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Form

990-PF

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

2015

Open to Public Inspection

For calendar year 2015, or tax year beginning 01-01-2015, and ending 12-31-2015

Name of foundation THE DOOLITTLE HOME INC		A Employer identification number 04-2103763	
Number and street (or P O box number if mail is not delivered to street address) 16 BIRD STREET		B Telephone number (see instructions) (508) 543-2694	
City or town, state or province, country, and ZIP or foreign postal code FOXBOROUGH, MA 020352360		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> E If private foundation status was terminated under section 507(b)(1)(A), 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		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 2,614,030		J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))			Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1	Contributions, gifts, grants, etc , received (attach schedule)	63,544			
	2	Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3	Interest on savings and temporary cash investments	248	248	248	
	4	Dividends and interest from securities	61,577	61,577	61,577	
	5a	Gross rents				
	b	Net rental income or (loss) _____				
	6a	Net gain or (loss) from sale of assets not on line 10	75,955			
	b	Gross sales price for all assets on line 6a 807,923				
	7	Capital gain net income (from Part IV , line 2)		75,955		
	8	Net short-term capital gain			0	
	9	Income modifications				
	10a	Gross sales less returns and allowances				
Operating and Administrative Expenses	b	Less Cost of goods sold				
	c	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)	1,866,169	0	1,866,169	
	12	Total. Add lines 1 through 11	2,067,493	137,780	1,927,994	
	13	Compensation of officers, directors, trustees, etc	0	0	0	0
	14	Other employee salaries and wages	960,287	0	666,117	294,170
	15	Pension plans, employee benefits	81,048	0	56,220	24,828
	16a	Legal fees (attach schedule).	540	0	375	165
	b	Accounting fees (attach schedule).	34,409	0	23,868	10,541
	c	Other professional fees (attach schedule)	35,257	0	24,457	10,800
	17	Interest	18,165	0	12,600	5,565
	18	Taxes (attach schedule) (see instructions)	87,334	0	60,580	26,754
	19	Depreciation (attach schedule) and depletion	96,478	0	96,478	
	20	Occupancy	166,875	0	115,755	51,120
	21	Travel, conferences, and meetings.				
	22	Printing and publications				
	23	Other expenses (attach schedule).	354,531	0	245,925	108,606
	24	Total operating and administrative expenses. Add lines 13 through 23	1,834,924	0	1,302,375	532,549
	25	Contributions, gifts, grants paid	0			0
	26	Total expenses and disbursements. Add lines 24 and 25	1,834,924	0	1,302,375	532,549
	27	Subtract line 26 from line 12				
	a	Excess of revenue over expenses and disbursements	232,569			
	b	Net investment income (if negative, enter -0-)		137,780		
	c	Adjusted net income (if negative, enter -0-)			625,619	

Part II		Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
				(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing		309,462	117,560	117,560
	2	Savings and temporary cash investments		3,124	10,041	10,041
	3	Accounts receivable ▶ <u>16,666</u>				
		Less allowance for doubtful accounts ▶ _____		110,665	16,666	16,666
	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 instructions).				
	7	Other notes and loans receivable (attach schedule) ▶ _____				
		Less allowance for doubtful accounts ▶ _____				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges		27,385	13,421	13,421
	10a	Investments—U S and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)		69,558	24,528	24,528
	c	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment basis ▶ _____				
	Less accumulated depreciation (attach schedule) ▶ _____					
12	Investments—mortgage loans.					
13	Investments—other (attach schedule)		2,291,797	1,484,353	1,484,353	
14	Land, buildings, and equipment basis ▶ <u>2,197,148</u>					
	Less accumulated depreciation (attach schedule) ▶ <u>1,249,687</u>		992,758	947,461	947,461	
15	Other assets (describe ▶ _____)		64,575	0	0	
16	Total assets(to be completed by all filers—see the instructions Also, see page 1, item I)		3,869,324	2,614,030	2,614,030	
Liabilities	17	Accounts payable and accrued expenses		38,613	27,311	
	18	Grants payable				
	19	Deferred revenue		2,521,686	955,149	
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable (attach schedule).		139,144	418,962	
	22	Other liabilities (describe ▶ _____)		687,614	834,737	
	23	Total liabilities(add lines 17 through 22)		3,387,057	2,236,159	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.					
	24	Unrestricted		441,395	359,364	
	25	Temporarily restricted		40,872	18,507	
	26	Permanently restricted				
	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(see instructions)		482,267	377,871	
	31	Total liabilities and net assets/fund balances(see instructions)		3,869,324	2,614,030	

