

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



990-PF

Return of Private Foundation

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

2015

Open to Public Inspection

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

For	calend	dar year 2015 or tax year beginning , a	and ending				·
Na	me of fou	undation			A Emple	oyer Identification number	···
_							
		HAM BURTMAN CHARITY TRUST				-6004364	,,, <u>.</u>
		d street (or PO box number if mail is not delivered to street address) WASHINGTON STREET	Ro	om/suite		hone number (see instructions)	1
		, state or province, country, and ZIP or foreign postal code			60.	3-742-2332	
_	OVE				C If exer	mption application is pending, o	check here
G	Check a		n of a former public cha	arity.	D 1. Fo	reign organizations, check her	
_		Final return Amended	·	anty			_
		Address change Name cha				reign organizations meeting th % test, check here and attach	
Н (hack t	type of organization X Section 501(c)(3) exempt private	<u> </u>			·	,
			e private foundation		•	ate foundation status was term n 507(b)(1)(A), check here	inated under
		ket value of all assets at J Accounting method	X Cash Acci	nual			
		ear (from Part II, col (c), Other (specify)	Casii Acci	luai		foundation is in a 60-month ten section 507(b)(1)(B), check he	
	ne 16) i		ne on cash hasis)			(// N=)	
	art l	Analysis of Revenue and Expenses (The total of	(a) Revenue and	,			(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per	(b) Net inve		(c) Adjusted net income	for chantable purposes
		the amounts in column (a) (see instructions))	books		· · · · ·	income .	(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)					
	2	Check ► X If the foundation is not required to attach Sch B		: 			
	3	Interest on savings and temporary cash investments	6		6	6	
	4	Dividends and interest from securities	39,815		9,815	39,815	
	5a	Gross rents					
ne	b	Net rental income or (loss)					,
en	6a	Net gain or (loss) from sale of assets not on line 10	-32,213	:			+TUFFO
Revenue	b	Gross sales price for all assets on line 6a 662,401					+,,,,,,,,
œ	7	Capital gain net income (from Part IV, line 2)			0		- W
	8	Net short-term capital gain				180 WVA 0	* 2016 \X
	9	Income modifications				(4)	14,
	10a b	Gross sales less returns and allowances				COD	
<u> </u>	C	Less Cost of goods sold Gross profit or (loss) (attach schedule)		·		Lucy rapes again remaind	drawn a car variation
ý	11	Other income (attach schedule) STMT 1	2,170		2,170	2,170	
	12	Total. Add lines 1 through 11	9,778		1,991	41,991	
	13	Compensation of officers, directors, trustees, etc	9,000		9,000	9,000	9,000
es	14	Other employee salaries and wages	37000	-	3,000	3,000	3,000
enses	15	Pension plans, employee benefits					
ğ	16a	Legal fees (attach schedule) SEE STMT 2	8,484		8,484	8,484	8,484
ш	b	Accounting fees (attach schedule) STMT 3	800	-	800	800	800
ĕ	С	Other professional fees (attach schedule) STMT 4	136		136		
rat	17	Interest					
ist	18	Taxes (attach schedule) (see instructions) STMT 5	166		166	166	166
Ë	19	Depreciation (attach schedule) and depletion		L			
퉏	20	Occupancy					
Ϋ́	21	Travel, conferences, and meetings					
and	22	Printing and publications					
Operating and Administrative Exp	23	Other expenses (att sch) STMT 6	300		300	300	300
¥ir	24	Total operating and administrative expenses.					
ers	1	Add lines 13 through 23	18,886		8,886	18,886	
o	25	Contributions, gifts, grants paid	80,000	***************************************			80,000
_	26	Total expenses and disbursements. Add lines 24 and 25	98,886	1	8,886	18,886	98,886
	27	Subtract line 26 from line 12	_				
	а	Excess of revenue over expenses and disbursements	-89,108				
	b	Net investment income (if negative, enter -0-)			23,105		
	1 6	Adjusted net income (if negative enter -0-)		t		23 105	F

For Paperwork Reduction Act Notice, see instructions.

924

Form **990-PF** (2015)

