INC. - 47 TIDE MILL ROAD, PO BOX 781, GREENLAND, NH 03840	MANAGEMENT FEES TO RUN WENTWORTH CONNEC	575,622.
DAN D'ENTRIMONT (FERRY CROSSING LLC) 14 FERRY LANE, BIDDEFORD, ME 04005	INTERIM CFO - CONSULTANT	113,336.
HOEFLE, PHOENIX & GORMLEY, PA 402 STATE STREET, PORTSMOUTH, NH 03801	LEGAL FEES	104,646.
J GAUDET ASSOCIATES INC. - 386 BRIDGTON ROAD, SUITE B, WESTBROOK, ME 04092	OUTSOURCED HR SERVICES & PLACEMENT	50,130.

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

0

**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 OPERATION OF A NURSING HOME/ASSISTED LIVING FACILITY AND ADULT DAYCARE SERVICES	7,303,923.
2	
3	
4	

**Part IX-B** Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments See instructions	
3	
<b>Total.</b> Add lines 1 through 3	0.

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities	<b>1a</b>	5,957,878.
<b>b</b>	Average of monthly cash balances	<b>1b</b>	1,925,119.
<b>c</b>	Fair market value of all other assets	<b>1c</b>	
<b>d</b>	Total (add lines 1a, b, and c)	<b>1d</b>	7,882,997.
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1e</b>	0.
<b>2</b>	Acquisition indebtedness applicable to line 1 assets	<b>2</b>	0.
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	7,882,997.
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	<b>4</b>	118,245.
<b>5</b>	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	7,764,752.
<b>6</b>	Minimum investment return. Enter 5% of line 5	<b>6</b>	388,238.

**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.)

<b>1</b>	Minimum investment return from Part X, line 6	<b>1</b>	
<b>2a</b>	Tax on investment income for 2010 from Part VI, line 5	<b>2a</b>	
<b>b</b>	Income tax for 2010 (This does not include the tax from Part VI)	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b	<b>2c</b>	
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1	<b>3</b>	
<b>4</b>	Recoveries of amounts treated as qualifying distributions	<b>4</b>	
<b>5</b>	Add lines 3 and 4	<b>5</b>	
<b>6</b>	Deduction from distributable amount (see instructions)	<b>6</b>	
<b>7</b>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	<b>7</b>	

**Part XII** Qualifying Distributions (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	<b>1a</b>	0.
<b>b</b>	Program-related investments - total from Part IX-B	<b>1b</b>	0.
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	<b>2</b>	21,364.
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required)	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule)	<b>3b</b>	
<b>4</b>	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	21,364.
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	<b>5</b>	0.
<b>6</b>	Adjusted qualifying distributions. Subtract line 5 from line 4	<b>6</b>	21,364.

**Note.** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Form 990-PF (2010)

**Part XIII Undistributed Income** (see instructions)

N/A

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
<b>1</b> Distributable amount for 2010 from Part XI, line 7				
<b>2</b> Undistributed Income, if any, as of the end of 2010				
<b>a</b> Enter amount for 2009 only				
<b>b</b> Total for prior years				
<b>3</b> Excess distributions carryover, if any, to 2010				
<b>a</b> From 2005				
<b>b</b> From 2006				
<b>c</b> From 2007				
<b>d</b> From 2008				
<b>e</b> From 2009				
<b>f</b> Total of lines 3a through e				
<b>4</b> Qualifying distributions for 2010 from Part XII, line 4 ▶ \$				
<b>a</b> Applied to 2009, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required - see instructions)				
<b>c</b> Treated as distributions out of corpus (Election required - see instructions)				
<b>d</b> Applied to 2010 distributable amount				
<b>e</b> Remaining amount distributed out of corpus				
<b>5</b> Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a))				
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5				
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b				
<b>c</b> 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				
<b>d</b> Subtract line 6c from line 6b Taxable amount - see instructions				
<b>e</b> Undistributed income for 2009 Subtract line 4a from line 2a Taxable amount - see instr				
<b>f</b> Undistributed income for 2010 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2011				
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)				
<b>8</b> Excess distributions carryover from 2005 not applied on line 5 or line 7				
<b>9</b> Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a				
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2006				
<b>b</b> Excess from 2007				
<b>c</b> Excess from 2008				
<b>d</b> Excess from 2009				
<b>e</b> Excess from 2010				

Form 990-PF (2010)