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		482,267	
2	Enter amount from Part I, line 27a	2		232,569	
3	Other increases not included in line 2 (itemize) ▶ _____	3		0	
4	Add lines 1, 2, and 3	4		714,836	
5	Decreases not included in line 2 (itemize) ▶ _____	5		336,965	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6		377,871	

Part IV

Capital Gains and Losses for Tax on Investment Income

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)		How acquired P—Purchase (b) D—Donation	Date acquired (c) (mo , day, yr)	Date sold (d) (mo , day, yr)
1 a	HSBC FINANCE CORP			
b	EDWARD JONES XXX2015			
c	EDWARD JONES XXX2015			
d	LOSS ON DISPOSAL OF FIXED ASSETS	P		
e	CAPITAL GAINS DIVIDENDS	P		

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
a 10,000		10,000	0
b 123,442		127,414	-3,972
c 632,084		546,179	85,905
d		48,375	-48,375
e 42,397			42,397

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) or (l) Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
a			0
b			-3,972
c			85,905
d			-48,375
e			42,397

2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	75,955
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 }		3	-3,972

Part V

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

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)
If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see 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))
2014	487,795	2,549,067	0 191362
2013	403,420	3,412,070	0 118233
2012	374,623	2,525,009	0 148365
2011	365,172	2,561,055	0 142587
2010	228,595	2,958,749	0 077261

2	Total of line 1, column (d).	2	0 677808
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 135562
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.	4	2,120,814
5	Multiply line 4 by line 3.	5	287,502
6	Enter 1% of net investment income (1% of Part I, line 27b).	6	1,378
7	Add lines 5 and 6.	7	288,880
8	Enter qualifying distributions from Part XII, line 4.	8	532,549

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

Part VIExcise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a

Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1
Date of ruling or determination letter _____
(attach copy of letter if necessary—see instructions)

b

Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☒ and enter 1% of Part I, line 27b

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

0

3

Add lines 1 and 2.

3

1,378

4

Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)

4

0

5

Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-

5

1,378

6

Credits/Payments

a

2015 estimated tax payments and 2014 overpayment credited to 2015

6a

b

Exempt foreign organizations—tax withheld at source

6b

c

Tax paid with application for extension of time to file (Form 8868).

6c

2,000

d

Backup withholding erroneously withheld

6d

7

Total credits and payments. Add lines 6a through 6d.

7

2,000

8

Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached.

8

33

9

Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed

9

10

Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.

10

589

11

Enter the amount of line 10 to be Credited to 2015 estimated tax 589 Refunded

11

0

Part VII-AStatements Regarding Activities

1a

During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?

1a

No

b

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.

1b

No

c

Did the foundation file Form 1120-POL for this year?

1c

No

d

Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:
(1) On the foundation \$ 0 (2) On foundation managers \$ 0

e

Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ 0

2

Has the foundation engaged in any activities that have not previously been reported to the IRS?
If "Yes," attach a detailed description of the activities.

2

No

3

Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes

3

No

4a

Did the foundation have unrelated business gross income of \$1,000 or more during the year?

4a

No

b

If "Yes," has it filed a tax return on Form 990-T for this year?

4b

5

Was there a liquidation, termination, dissolution, or substantial contraction during the year?
If "Yes," attach the statement required by General Instruction T.

5

No

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?

6

No

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.

7

Yes

8a

Enter the states to which the foundation reports or with which it is registered (see instructions):
MA

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

Yes

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

Yes

10

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses.