Fo	ເຫ 990	-PF (2015) ABRAHAM BURTMAN CHARITY TRUST	02-6004364	4	Page 2
			Beginning of year	End o	of year
	Part II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
٦	1、	Cash – non-interest-bearing	39,196	15,376	15,376
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶			
		Less allowance for doubtful accounts ▶			
Ì	4	Pledges receivable ▶			
		Less. allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	•	disqualified persons (attach schedule) (see			
1		instructions)]		Ì
	7	Other notes and loans receivable (att. schedule)			
	•	Less allowance for doubtful accounts ▶ 0			Ę.
	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
155	10a	Investments – U.S. and state government obligations (attach schedule)			
`	b	Investments – corporate stock (attach schedule) SEE STMT 7	188,762	164,492	281,677
	C	Investments – corporate bonds (attach schedule) SEE STMT 8	87,640	199,334	
	11	Investments – land, buildings, and equipment basis	3,7020		
		Less accumulated depreciation (attach sch.)	1		Ť
1	12	Investments – mortgage loans			
ı	13	Investments – other (attach schedule) SEE STATEMENT 9	918,373	764,903	772,330
	14	The second secon	320,373	.04,303	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	14	Land, buildings, and equipment basis			†
	4 =	Less accumulated depreciation (attach sch)	 		
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers – see the	1,233,971	1,144,105	1,269,082
-	47	instructions Also, see page 1, item I)	1,233,311	1,144,103	1,203,002
	17	Accounts payable and accrued expenses	 		1
s	18	Grants payable	 		
itie	19	Deferred revenue			†
Ē	20	Loans from officers, directors, trustees, and other disqualified persons		·	-
Liabilities	21	Mortgages and other notes payable (attach schedule)			+
	22	Other liabilities (describe >)	0		1
_	23	Total liabilities (add lines 17 through 22)	<u> </u>		1
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
es					
Net Assets or Fund Balances	24	Unrestricted			-
ää	25	Temporarily restricted			-
ā	26	Permanently restricted			
5		Foundations that do not follow SFAS 117, check here			
<u> </u>		and complete lines 27 through 31.	1 000 071	1 144 105	
Š	27	Capital stock, trust principal, or current funds	1,233,971	1,144,105	2
set	28	Paid-in or capital surplus, or land, bldg , and equipment fund			-
As	29	Retained earnings, accumulated income, endowment, or other funds	1 000 071	1 144 105	-{
et	30	Total net assets or fund balances (see instructions)	1,233,971	1,144,105	4
Z	31	Total liabilities and net assets/fund balances (see	1 000 001	4 444 405	
	<u> </u>	instructions)	1,233,971	1,144,105	<u>)[</u>
_	Part				
•		I net assets or fund balances at beginning of year - Part II, column (a), line 30 (must	agree with	[1 000 05
		of-year figure reported on prior year's return)		1	1,233,97
		r amount from Part I, line 27a		2	-89,10
		r increases not included in line 2 (itemize)		3	1 144 00
		lines 1, 2, and 3		4	1,144,86
		eases not included in line 2 (itemize) SEE STATEMENT 10		5	75
(6 Total	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b)	, line 30		1,144,10

Part IV- Capital Gains a	nd Losses for Tax on Investme	ent Income				
	cribe the kind(s) of property sold (e.g., real estate, arehouse, or common stock, 200 shs. MLC Co.)		(b) How acquired P Purchase D Donation	(c) Date acqu (mo , day,)		(d) Date sold (mo , day, yr)
1a MERRILL LYNCH			P	VARIO	JS	VARIOUS
b MERRILL LYNCH			P	VARIO		VARIOUS
c MERRILL LYNCH			P	VARIO	US	VARIOUS_
d CAPITAL GAIN DI	STRIBUTION					
<u>e</u>			<u> </u>	·		
(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale	((h) Gain or (e) plus (f) m	
a 370,884			393,340			-22,456
ь 257,419			289,560			-32,141
c 18,829			11,714			7,115
d 15,269	L					15,269
<u>e</u>						
Complete only for assets showing	gain in column (h) and owned by the four	ndation on 12/31/69		(I) G	ains (Col (h)) gain minus
(I) F M ∨ as of 12/31/69	(j) Adjusted basis as of 12/31/69	1	ss of col (i) I (j), if any	• •	i), but not les Losses (from	ss than -0-) or col (h))
a	<u> </u>					-22,456
<u>b</u>						-32,141
_c						7,115
d	<u> </u>					15,269
<u>e</u>	<u> </u>	<u> </u>				
· -	If gain, also enter in If (loss), enter -0- in s) as defined in sections 1222(5) and (6) column (c) (see instructions) If (loss), enter -0- in If (los	Part I, line 7	,	2		-32,213
Part 1, line 8	column (c) (see instructions) in (loss), en	iter -0- iii		3		
	nder Section 4940(e) for Reduc	ed Tay on Net I	nyestment Inco	<u> </u>		
	foundations subject to the section 4940(a			110		
	s part blank on 4942 tax on the distributable amount of fy under section 4940(e) Do not complete	• •	e period?			Yes X No
	each column for each year, see the instruc		any entries			
(a)		Storis before making	-			(d)
Base penod years Calendar year (or tax year beginning in)			(c) ue of nonchantable-use asset	s	Distrib	ution ratio ided by col (c))
2014		,280				
2013		,101				
		.,392				
		5,522				
2010	91	,093				
2 Total of line 1, column (d)				2		
-	5-year base period – divide the total on lin as been in existence if less than 5 years	e 2 by 5, or by the		3		
4 Enter the net value of noncharitat	ole-use assets for 2015 from Part X, line 5	5		4		0
5 Multiply line 4 by line 3				5		
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)			6		231
7 Add lines 5 and 6				7		231
						00 006
8 Enter qualifying distributions from If line 8 is equal to or greater than	i Part XII, line 4 i line 7, check the box in Part VI, line 1b, a	and complete that pa	irt using a 1% tax rate	See the		98,886