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

**1 a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2010, enter the date of the ruling ▶

**b** Check box to indicate whether the foundation is a private operating foundation described in section ☒ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year				Prior 3 years	(e) Total
	(a) 2010	(b) 2009	(c) 2008	(d) 2007		
<b>2 a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	0.	0.	0.	0.	0.	0.
<b>b</b> 85% of line 2a	0.	0.	0.	0.	0.	0.
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed	21,364.	24,250.	4,432,062.	7,338,172.	11,815,848.	
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities	0.	0.	0.	0.	0.	0.
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities	21,364.	24,250.	4,432,062.	7,338,172.	11,815,848.	
<b>3</b> Complete 3a, b, or c for the alternative test relied upon						
<b>a</b> "Assets" alternative test - enter						
(1) Value of all assets						0.
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)						0.
<b>b</b> "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed						0.
<b>c</b> "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)	4,894,296.	3,579,689.	581,575.	1,115,927.	10,171,487.	
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)	4,894,296.	3,579,689.	581,575.	1,115,927.	10,171,487.	
(3) Largest amount of support from an exempt organization						0.
(4) Gross investment income	291,061.	301,594.	457,110.	475,916.	1,525,681.	

**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 the 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) )

None

**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

None

**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 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
<b>a</b> Paid during the year  None				
<b>Total</b>				<b>3a</b> 0.
<b>b</b> Approved for future payment  None				
<b>Total</b>				<b>3b</b> 0.

**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
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount		
1 Program service revenue						
a NET RESIDENT ROOM &						
b BOARD						3,965,530.
c ENTRANCE FEES						36,000.
d WENTWORTH CONNECTIONS						709,907.
e						
f						
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash investments			14	2,002.		
4 Dividends and interest from securities			14	226,634.		
5 Net rental income or (loss) from real estate						
a Debt-financed property						
b Not debt-financed property			16	43,376.		
6 Net rental income or (loss) from personal property						
7 Other investment income						
8 Gain or (loss) from sales of assets other than inventory			18	160,759.		
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue						
a OTHER						184,620.
b						
c						
d						
e						
12 Subtotal. Add columns (b), (d), and (e)		0.		432,771.		4,896,057.
13 Total. Add line 12, columns (b), (d), and (e)					13	5,328,828.

(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 |
|---|--|-----|----|
| <b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of:   |  |     |    |
| (1) Cash  |  |     | X  |
| (2) Other assets  |  |     | X  |
| <b>b</b> Other transactions:  |  |     |    |
| (1) Sales of assets to a noncharitable exempt organization  |  |     | X  |
| (2) Purchases of assets from a noncharitable exempt organization  |  |     | X  |
| (3) Rental of facilities, equipment, or other assets  |  |     | X  |
| (4) Reimbursement arrangements  |  |     | X  |
| (5) Loans or loan guarantees  |  |     | X  |
| (6) Performance of services or membership or fundraising solicitations  |  |     | X  |
| <b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees   |  |     | X  |
| <b>d</b> 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
N/A		

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 or fiduciary) is based on all information of which preparer has any knowledge.			
	Signature of officer or trustee <i>Raymond R. Doolen</i>		Date 11/11/11	
Paid Preparer Use Only	Print/Type preparer's name <i>Matthew R. Hopbina</i>		Preparer's signature <i>M.R.H.</i>	Date 11-9-11
	Check <input type="checkbox"/> if self-employed		PTIN	
	Firm's name ▶ BAKER NEWMAN & NOYES			Firm's EIN ▶
	Firm's address ▶ BOX 507 PORTLAND, ME 04112			Phone no (207) 879-2100

Form **990-PF** (2010)

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

▶ Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

**2010**

Name of the organization

THE MARK WENTWORTH HOME

Employer identification number

02-022243

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Name of organization

Employer identification number

THE MARK WENTWORTH HOME

02-0222243

**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	THE JOAN DWYER REVOCABLE TRUST OF 2006 C/O ROBINSON, BOESCH & SENNOTT, P.A., 20 INTERNATIONAL DRIVE  PORTSMOUTH, NH 03801	\$ 90,258.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)



Name of organization

Employer identification number

THE MARK WENTWORTH HOME

02-022243

**Part II Noncash Property** (see instructions)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

Name of organization

Employer identification number

THE MARK WENTWORTH HOME

02-022243

**Part III** Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating 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.) ▶ \$

(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
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