10

No

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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		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address WWW DOOLITTLEHOME ORG	13	Yes	
14	The books are in care of LINDA HUNTER Telephone no (508) 543-2694 Located at 16 BIRD STREET FOXBOROUGH MA ZIP+4 02035			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year 15			
16	At any time during calendar year 2015, 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 instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country 	16	Yes	No

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 instructions)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/>	1b		
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 2015? <input type="checkbox"/>	1c		No
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 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years 20____, 20____, 20____, 20____			
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). <input type="checkbox"/>	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 20____, 20____, 20____, 20____			
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 2015 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? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015.</i>) <input type="checkbox"/>	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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 2015?	4b		No

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 4945(d)(4)(A)? (see instructions).

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No

b

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

☐ Yes ☒ No

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

c

If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

☐ Yes ☒ No

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

6a

Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

b

Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

☐ Yes ☒ No

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

7a

At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

b

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

5b

6b

7b

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

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

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$ 50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred compensation (d)	Expense account, (e) other allowances
LINDA HUNTER 16 BIRD STREET FOXBOROUGH, MA 02035	EXECUTIVE DIRECTOR 40 00	85,100	6,904	0
CHRISTINE KENT 16 BIRD STREET FOXBOROUGH, MA 02035	RN DIRECTOR 40 00	74,980	6,904	0
PHILIP COBB 16 BIRD STREET FOXBOROUGH, MA 02035	DIRECTOR OF BUILDING 40 00	52,100	3,995	0
LORI DITOMASO 16 BIRD STREET FOXBOROUGH, MA 02035	FOOD SERVICE SUPERVI 40 00	51,060	3,995	0
PAULINE A DEWEY 16 BIRD STREET FOXBOROUGH, MA 02035	NURSING STAFF 36 00	45,109	3,995	0
Total number of other employees paid over \$ 50,000.				0

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Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services. <div></div>		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 ORGANIZATION PROVIDES HOUSING, HEALTH CARE AND OTHER RELATED SERVICES FOR THE ELDERLY THROUGH THE OPERATION OF A LIFE CARE RESIDENCE	527,004
2	
3	
4	

Part IX-B

Summary of Program-Related Investments (see instructions)

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

Part X

Minimum Investment Return

(All domestic foundations must complete this part. Foreign foundations,see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities.	1a	1,933,018
b	Average of monthly cash balances.	1b	220,093
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	2,153,111
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	2,153,111
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	32,297
5	Net value of noncharitable-use assets.Subtract line 4 from line 3 Enter here and on Part V, line 4	5	2,120,814
6	Minimum investment return.Enter 5% of line 5.	6	106,041

Part XI

Distributable Amount

(see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☒ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	
2a	Tax on investment income for 2015 from Part VI, line 5.	2a	
b	Income tax for 2015 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	

Part XII

Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	532,549
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions.Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	532,549
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions).	5	1,378
6	Adjusted qualifying distributions.Subtract line 5 from line 4.	6	531,171
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			

Part XIII

Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only.				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2015				
a From 2010.				
b From 2011.				
c From 2012.				
d From 2013.				
e From 2014.				
f Total of lines 3a through e.				
4 Qualifying distributions for 2015 from Part XII, line 4 ▶ \$ _____				
a Applied to 2014, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2015 distributable amount.				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d Subtract line 6c from line 6b Taxable amount—see instructions				
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).				
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions). . .				
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2011.				
b Excess from 2012.				
c Excess from 2013.				
d Excess from 2014.				
e Excess from 2015.				

Part XIV

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

1a

If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling.

b

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

☐ 4942(j)(3) or ☒ 4942(j)(5)

2a

Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

85% of line 2a

c

Qualifying distributions from Part XII, line 4 for each year listed

d

Amounts included in line 2c not used directly for active conduct of exempt activities

e

Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c

3

Complete 3a, b, or c for the alternative test relied upon

a

"Assets" alternative test—enter

(1)

Value of all assets

(2)

Value of assets qualifying under section 4942(j)(3)(B)(i)

b

"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.

c

"Support" alternative test—enter

(1)

Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)

(2)

Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).