Part VI instructions

,, ř.	990-PF (2015) ABRAHAM BURTMAN CHARITY TRUST 02-6004364				Pa	ge 4
	rt 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)				_	
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1				31
	here ▶ X 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	 -			31
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	<u> </u>			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5				31
6	Credits/Payments.					
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 910					
þ	Exempt foreign organizations – tax withheld at source					
C	Tax paid with application for extension of time to file (Form 8868)					
d	Backup withholding erroneously withheld 6d 6d	1	ŀ		,	
7	Total credits and payments Add lines 6a through 6d			_		10
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	 			79
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				79
11	Enter the amount of line 10 to be Credited to 2016 estimated tax ▶ 679 Refunded ▶	11	<u> </u>			
	nt VII-A Statements Regarding Activities				. <u>.</u> 1	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it				Yes	No X
	participate or intervene in any political campaign?			1a		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see				j	v
	Instructions for the definition)?			1b	1	<u>x</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				Ī	
	published or distributed by the foundation in connection with the activities				ŧ	x
С	Did the foundation file Form 1120-POL for this year?			1c		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				1	
	(1) On the foundation. \$ (2) On foundation managers \$	_			1	
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				I	
_	on foundation managers \$			2	ŧ	x
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				İ	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			,	ŧ	¥
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3 4a		$\frac{\mathbf{x}}{\mathbf{x}}$
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		N/A	4b	-	
b	If "Yes," has it filed a tax return on Form 990-T for this year?		21/ 22	5		<u>x</u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?					
^	If "Yes," attach the statement required by General Instruction T. Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				1	
6	By language in the governing instrument, or				1	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that				1	:
	conflict with the state law remain in the governing instrument?			6	\mathbf{x}	
-	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 X'	v		7	х	
7	Enter the states to which the foundation reports or with which it is registered (see instructions)	-				
8a	NONE					
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			8b	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 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"					
	complete Part XIV			9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their					
	names and addresses			10		<u> </u>
				_ 01	an_DI	

	990-PF (2015) ABRAHAM BURTMAI			004364			Page 6
		activities for Which Form 4	720 May Be Re	equired (contin	ued)		
ia	During the year did the foundation pay or incur	•			₹		1
	(1) Carry on propaganda, or otherwise attempt	- · · · · · · · · · · · · · · · · · · ·		¥	es X No		
	(2) Influence the outcome of any specific public		carry on,		V.		
	directly or indirectly, any voter registration (=	es X No		
	(3) Provide a grant to an individual for travel, s	•		A Y	es 📙 No		
	(4) Provide a grant to an organization other that	in a charitable, etc., organization de	escribed in		es X No		
	section 4945(d)(4)(A)? (see instructions)	a abandable salambin literaa	d., 4 1	T	es X No		
	(5) Provide for any purpose other than religiou	•	ducational		es X No		
	purposes, or for the prevention of cruelty to				es 🗶 No		1
b	If any answer is "Yes" to 5a(1)–(5), did any of t	· •	•	ribea in	ŀ	5b	x
	Regulations section 53 4945 or in a current not	• • •	•		_ r t	30	
_	Organizations relying on a current notice regard	•					
С	If the answer is "Yes" to question 5a(4), does the		the tax	N/A 🗌 Y	es No		
	because it maintained expenditure responsibilit	•		M/A []	es 🗆 No	1	
•	If "Yes," attach the statement required by Regu		n romu ima				
ia .	Did the foundation, during the year, receive any	riunus, directly of indirectly, to pay	premiums		es X No		
٠.	on a personal benefit contract?	directly or indice other on a more	and houselft names		es 🖭 NO	6Ь	x
D	Did the foundation, during the year, pay premiu	ms, directly or indirectly, on a perso	onai benefit contract	,	ŀ	OD	
	If "Yes" to 6b, file Form 8870.	tion a market a graphibited to calculate	· teame a eleano		es X No		- 1
	At any time during the tax year, was the founda				es X No N/A	7b	ŀ
_	If "Yes," did the foundation receive any proceed	rs, Directors, Trustees, Fo					
۲	Information About Officer and Contractors	s, Directors, Trustees, Fo	ulluation Mana	gers, mignily r	ald Elliployee	. ,	
_	List all officers, directors, trustees, foundation	on managers and their compensa	tion (see instruction	ons)			
<u> </u>	131 411 01110013, 411001313, 41401003, 104114411	The managero and the compenses			(d) Contributions to		
	(a) Name and address		(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	employee benefit plans and deferred compensation		nse account, allowances
R]	CHARD THAYER	DOVER	TRUSTEE				
P.	O. BOX 608	NH 03820	5.00	3,000	0		0
S7	EPHANIE SHAINES	DOVER	TRUSTEE				
Ρ.	о. вох 608	NH 03820	5.00	3,000	0		0
P.	UL R. COX	DOVER	TRUSTEE				
P.	O. BOX 608	NH 03820	5.00	3,000	0		0
2	Compensation of five highest-paid employe	ees (other than those included o	n line 1 – see instri	uctions). If none,	enter		
	"NONE."			, 			
	(a) Name and address of each employee paid mo	re than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation		nse account, allowances
N	ONE						
_			 				
_			 		 	<u> </u>	
_							··,,··
				<u></u>		<u>L</u>	
ota	al number of other employees paid over \$50,000					om 99	0-PF (2015)