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

OMB No. 1545-1709

▶ **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](http://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 <b>THE MARK WENTWORTH HOME</b>	Employer identification number <b>02-0222243</b>
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P.O. box, see instructions. <b>346 PLEASANT STREET</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>PORTSMOUTH, NH 03801-4536</b>	

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

**04**

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

**NANCY KEANE**

- The books are in the care of ▶ **346 PLEASANT STREET - PORTSMOUTH, NH 03801-4536**  
Telephone No. ▶ **(603) 436-0169** FAX No. ▶ **(603) 766-0192**

- 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.	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)

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒

**Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1)

**Part II Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed)

Type or print File by the extension due date for filing your return. See instructions.	Name of exempt organization	Employer identification number
	THE MARK WENTWORTH HOME	02-0222243
	Number, street, and room or suite no. If a P.O. box, see instructions 346 PLEASANT STREET	
City, town or post office, state, and ZIP code. For a foreign address, see instructions PORTSMOUTH, NH 03801-4536		

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

04

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
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

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

NANCY KEANE

- The books are in the care of ▶ 346 PLEASANT STREET - PORTSMOUTH, NH 03801-4536

Telephone No ▶ (603) 436-0169

FAX No. ▶ (603) 766-0192

- 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

4 I request an additional 3-month extension of time until November 15, 2011

5 For calendar year 2010, or other tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

6 If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return

☐ Change in accounting period

7 State in detail why you need the extension

**ADDITIONAL TIME IS NEEDED TO GATHER THE INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.**

8a 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	8a	\$	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 and any amount paid previously with Form 8868	8b	\$	0.
c <b>Balance due.</b> Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	8c	\$	0.

**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ▶

Title ▶ CPA

Date ▶

8-9-11

Form 8868 (Rev. 1-2011)

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Form 990-PF Interest on Savings and Temporary Cash Investments Statement 1

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Source	Amount
GENERAL FUNDS	2,002.
Total to Form 990-PF, Part I, line 3, Column A	2,002.

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Form 990-PF Dividends and Interest from Securities Statement 2

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Source	Gross Amount	Capital Gains Dividends	Column (A) Amount
COLEMAN FUND	81,049.	0.	81,049.
GENERAL FUNDS	1,190.	0.	1,190.
MARGESON FAMILY TRUST	1,907.	0.	1,907.
TRASK FUNDS	142,488.	0.	142,488.
Total to Fm 990-PF, Part I, ln 4	226,634.	0.	226,634.

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Form 990-PF Rental Income Statement 3

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Kind and Location of Property	Activity Number	Gross Rental Income
BUILDINGS, PORTSMOUTH, NH	1	62,425.
Total to Form 990-PF, Part I, line 5a		62,425.

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Form 990-PF Rental Expenses Statement 4

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Description	Activity Number	Amount	Total
UTILITIES & MAINTENANCE		12,939.	
DEPRECIATION		6,110.	
- SubTotal -	1		19,049.
Total rental expenses			19,049.
Net rental Income to Form 990-PF, Part I, line 5b			43,376.

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Form 990-PF                      Gain or (Loss) from Sale of Assets                      Statement      5

(a) Description of Property	Manner Acquired		Date Acquired		Date Sold
PUBLICALLY TRADED SECURITIES	Purchased				
(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss	
1,779,785.	1,659,159.	0.	0.	120,626.	

(a) Description of Property	Manner Acquired		Date Acquired		Date Sold
PUBLICALLY TRADED SECURITIES	Purchased				
(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss	
3,729,632.	3,692,357.	0.	0.	37,275.	

(a) Description of Property	Manner Acquired		Date Acquired		Date Sold
SALE OF EQUIPMENT	Purchased				
(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss	
2,858.	0.	0.	0.	2,858.	

Net Gain or Loss from Sale of Assets	160,759.
Capital Gains Dividends from Part IV	0.
Total to Form 990-PF, Part I, line 6a	160,759.

Form 990-PF	Other Income		Statement	6
Description	(a) Revenue Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	
NET RESIDENT ROOM & BOARD	3,965,530.	0.	3,965,530.	
ENTRANCE FEES	36,000.	0.	36,000.	
WENTWORTH CONNECTIONS	709,907.	0.	709,907.	
OTHER	184,620.	0.	184,620.	
Total to Form 990-PF, Part I, line 11	4,896,057.	0.	4,896,057.	