(3)

Largest amount of support from an exempt organization

(4)

Gross investment income

Tax year	Prior 3 years			(e) Total
(a) 2015	(b) 2014	(c) 2013	(d) 2012	
0				0
532,549	490,245	405,033	375,736	1,803,563
0	0	0	0	0
532,549	490,245	405,033	375,736	1,803,563
70,694	84,969	113,736	84,167	353,566

Part XV

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

1

Information Regarding Foundation Managers:

a

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

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

2

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

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

a

The name, address, and telephone number or email address of the person to whom applications should be addressed

b

The form in which applications should be submitted and information and materials they should include

c

Any submission deadlines

d

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

Form 990-PF (2015)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Form **990-PF** (2015)

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1	Program service revenue					
a	RESIDENT SERVICE REVENUE					1,324,300
b	LIFE CARE ADMISSIONS					541,869
c						
d						
e						
f						
g	Fees and contracts from government agencies					
2	Membership dues and assessments.					
3	Interest on savings and temporary cash investments			14	248	
4	Dividends and interest from securities.			14	61,577	
5	Net rental income or (loss) from real estate					
a	Debt-financed property.					
b	Not debt-financed property.					
6	Net rental income or (loss) from personal property					
7	Other investment income.					
8	Gain or (loss) from sales of assets other than inventory			14	75,955	
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue a _____					
	b _____					
	c _____					
	d _____					
	e _____					
12	Subtotal Add columns (b), (d), and (e).		0		137,780	1,866,169
13	Total. Add line 12, columns (b), (d), and (e).			13		2,003,949

(See worksheet in line 13 instructions to verify calculations)

[illegible]

d If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

	Yes	No
1a(1)		No
1a(2)		No
1b(1)		No
1b(2)		No
1b(3)		No
1b(4)		No
1b(5)		No
1b(6)		No
1c		No

[illegible]

b If "Yes," complete the following schedule

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

Title

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

Paid Preparer Use Only	Print/Type preparer's name JOSEPH M CAPLICE	Preparer's Signature	Date	Check if self-employed <input checked="" type="checkbox"/>	PTIN P00810006
	Firm's name <input checked="" type="checkbox"/> STOWE & DEGON LLC			Firm's EIN <input checked="" type="checkbox"/>	04-3379904
	Firm's address <input checked="" type="checkbox"/> 95A TURNPIKE ROAD WESTBOROUGH, MA 01581			Phone no <input checked="" type="checkbox"/>	(508) 983-6700

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
JOANNE PRATT	PRESIDENT 2 00	0	0	0
16 BIRD STREET FOXBOROUGH,MA 02035				
MARIE CRIMMINS	VICE PRESIDENT 2 00	0	0	0
16 BIRD STREET FOXBOROUGH,MA 02035				
JOSEPH PIGNATO CPA	TREASURE 2 00	0	0	0
16 BIRD STREET FOXBOROUGH,MA 02035				
EDWARD MCINTYRE ESQUIRE	CLERK 2 00	0	0	0
16 BIRD STREET FOXBOROUGH,MA 02035				
LINDA HUNTER	EXECUTIVE DIRECTOR 2 00	0	0	0
16 BIRD STREET FOXBOROUGH,MA 02035				
IQUBAL S DHALIWAL MD	EX OFFICIO 2 00	0	0	0
16 BIRD STREET FOXBOROUGH,MA 02035				
ALBERT DANIELS	TRUSTEE 1 00	0	0	0
16 BIRD STREET FOXBOROUGH,MA 02035				
PAUL MCLAUGHLIN CPA	TRUSTEE 1 00	0	0	0
16 BIRD STREET FOXBOROUGH,MA 02035				
NINA L DEWOLF	TRUSTEE 1 00	0	0	0
16 BIRD STREET FOXBOROUGH,MA 02035				
JAMES MILLER	TRUSTEE 1 00	0	0	0
16 BIRD STREET FOXBOROUGH,MA 02035				
ROBERT EDGAR	TRUSTEE 1 00	0	0	0
16 BIRD STREET FOXBOROUGH,MA 02035				
MARY MOTTA	TRUSTEE 1 00	0	0	0
16 BIRD STREET FOXBOROUGH,MA 02035				
BETH FERENCIK	TRUSTEE 1 00	0	0	0
16 BIRD STREET FOXBOROUGH,MA 02035				
CATHERINE HICKEY	TRUSTEE 1 00	0	0	0
16 BIRD STREET FOXBOROUGH,MA 02035				
KATHRYN CRANE SPIER	TRUSTEE 1 00	0	0	0
16 BIRD STREET FOXBOROUGH,MA 02035				
FRAN KLEINDIENST	TRUSTEE 1 00	0	0	0
16 BIRD STREET FOXBOROUGH,MA 02035				
FLORENCE SPILLANE ESQUIRE	TRUSTEE 1 00	0	0	0
16 BIRD STREET FOXBOROUGH,MA 02035				
JOSEPH P MCDONOUGH	TRUSTEE 1 00	0	0	0
16 BIRD STREET FOXBOROUGH,MA 02035				
DEANNE WILLIS	TRUSTEE 1 00	0	0	0
16 BIRD STREET FOXBOROUGH,MA 02035				