Form	990-PF (2015) ABRAHAM BURTMAN CHARITY TRUST	02-6004364	Page 7
Pa	it VIII Information About Officers, Directors, Trustees, Foundation	ation Managers, Highly Paid E	
	and Contractors (continued)		
3	Five highest-paid independent contractors for professional services (see instruc	tions). If none, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NC	ONE		
Tota	number of others receiving over \$50,000 for professional services		•
	····		
Pa	at IX-A Summary of Direct Charitable Activities		
	the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such inizations and other beneficiaries served, conferences convened, research papers produced, etc.	as the number of	Expenses
1	SEE ATTACHED LIST OF SCHOLARSHIPS AND GRAN	TS AWARDED	+
•			
			80,000
2			
_			
3			
_			
4			
	Summary of Program-Related Investments (see instruc	ctions)	
	cnbe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 N/A		Amount
1	N/A		
2			<u> </u>
_			
All c	other program-related investments. See instructions		
3	· ·		

Form 990-PF (2015)

Total. Add lines 1 through 3

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 (2015)

Form 990-PF (2015) ABRAHAM BURTMAN CHARITY TRUST

02-6004364

Page 9

Pa	rt XIV Private Operating Fou	indations (see ins	tructions and Par	VII-A. guestion 9)		1 age 10
1a	If the foundation has received a ruling or o				··	
	foundation, and the ruling is effective for 2)		
b	Check box to indicate whether the founda		•	d in section 49	4942 (J)(3) or 4942	(1)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
	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					
е	Qualifying distributions made directly	· · · ·				
	for active conduct of exempt activities					
	Subtract line 2d from line 2c				ì	
3	Complete 3a, b, or c for the					
	alternative test relied upon					
а	"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					
С	"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)(iii)					
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income					
Pa	of XV Supplementary Inform	nation (Complete	this part only if t	he foundation had	\$5.000 or more i	n assets at
	any time during the ye				• • • • • • • • • • • • • • • • • • • •	
1	Information Regarding Foundation Ma	nagers:		. , <u>.</u>		
а	List any managers of the foundation who I	nave contributed more t	han 2% of the total cor	ntributions received by t	he foundation	
	before the close of any tax year (but only i	f they have contributed	more than \$5,000) (S	ee 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 por	rtion of the	
	ownership of a partnership or other entity)	of which the foundation	n has a 10% or greater	interest.		
	N/A		_			
2	Information Regarding Contribution, G	rant, Gift, Loan, Scho	larship, etc., Progran	ns:		
	Check here ▶ ☐ If the foundation only	makes contributions to	preselected charitable	organizations and does	s not accept	
	unsolicited requests for funds If the found	ation makes gifts, gran	ts, etc (see instruction	s) to individuals or orga	nizations under	
	other conditions, complete items 2a, b, c,	and d				
а	The name, address, and telephone number		the person to whom ap	plications should be ad	dressed	
	PAUL R. COX ESQ. 603		•			
	P.O. BOX 608 DOVER N		8			
b	The form in which applications should be			should include		
	SEE ATTACHED SAMPLE					
С	Any submission deadlines					
	MAY 10 FOR SCHOLARSH	IPS; SEPTEM	BER 15 FOR	GRANTS		
d	Any restrictions or limitations on awards,	such as by geographica	l areas, charitable field	s, kinds of institutions, o	or other	
	factors.					
	N/A					

	Part XV Supplementary Information (co	ontinued)			
3	Part XV Supplementary Information (co Grants and Contributions Paid During the	Year or Approved for Fu	ture Payment		
	Recipient	if recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
_	Name and address (home or business)	or substantial contributor	recipient	CONTRIBUTION	
_	Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	80,000
	Total b Approved for future payment N/A			▶ 3a	80,000
	Total			▶ 3b	

Part XVI-	A Analysis of Income-Producing Acti	vities				
	mounts unless otherwise indicated		ed business income	Exclude	d by section 512, 513, or 514	
٠		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income
1 Program	service revenue			- COLE		(See instructions)
a						
b		-				
°.——						
d				 		
_				-		
f				-		
	and contracts from government agencies			<u> </u>		
	hip dues and assessments	<u> </u>		+		
	n savings and temporary cash investments and interest from securities			+ -		30.015
	income or (loss) from real estate					39,815
	financed property					
	ebt-financed property			 		
	income or (loss) from personal property		, , , ,	 		
	estment income	-		+	·	2,170
	oss) from sales of assets other than inventory			-	·- <u>-</u> -	-32,213
	e or (loss) from special events			1		32,213
	fit or (loss) from sales of inventory			1		
	enue. a					**
b				—		
c				1		
d						
е						
12 Subtotal	Add columns (b), (d), and (e)		()	0	9,778
13 Total. Ad	d line 12, columns (b), (d), and (e)	-			13	9,778
	et in line 13 instructions to verify calculations)					
Part XVI-	Relationship of Activities to the Ac	<u>complishm</u>	ent of Exempt Pu	urposes	<u> </u>	
Line No. ▼	Explain below how each activity for which income is accomplishment of the foundation's exempt purposi)
N/A						
		<u>.</u>				
			 			