Form 990-PF	Legal Fees		Statement	7
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
LEGAL	347,463.	0.	347,463.	0.
To Fm 990-PF, Pg 1, ln 16a	347,463.	0.	347,463.	0.

Form 990-PF	Accounting Fees		Statement	8
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
ACCOUNTING	56,927.	0.	56,927.	0.
To Form 990-PF, Pg 1, ln 16b	56,927.	0.	56,927.	0.

Form 990-PF	Other Professional Fees			Statement 9
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
CONSULTING FEES	147,991.	0.	147,991.	0.
DIETITIAN	6,312.	0.	6,312.	0.
MEDICAL DIRECTORS	18,633.	0.	18,633.	0.
MENTAL HEALTH CONSULTANT	1,415.	0.	1,415.	0.
DENTAL CONSULTANT	1,400.	0.	1,400.	0.
OUTSOURCED STAFF	90,368.	0.	90,368.	0.
INVESTMENT FEES	28,714.	28,714.	28,714.	0.
To Form 990-PF, Pg 1, ln 16c	294,833.	28,714.	294,833.	0.

Form 990-PF	Taxes			Statement 10
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
PROVIDER TAX ASSESSMENT	27,288.	0.	27,288.	0.
To Form 990-PF, Pg 1, ln 18	27,288.	0.	27,288.	0.

Form 990-PF	Other Expenses			Statement 11
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
FOOD & FOOD SERVICES	225,334.	0.	225,334.	0.
EQUIPMENT RENTAL & MAINTENANCE	42,142.	0.	42,142.	0.
MISCELLANEOUS ADMINISTRATION EXPENSE	562,454.	0.	562,454.	0.
DUES/FEES/LICENSES	6,608.	0.	6,608.	0.
STAFF TRAINING & new employee EXPENSE	9,084.	0.	9,084.	0.
RESIDENT EXPENSES	1,510.	0.	1,510.	0.
SUPPLIES, HOUSEKEEPING EXPENSES	137,572.	0.	137,572.	0.
INSURANCE	245,497.	0.	245,497.	0.
TELEPHONE	13,248.	0.	13,248.	0.
COMPUTER EXPENSE	45,387.	0.	45,387.	0.



PAYROLL PROCESSING	21,009.	0.	21,009.	0.
ADVERTISING	45,473.	0.	45,473.	0.
WENTWORTH CONNECTIONS EXPENSES	487,928.	0.	487,928.	0.
BAD DEBT EXPENSE	26,414.	0.	26,414.	0.
AMORTIZATION	7,009.	0.	7,009.	0.
To Form 990-PF, Pg 1, ln 23	1,876,669.	0.	1,876,669.	0.

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Form 990-PF      Depreciation of Assets Not Held for Investment      Statement 12

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Description	Cost or Other Basis	Accumulated Depreciation	Book Value	Fair Market Value
LAND	198,904.	0.	198,904.	198,904.
BUILDINGS & IMPROVEMENTS	5,594,861.	210,978.	5,383,883.	5,383,883.
EQUIPMENT & FURNITURE	409,734.	43,239.	366,495.	366,495.
VEHICLES	58,189.	5,747.	52,442.	52,442.
To 990-PF, Part II, ln 14	6,261,688.	259,964.	6,001,724.	6,001,724.

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Form 990-PF      Corporate Stock      Statement 13

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Description	Book Value	Fair Market Value
CORPORATE STOCK	3,696,251.	3,696,251.
MUTUAL FUNDS	1,570,562.	1,570,562.
Total to Form 990-PF, Part II, line 10b	5,266,813.	5,266,813.

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Form 990-PF      Corporate Bonds      Statement 14

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Description	Book Value	Fair Market Value
CORPORATE BONDS	1,101,191.	1,101,191.
Total to Form 990-PF, Part II, line 10c	1,101,191.	1,101,191.

Form 990-PF	Other Investments	Statement	15
Description	Valuation Method	Book Value	Fair Market Value
BENEFICIAL INTEREST IN TRUST	FMV	545,302.	545,302.
Total to Form 990-PF, Part II, line 13		545,302.	545,302.

Form 990-PF	Other Assets	Statement	16
Description	Beginning of Yr Book Value	End of Year Book Value	Fair Market Value
OTHER RECEIVABLES	6,550.	38,434.	38,434.
NET DEFERRED FINANCING COSTS	216,708.	0.	0.
REFUNDABLE RESIDENT DEPOSITS	272,960.	301,610.	301,610.
To Form 990-PF, Part II, line 15	496,218.	340,044.	340,044.