TY 2015 Accounting Fees Schedule

Name: THE DOOLITTLE HOME INC

EIN: 04-2103763

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	34,409	0	23,868	10,541

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2015 Depreciation Schedule

Name: THE DOOLITTLE HOME INC
EIN: 04-2103763

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
LAND	2015-06-15	6,822		L	0 %	0	0	0	
OUTSIDE DRAINAGE	1999-01-01	330	264	SL	20 0000000000000	17	0	17	
PARKING LOT AND WALL, ETC	1999-01-01	40,813	32,650	SL	20 0000000000000	2,041	0	2,041	
FENCING	2002-01-01	13,600	13,600	SL	12 0000000000000	0	0	0	
RAILING TO KITCHEN STEPS	2003-01-01	2,320	1,392	SL	20 0000000000000	116	0	116	
5-6FT HEMLOCK, ETC	2004-01-01	1,905	1,048	SL	20 0000000000000	95	0	95	
3RD FLOOR EXPANSION	1994-01-01	38,954	38,954	SL	20 0000000000000	0	0	0	
SUNROOM	1994-01-01	4,746	4,746	SL	20 0000000000000	0	0	0	
2ND FLOOR REMODEL	1996-01-01	25,595	24,315	SL	20 0000000000000	1,280	0	1,280	
3RD FLOOR	1996-01-01	2,131	2,024	SL	20 0000000000000	107	0	107	
EXTERIOR ROOF	1997-01-01	13,600	12,240	SL	20 0000000000000	680	0	680	
2ND FLOOR BATH PLUMBING	1998-01-01	2,906	2,906	SL	15 0000000000000	0	0	0	
BATH #12 CARPENTRY	1998-01-01	4,665	4,665	SL	15 0000000000000	0	0	0	
ELECTRIC PANEL ON 2ND FLOOR	1998-01-01	744	744	SL	15 0000000000000	0	0	0	
SERVICE/KITCHEN REMODEL	1998-01-01	1,735	1,735	SL	15 0000000000000	0	0	0	
RICHARD DAVIS	1999-01-01	5,065	4,052	SL	20 0000000000000	253	0	253	
STAPLES COMMUNICATIONS	1999-01-01	1,596	1,596	SL	15 0000000000000	0	0	0	
DELTA ELEVATOR SERVICE	2000-01-01	11,300	8,475	SL	20 0000000000000	565	0	565	
CELLAR DOOR	2000-01-01	1,980	1,485	SL	20 0000000000000	99	0	99	
3RD FLOOR RENOVATIONS	2001-01-01	7,985	7,453	SL	15 0000000000000	532	0	532	