					,	
		 	·			
					-	
						
			·			
			··			
						
			·		 	
						
	-					
			·			

Part X	(VII	Information Regardanization		nsfers To and	I Transaction	s and Re	lationships Wit	h Noncharitable		
1 Did	the orga	anization directly or indi		in any of the follow	ving with any other	er organizati	on described		Ye	s No
		01(c) of the Code (other							16	5 140
	anızatıor		man section	301(c)(3) organiza	ations) of in section	on 527, relai	ing to political			I
•		om the reporting founda	ation to a non	obaritable evenut	organization of					1
	Cash	om the reporting founds	ation to a non	chantable exempt	organization of					∮ •
	Other a	ecoto							1a(1)	X
									1a(2)	<u> </u>
	er transa								i	1
		f assets to a noncharita		-					1b(1)	<u> </u>
		ses of assets from a no		. •	1				1b(2)	X
		of facilities, equipment,		ts					1b(3)	X
		rsement arrangements							1b(4)	X
		or loan guarantees							1b(5)	X
		ance of services or me		_					1b(6)	X
		acılıtıes, equipment, ma							1c	X
d If th	e answe	er to any of the above is	"Yes," compl	ete the following s	chedule Column	(b) should a	always show the fair m	narket		
valu	e of the	goods, other assets, or	r services give	en by the reporting	foundation If the	foundation	received less than far	ır market		
valu	ie in any	transaction or sharing	arrangement,	show in column (d) the value of the	goods, oth	er assets, or services	received		
(a) Lin	e no	(b) Amount involved	(c) Name	e of nonchantable exemp	ot organization	(d) Description of transfers, tr	ansactions, and shanng arra	ingements	
A/N										
				-						
										
				· · · · · ·						
										
			 	· · · · · · · · · · · · · · · · · · ·			-			
			<u> </u>							
		L								
		ation directly or indirect	•				zations	r	í	
		section 501(c) of the C		an section 501(c)(3)) or in section 5	27?		L	Yes [X No
b If "Y		nplete the following sch	edule							
/-		(a) Name of organization		(b) Type of o	rganization		(c) Descrip	ption of relationship		
N/A	<u>, </u>									
				-t						
							•			
		natues of perjury, I declare the						knowledge and belief, it is	true,	
	conect, a	nd complete Declaration of p	reparer (omer tha	an taxpayer) is based o	n all information of wh	ich preparer na	is any knowledge	May the IRS discu	ss this return	
Sign			\ 1					with the preparer s		\neg 1
lere) /(1 . K.	•	(see instructions)?	Yes	No
		Xanl	$\bigcirc \backslash \ V$	\	15	ארו וו	TRUS	STEE		
	Sign	ature of officer or trustee	1 /2	1	Date	17/10	Title			
	Pont/Ti	rpe preparer's name	-		Preparer's signature			Date		
	((((((((((((((((((((po proparor a riallia		-	rieparers signature	•		Date	Che	
aid	МТСР	AEL J. MURPHY						05/13	1	employed
reparer		1.CTD.DI	IV DOM	ERS & WII	SON CBAS	, PC			29186	<u></u>
se Only	Firm's r								04663	
•	Firm's a		ÆRRILL		AL DRIVE			603		
	l	HAMP'	CON, NH	03842-1	.942			Phone no 603	<u>-926-</u>	<u>8063</u>

5/13/2016 2:09 PM 4 800 2,170 800 136 136 2,170 8,484 8,484 Adjusted Net Charitable Charitable Charitable Purpose Purpose Purpose Income 800 800 136 136 Net Investment 8,484 8,484 2,170 2,170 Adjusted Net Adjusted Net Adjusted Net Income Statement 4 - Form 990-PF, Part I, Line 16c - Other Professional Fees Statement 3 - Form 990-PF, Part I, Line 16b - Accounting Fees Statement 1 - Form 990-PF, Part I, Line 11 - Other Income Statement 2 - Form 990-PF, Part I, Line 16a - Legal Fees 800 800 2,170 2,170 8,484 8,484 Revenue per Investment Investment Investment BURNSABRAH ABRAHAM BURTMAN CHARITY TRUST

Federal Statements Books Set Set Ret 800 800 8,484 8,484 Total Total Total BURNS BRYANT COX & ROCKEFELLER Description Description Description Description ACCOUNTING FEES INVESTMENT FEES FYE: 12/31/2015 OTHER INCOME TOTAL TOTAL TOTAL TOTAL