Form 990-PF	Mortgages Payable	Statement	17
Description		Balance Due	
TD BANKNORTH (BFA OF STATE OF NH)		7,415,192.	
TOUCHTOWN INC.		5,458.	
Total to Form 990-PF, Part II, line 21, Column B		7,420,650.	

Form 990-PF	Other Liabilities	Statement	18
Description	BOY Amount	EOY Amount	
REFUNDABLE RESIDENT DEPOSITS	272,960.	301,610.	
LIVING INNOVATIONS, INC. - WENTWORTH CONNECTIONS	275,579.	122,957.	
FMV INTEREST RATE SWAP	0.	75,718.	
Total to Form 990-PF, Part II, line 22	548,539.	500,285.	

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Form 990-PF	Statement of Activities not Previously Reported Part VII-A, Line 2	Statement 19
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Explanation

On January 27, 2010, The Mark Wentworth Home filed Chapter 11 under the United States Bankruptcy Court District of New Hampshire.

On April 30, 2010, the Bankruptcy Court confirmed the Home's plan of reorganization. The confirmed plan provided for the following:

Assets Limited as to Use - The Home's assets limited as to use were determined to be beyond the reach of creditors due to their restricted nature.

Secured Debt - The Home's \$14,000,000 of secured debt was exchanged for a \$10,000,000 secured note and a payment of \$100,000.

Interest Rate Swap - The Interest Rate Swap Agreement with Lehman Brothers was settled for \$113,577 to be paid in three annual installments of \$37,859 beginning June 10, 2010.

Living Innovations, Inc. Claim - This unsecured claim of approximately \$209,000 was settled for \$12,540.

General Unsecured Claims - Each unsecured claim in this class (total \$55,126) could elect to receive either:

- a. distribution in cash equal to 3% of the claim, or
- b. three equal annual distributions in cash equal to 2% of the claim.

Claims of \$2,000 or less - Each holder (total of \$14,325) was entitled to receive 4.5% of the claim.

On April 30, 2010, the Home accounted for the reorganization using fresh-start reporting. Accordingly, all assets and liabilities are restated to reflect their reorganization value, which approximates fair value at the date of reorganization.

Form 990-PF

Part VIII - List of Officers, Directors  
Trustees and Foundation Managers

Statement 20

Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Expense Contrib Account
DENNIS STONE 346 PLEASANT STREET PORTSMOUTH, NH 03801	PRESIDENT 6.00	0.	0. 0.
RAYMOND AMBROGI 346 PLEASANT STREET PORTSMOUTH, NH 03801	TREASURER 6.00	0.	0. 0.
CINDY KNAPP 346 PLEASANT STREET PORTSMOUTH, NH 03801	SECRETARY 6.00	0.	0. 0.
JAY S. GIBSON 346 PLEASANT STREET PORTSMOUTH, NH 03801	TRUSTEE 3.00	0.	0. 0.
WILLIAM HENSON 346 PLEASANT STREET PORTSMOUTH, NH 03801	TRUSTEE 3.00	0.	0. 0.
JOAN NICKELL 346 PLEASANT STREET PORTSMOUTH, NH 03801	TRUSTEE 3.00	0.	0. 0.
JOHN HEBERT 346 PLEASANT STREET PORTSMOUTH, NH 03801	TRUSTEE 3.00	0.	0. 0.
STEPHEN WITT 346 PLEASANT STREET PORTSMOUTH, NH 03801	TRUSTEE 3.00	0.	0. 0.
KAREN FRED A 346 PLEASANT STREET PORTSMOUTH, NH 03801	TRUSTEE 3.00	0.	0. 0.
LIS CONNORS 346 PLEASANT STREET PORTSMOUTH, NH 03801	TRUSTEE 3.00	0.	0. 0.
JOE DIAMENT 346 PLEASANT STREET PORTSMOUTH, NH 03801	TRUSTEE 3.00	0.	0. 0.

KATHLEEN, ROBINSON  
346 PLEASANT STREET  
PORTSMOUTH, NH 03801

TRUSTEE  
3.00

0. 0. 0.

RUTH GRIFFIN  
346 PLEASANT STREET  
PORTSMOUTH, NH 03801

TRUSTEE  
3.00

0. 0. 0.

Totals included on 990-PF, Page 6, Part VIII

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