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
SPRINKLER OVERHAUL	2001-01-01	12,000	11,200	SL	15 0000000000000	800	0	800	
ROOF RESTORATION	2001-01-01	10,077	7,054	SL	20 0000000000000	504	0	504	
2ND FLOOR BATHROOM	2002-01-01	38,500	25,025	SL	20 0000000000000	1,925	0	1,925	
2ND FLOOR SPRINKLER INSTALL	2002-01-01	2,153	1,866	SL	15 0000000000000	144	0	144	
COMPLETE ROOF RESTORATION	2002-01-01	8,243	5,358	SL	20 0000000000000	412	0	412	
STORAGE ROOM IN BASEMENT	2003-01-01	1,470	882	SL	20 0000000000000	74	0	74	
2NF FLOOR BATHROOM INCOMPLETE	2003-01-01	13,405	8,043	SL	20 0000000000000	670	0	670	
2ND FLOOR NEW BATHROOM	2004-01-01	18,500	10,175	SL	20 0000000000000	925	0	925	
RICHARD DAVIS, CONTRACTOR	1999-01-01	1,067,241	569,195	SL	30 0000000000000	35,575	0	35,575	
BAKER ST ENTRANCE	2004-01-01	6,800	3,740	SL	20 0000000000000	340	0	340	
REPLACE BOILER	2004-01-01	20,500	7,517	SL	30 0000000000000	683	0	683	
MASONRY WORK	2004-01-01	18,900	10,395	SL	20 0000000000000	945	0	945	
NEW PRINTS OF OLD BUILDING	2004-01-01	280	154	SL	20 0000000000000	14	0	14	
REDECORATE PARLOR	2004-01-01	1,730	1,730	SL	10 0000000000000	0	0	0	
REPAIR ROOM 200	2004-01-01	2,669	2,669	SL	10 0000000000000	0	0	0	
SLATE ROOF REPAIR	2004-01-01	1,250	688	SL	20 0000000000000	63	0	63	
STEEL DOOR - ELEVATOR TOWER	2004-01-01	1,785	982	SL	20 0000000000000	89	0	89	
HEATING/AIR CONDITION UNITS	2005-01-01	1,138	1,138	SL	10 0000000000000	0	0	0	
REMODEL 3RD FLOOR FOR OFFICES	2005-01-01	5,089	2,545	SL	20 0000000000000	254	0	254	
REMODEL 2ND FLOOR ROOMS	2005-01-01	947	474	SL	20 0000000000000	47	0	47	

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
2ND FLOOR DECK REBUILDING	2005-01-01	903	903	SL	10 0000000000000	0	0	0	
GUTTERS AND SNOW GUARDS	2005-01-01	7,800	3,900	SL	20 0000000000000	390	0	390	
FIRE ALARM SYSTEM	2005-01-01	1,316	1,316	SL	10 0000000000000	0	0	0	
WIRED 3RD FLOOR FOR OFFICE	2006-01-01	340	153	SL	20 0000000000000	17	0	17	
OVERHAUL HEATING SYSTEM	2007-01-01	7,192	2,877	SL	20 0000000000000	360	0	360	
FLOOR PLANS	2007-01-01	3,113	1,245	SL	20 0000000000000	156	0	156	
BATHROOM 211 REMODELING	2007-01-01	15,396	6,158	SL	20 0000000000000	770	0	770	
ROOFING REMODELING	2007-01-01	6,240	2,496	SL	20 0000000000000	312	0	312	
MASONRY POINTING - ELEVATOR	2007-01-01	19,000	7,600	SL	20 0000000000000	950	0	950	
STEAM BOILER REPLACEMENT	2008-01-01	6,729	2,355	SL	20 0000000000000	336	0	336	
CARBON MONOXIDE DETECTORS	2008-01-01	4,411	3,087	SL	10 0000000000000	441	0	441	
CARBON MONOXIDE CERTIFICATION	2008-01-01	1,406	984	SL	10 0000000000000	141	0	141	
RELAY MODULES FOR CO	2008-01-01	2,783	1,948	SL	10 0000000000000	278	0	278	
GAS VALVES INSTALLATION	2008-01-01	1,158	811	SL	10 0000000000000	116	0	116	
2ND FLOOR BATH PAINT & WALLPAPER	2008-01-01	517	362	SL	10 0000000000000	52	0	52	
REPLACE ROPES IN ELEVATOR SHAFT	2008-01-01	4,793	1,678	SL	20 0000000000000	240	0	240	
DESIGN 2ND FLOOR BATHROOM	2008-01-01	1,551	543	SL	20 0000000000000	78	0	78	
MAJOR REPAIRS TO SLATE ROOF	2009-01-01	28,680	17,208	SL	10 0000000000000	2,868	0	2,868	
MAJOR BOILER REPAIRS	2009-01-01	8,632	5,179	SL	10 0000000000000	863	0	863	
EXTERIOR MASONRY	2010-01-01	2,470	1,235	SL	10 0000000000000	247	0	247	