BURNSABRAH ABRAHAM BURTMAN CHARITY TRUST 02-6004364 FYE: 12/31/2015	SHARITY TR	UST Federal St	atement	<u>s</u>		5/13/2016	5/13/2016 2:09 PM
	Statement 5	- 1	F, Part I, L	Form 990-PF, Part I, Line 18 - Taxes	ଡ଼ା		
Description		Total	Net Investment	t nent	Adjusted Net	Charitable Purpose	able sse
FOREIGN TAXES FILING FEES COURT FEES	ψ	6 75 85	জ	6 75 85	\$ 6 75 85	φ	7 6 85
TOTAL	w	166	w.		\$ 166	w w	166
State	Statement 6 - Form	990-PF,	Part I, Line 2:	Line 23 - Other Expenses	enses		
Description	–	Total	Net Investment	t nent	Adjusted Net	Charitable Purpose	able se
EXPENSES BONDING	w	300	٠ •	300	300	w	300
TOTAL	ۍ.	300	w	300	\$ 300	φ	300
Statement 7 -	- Form 990-PF, Part II,	PF, Part II, Lin	e 10b - Col	rporate Stoc	Line 10b - Corporate Stock Investments		}
Description		Beginning of Year		End of Year	Basis of Valuation	Fair Market Value	ket
EQUITIES TOTAL	_w _w	188,762	, _w	164,492	COST	\$ 281	, 677
Statement 8 - Form 990-P	- Form 990-I	PF, Part II, Lin	le 10c - Co	rporate Bond	F, Part II, Line 10c - Corporate Bond Investments		
Description FIXED INCOME TOTAL	w w	Beginning of Year 87, 640 87, 640		End of Year 199, 334 199, 334	Basis of Valuation	Fair Market Value \$ 199, 69	(et 699
							5-8

-

BURNSABRAH ABRAHAM BURTMAN CHARITY TRUST

Federal Statements

5/13/2016 2:09 PM

02-6004364 FYE: 12/31/2015

Basis of Fair Market	ᡐ	\$ 772,330
End of Year	729,903	764,903
Beginning of Year	\$ 868,373 \$ 50,000	\$ 918,373
Description	MUTUAL FUNDS BONDS	TOTAL

BURNSABRAH ABRAHAM BURTMAN CHARITY TRUST 02-6004364 Federal Statements

5/13/2016 2:09 PM

FYE: 12/31/2015

Statement 10 - Form 990-PF, Part III, Line 5 - Other Decreases

Description	<u>1</u>	Amount
FEDERAL TAXES	\$	758
TOTAL	\$	758

Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

Description

SEE ATTACHED SAMPLE

Form 990-PF, Part XV, Line 2c - Submission Deadlines

Description

MAY 10 FOR SCHOLARSHIPS; SEPTEMBER 15 FOR GRANTS

BURNSABRAH ABRAHAM BURTMAN CHARITY TRUST 02-6004364 FYE: 12/31/2015	N CHARITY TRUST	≀∪ST Federal Statements	ments	5/13/2016 2:09 PM	2:09 PM
Statement 11 - Fo	ırm 990-PF, Part X	V, Line 3a - G	Statement 11 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year	During the	
Name	Š	Address			
Address	Relationship	Status	Purpose	A	Amount
CLIPPER FOUNDATION			FOR PHILANTHROPIC ASSIS	ASSISTANCE	1,000
UNH MOCK TRIAL			FOR DHILANTHROPIC ASSIS	ASSISTANCE	000
FARMINGTON HIGH SCHOOL ALUMNI					
GOODWIN PUBLIC LIBRARY			FHILANIAROFIC	ASSISTANCE	T, 000
VEW DIELE LIEBARY			FOR PHILANTHROPIC ASSIS	ASSISTANCE	1,000
NEW DONING FOREIC BIDINGS			FOR PHILANTHROPIC ASSIS	ASSISTANCE	1,000
SOCINEASI LAND IROSI			FOR PHILANTHROPIC ASSIS	ASSISTANCE	1,000
INTERFALTH FOOD PANIRY			FOR PHILANTHROPIC ASSIS	ASSISTANCE	1,500
NEW DURHAM FOOD PANTRY			FOR PHILANTHROPIC ASSIS	ASSISTANCE	1,500
NUTE HIGH SCHOOL SCHOLARSHIP			FOR PHILANTHROPIC ASSIS	ASSISTANCE	2,000
FARMINGTON HIGH SCHOOL SCHOLARSHIP	HIP			H N S T S T S T S T S T S T S T S T S T S	
NEW DURHAM HIGH SCHOOL SCHOLARSHIP	HIP				0000
GIII) SIGIO SACO COS MOMONIMORGI			FOR PHILANTHROPIC ASSISTANCE	TANCE	2,000