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
REMODEL FOOD SERVICE BATHROOM	2010-01-01	327	164	SL	10 0000000000000	33	0	33	
STAFF BATHROOM UPDATE	2010-01-01	1,356	339	SL	20 0000000000000	68	0	68	
MAJOR OVERHAUL OF BOILER	2010-01-01	2,173	1,087	SL	10 0000000000000	217	0	217	
CIFM ROOFING REPAIR	2012-01-01	4,750	1,425	SL	10 0000000000000	475	0	475	
BOILER REPLACEMENT	2014-01-01	20,000	1,000	SL	20 0000000000000	1,000	0	1,000	
NURSING UNITS REPAIRS	2014-01-01	985	99	SL	10 0000000000000	99	0	99	
NEW CARPETS	2014-01-01	11,622	1,162	SL	10 0000000000000	1,162	0	1,162	
NURSING UNITS REPAIRS - HTC	2014-01-01	23,790	1,190	SL	20 0000000000000	1,190	0	1,190	
NURSING UNITS REPAIRS - WEBBER	2014-01-01	5,082	254	SL	20 0000000000000	254	0	254	
ELEVATOR REPAIR	2014-01-01	6,380	319	SL	20 0000000000000	319	0	319	
ROOF REPAIR	2014-01-01	10,184	509	SL	20 0000000000000	509	0	509	
BLACK HEATING & COOLING	2014-01-01	17,190	1,670	SL	20 0000000000000	860	0	860	
ROBERT A SCOTT, ARCHITECTS	1999-01-01	28,849	15,386	SL	30 0000000000000	962	0	962	
SPRINKLER	1999-01-01	49,210	26,245	SL	30 0000000000000	1,640	0	1,640	
PERMITS	1999-01-01	525	280	SL	30 0000000000000	18	0	18	
SURVEYING	1999-01-01	3,210	1,712	SL	30 0000000000000	107	0	107	
FIRE ALARM DESIGN	1999-01-01	6,719	3,584	SL	30 0000000000000	224	0	224	
INTERCOM SYSTEM	1999-01-01	7,678	6,142	SL	20 0000000000000	384	0	384	
PHONE SYSTEM	1999-01-01	967	967	SL	15 0000000000000	0	0	0	
FLOOR SEALING	1999-01-01	475	475	SL	15 0000000000000	0	0	0	

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
MISCELLANEOUS LIGHTING & FIXTURES	1999-01-01	1,039	831	SL	20 0000000000000	52	0	52	
FIRE EXTINGUISHERS	1999-01-01	294	235	SL	20 0000000000000	15	0	15	
S B E INC	1999-01-01	550	440	SL	20 0000000000000	28	0	28	
WIRING OFFICES	1999-01-01	1,061	848	SL	20 0000000000000	53	0	53	
SOUTH SHORE ENGINEERING	1999-01-01	705	376	SL	30 0000000000000	24	0	24	
KITCHEN EQUIPMENT	1995-01-01	23,113	23,113	SL	20 0000000000000	0	0	0	
DUMBWAITER	1995-01-01	19,307	19,307	SL	20 0000000000000	0	0	0	
OFFICE CREDENZAS	1999-01-01	1,023	1,023	SL	15 0000000000000	0	0	0	
BEDSIDE CABINETS/DRESSERS	1999-01-01	5,948	4,759	SL	20 0000000000000	297	0	297	
CURTAINS & BLINDS	1999-01-01	3,492	3,492	SL	10 0000000000000	0	0	0	
ARJO TUB	1999-01-01	9,524	7,620	SL	20 0000000000000	476	0	476	
DONATED PIANO	2002-01-01	7,500	3,900	SL	25 0000000000000	300	0	300	
FREEZER	2003-01-01	3,450	2,760	SL	15 0000000000000	230	0	230	
TELEPHONE SYSTEM	2003-01-01	10,776	8,621	SL	15 0000000000000	718	0	718	
3RD FLOOR WIRING FOR OFFICE	2004-01-01	755	554	SL	15 0000000000000	50	0	50	
COMPUTER EQUIPMENT - DEANNA	2004-01-01	910	910	SL	10 0000000000000	0	0	0	
RUGS & CARPETS	2004-01-01	4,024	4,024	SL	10 0000000000000	0	0	0	
NURSING COMPUTER & SOFTWARE	2004-01-01	1,455	1,455	SL	10 0000000000000	0	0	0	
FURNITURE & MATTRESS	2004-01-01	2,349	1,722	SL	15 0000000000000	157	0	157	
HOBART - ELECTRIC BOOSTER	2004-01-01	2,148	2,148	SL	10 0000000000000	0	0	0	