2,000

200

250

FOR PHILANTHROPIC ASSISTANCE

FOR PHILANTHROPIC ASSISTANCE

FOR PHILANTHROPIC ASSISTANCE

FOR PHILANTHROPIC ASSISTANCE

DOVER CHILDREN'S CENTER

TOYS FOR TOTS

VICTIMS INC

ST ANN HOME

FOR PHILANTHROPIC ASSISTANCE

FOR PHILANTHROPIC ASSISTANCE

FARMINGTON 500 BOYS & GIRLS CLUB

COMMUNITY PARTNERS

250

300

300

BURNSABRAH ABRAHAM BURTMAN CHARITY TRU	UST
02-6004364 F	Federal Statements

5/13/2016 2:09 PM

FYE: 12/31/2015

Statement 11 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Name	A	Address		
Address	Relationship	Status	Purpose	Amount
DAVID'S HOUSE			TOWK DITINATED AND A STANKED TO	
ROCHESTER CHILD CARE CENTER			FULLANIANOFIC	006
TWO SETERAL TO			FOR PHILANTHROPIC ASSISTANCE	300
			FOR PHILANTHROPIC ASSISTANCE	300
N H CHILDREN'S MOSEOM			FOR PHILANTHROPIC ASSISTANCE	300
COCHECO VALLEY HUMANE SOCIETY			FOR PHILANTHROPIC ASSISTANCE	350
OUR DAILY BREAD			FOR PHILANTHROPIC ASSISTANCE	350
DOVER ADOLI LEARNING CENIER			FOR PHILANTHROPIC ASSISTANCE	400
CASA			FOR PHILANTHROPIC ASSISTANCE	400
BARRINGTON COMMUNITY FOOD PANTRY				000
DOVER PD CHRISTMAS BASKET) (O) (O) (O) (O) (O) (O) (O) (O) (O) (O
HAVEN - PORTSMOUTH			FOR PHILANTHROPIC ASSISTANCE	400
MAYHEW PROJECT			FOR PHILANTHROPIC ASSISTANCE	200
			FOR PHILANTHROPIC ASSISTANCE	200
SOCIATERSI EDOCALION - SEED			FOR PHILANTHROPIC ASSISTANCE	500
BRAIN INJURY ASSOC OF NH			FOR PHILANTHROPIC ASSISTANCE	009
SPECIAL OLYMPICS SEACOAST			FOR PHILANTHROPIC ASSISTANCE	700
DOVER FRIENDLY SOUP KITCHEN			FOR PHILANTHROPIC ASSISTANCE	750
HAVEN – ROCHESTER			FOR PHILANTHROPIC ASSISTANCE	750

AHAM BURTMAN CHARITY TRUST 5/13/2016 2:09 PM	Federal Statements
BURNSABRAH ABRAHAM BURTMAN CHARIT	02-6004364

FYE: 12/31/2015 02-6004364

Statement 11 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Name		Address		
Address	Relationship	Status	Purpose	Amount
CATHOLIC STUDENT CENTER			O TO CHIMING THIS	
DOVER RIVERWALK TRUST			FOR PHILANTHROPIC ASSISTANCE	008
			FOR PHILANTHROPIC ASSISTANCE	800
DOVER CHILDREN'S HOME			FOR PHILANTHROPIC ASSISTANCE	800
SEEDS OF FAITH			FOR PHILANTHEOPIC ASSISTANCE	CCa
ZEBRA CROSSINGS			FILLERINGETO	
MY FRIEND'S DIACE			FOR PHILANTHROPIC ASSISTANCE	008
			FOR PHILANTHROPIC ASSISTANCE	006
FAMILLES FIRST			FOR PHILANTHROPIC ASSISTANCE	1,000
B'NAI B'RITH ANIT DEFAMATION LEAGUE	SUE		FOR DHIIANTHEORY CASTSTANCE	
GREATER SEACOAST UJA CAMPAIGN				
науки			FOR PHILANTHROPIC ASSISTANCE	200
			FOR PHILANTHROPIC ASSISTANCE	200
COMMUNITY CHILD CARE CENTER			FOR PHILANTHROPIC ASSISTANCE	500
ROCKINGHAM COUNTY COMMUNITY ACTION	NC) (
SEACOAST INTERFAITH HOSPITALITY NET	ZET		FOR PHILANTHROPIC ASSISTANCE	008
			FOR PHILANTHROPIC ASSISTANCE	200
SEEDS OF FAITH			FOR PHILANTHROPIC ASSISTANCE	500
SOUTHEASTERN NH SERVICES			FOR PHILANTHROPIC ASSISTANCE	750
DANIEL WEBSTER COUNCIL) () () (
SALVATION ARMY SOUP KITCHEN			FOR PHILANIHROFIC ASSISTANCE	1,000
			FOR PHILANTHROPIC ASSISTANCE	1,000

₩.
2
Ω.
9
0
ä
9
Ξ
\mathbf{c}
2
$\tilde{\omega}$
$\overline{}$
2

BURNSABRAH ABRAHAM BURTMAN CHARITY TRUST Federal Statements

FYE: 12/31/2015

Statement 11 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Name	∢	Address	1	
Address	Relationship	Status	Purpose	Amount
TEMPLE ISRAEL - DOVER			FOR PHILANTHROBIC ASSISTANCE	000
SOUTHEAST LAND TRUST				
DOVER MOUNTED PATROL			FOR PHILANTHROPIC ASSISTANCE	1,150
Vardati intoomam panining and vonen			FOR PHILANTHROPIC ASSISTANCE	1,500
NANCI MAE SNAINES MEMORIAL LIE	DNANI		FOR PHILANTHROPIC ASSISTANCE	1,500
UNH MOCK TRIAL			FOR PHILANTHROPIC ASSISTANCE	1,600
UPREACH THERAPEUTIC KIDING CENTER,	NIEK,		FOR PHILANTHROPIC ASSISTANCE	2,000
ONH - JILLIAN HENKI	, , ,		PAYMENT OF COLLEGE TUITION	1,000
CORNELL UNIVERSITY - NICOLE TOROSIA	JROSIA		PAYMENT OF COLLEGE THITTON	1.000
BATES COLLEGE - MADISON LECLAIR	IR			
EMMANUEL COLLEGE - JESSICA LECLAIR	CLAIR		OF COLLEGE	0000
NONNEC YATERW - RESTEN ONNER	7		PAYMENT OF COLLEGE TUITION	1,000
devaka Mydiki - godinoo otoda			PAYMENT OF COLLEGE TUITION	1,000
			PAYMENT OF COLLEGE TUITION	1,000
EW ENGLAND - OES	LANE		PAYMENT OF COLLEGE TUITION	1,000
3	AALU F		PAYMENT OF COLLEGE TUITION	1,000
- OULIAN PELLETIER	{ 		PAYMENT OF COLLEGE TUITION	1,000
SI JOSEPH'S COLLEGE - IILER WELLS DENSEINER - DANIEI SOHE	ELLS SOIII		PAYMENT OF COLLEGE TUITION	1,000
NEWSCHOEN FOLLTECHNIC - DANTER	- - - - -		PAYMENT OF COLLEGE TUITION	1,000

7

	1.00.1 - 00.1	
(T (C (T) L	こっとうこう	

BURNSABRAH ABRAHAM BURTMAN CHARITY TRUST

Federal Statements

FYE: 12/31/2015

Statement 11 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Name	Address		
Address	Relationship Sta	Status Purpose	Amount
EMMANUEL COLLEGE - MADELEINE BODUCH		DAVMENT OF COLLECT	
NORTHEASTERN UNIV - IAN ANDERSON			0000
INH - ACHTEV MADETHEALI		PAYMENT OF COLLEGE TUITION	1,000
, E		PAYMENT OF COLLEGE TUITION	1,000
Σ,		PAYMENT OF COLLEGE TUITION	1,000
UNH - ASHLEY LEBLANC		PAYMENT OF COLLEGE TUITION	1,000
1		PAYMENT OF COLLEGE TUITION	1,000
MADISON MCKENZIE		PAYMENT OF COLLEGE TUITION	1,000
NOVA SOUTHEASTERN UNIV - AMY MOHAME		PAYMENT OF COLLEGE TUITION	1,000
UNH - LOGAN PIERCE		- CC	- 0
FAIRFIELD UNIV - MEGHAN MORSE		OF COLLEGE	0000
MAI.VMCHTH STATE HINTY - VIESSIE MAH		PAYMENT OF COLLEGE TUITION	1,000
TIOON MINITERED		PAYMENT OF COLLEGE TUITION	1,000
SIMIE ONIV		PAYMENT OF COLLEGE TUITION	1,000
FLIMOUTH STATE ONLY - TAILOR BURNET		PAYMENT OF COLLEGE TUITION	1,000
ONH - DANIEL MAKIINEAU		PAYMENT OF COLLEGE TUITION	1,000
BURLINGTON COLLEGE - DAYNE SAWTELLE		PAYMENT OF COLLEGE TUITION	1,000
WH UNIV- ALEX OAKES		PAYMENT OF COLLEGE TUITION	1,000
GRANIIE SIAIE COLLEGE - OESSE CARES		PAYMENT OF COLLEGE TUITION	1,000

5/13/2016 2:09 PM		Amount	1,000 1,000 80,000	1
	Statement 11 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)	Purpose	PAYMENT OF COLLEGE TUITION PAYMENT OF COLLEGE TUITION PAYMENT OF COLLEGE TUITION	
^{ऽT} ederal State	XV, Line 3a - G <u>Year (contin</u>	Status		
IMAN CHARITY TRUS	- Form 990-PF, Part	Relationship	YMRAYA BURNETT COLLEGE - EBON - HANNAH HOWAR	
BURNSABRAH ABRAHAM BURTMAN CHARITY TRUST 02-6004364 FYE: 12/31/2015	Statement 11	Address	BAY STATE COLLEGE - TYMRAYA BURNETT MANCHESTER COMMUNITY COLLEGE - EBON MAINE COLLEGE OF ART - HANNAH HOWAR TOTAL	