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
JANCO GARBAGE DISPOSAL	2004-01-01	1,445	1,445	SL	10 0000000000000	0	0	0	
LAPTOP COMPUTER	2004-01-01	2,400	2,400	SL	10 0000000000000	0	0	0	
REFURBISH 2ND FLOOR ROOMS	2005-01-01	2,154	2,154	SL	10 0000000000000	0	0	0	
AIR CONDITIONERS	2005-01-01	1,285	1,285	SL	10 0000000000000	0	0	0	
HALL & STAIR CARPET	2005-01-01	1,653	1,653	SL	10 0000000000000	0	0	0	
MATTRESSES	2005-01-01	395	395	SL	10 0000000000000	0	0	0	
OFFICE CARPET	2005-01-01	220	220	SL	10 0000000000000	0	0	0	
FURNITURE	2005-01-01	207	207	SL	10 0000000000000	0	0	0	
GERIATRIC MEDICAL EQUIPMENT	2005-01-01	1,465	1,465	SL	10 0000000000000	0	0	0	
OFFICE COMPUTER & SOFTWARE	2006-01-01	1,860	1,674	SL	10 0000000000000	186	0	186	
HOSPITAL BED	2006-01-01	550	495	SL	10 0000000000000	55	0	55	
SECURITY CAMERAS	2006-01-01	8,400	3,780	SL	20 0000000000000	420	0	420	
FIRE SUPPRESION SYSTEM	2006-01-01	2,775	1,249	SL	20 0000000000000	139	0	139	
OUTSIDE KEY BOX	2006-01-01	228	103	SL	20 0000000000000	11	0	11	
ALARM SYSTEM	2006-01-01	650	293	SL	20 0000000000000	33	0	33	
VARIOUS FURNITURE AND ACCESS	2006-01-01	2,792	2,513	SL	10 0000000000000	279	0	279	
HOBART FOOD MIXER	2006-01-01	4,030	1,814	SL	20 0000000000000	202	0	202	
REDO MYRTLE'S ROOM	2006-01-01	1,688	1,519	SL	10 0000000000000	169	0	169	
INTERCOM SYSTEM FOR DOORS	2006-01-01	920	414	SL	20 0000000000000	46	0	46	
NURSING LIFT	2007-01-01	1,349	1,079	SL	10 0000000000000	135	0	135	

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
KITCHEN SLICER	2007-01-01	1,620	1,296	SL	10 0000000000000	162	0	162	
OXIMETER	2007-01-01	609	487	SL	10 0000000000000	61	0	61	
KITCHEN STOVE & INSTALLATION	2007-01-01	8,036	6,429	SL	10 0000000000000	804	0	804	
WASHING MACHINE	2007-01-01	4,904	3,923	SL	10 0000000000000	490	0	490	
PLASMA TV	2007-01-01	2,100	1,680	SL	10 0000000000000	210	0	210	
FLOOR BUFFER	2007-01-01	890	712	SL	10 0000000000000	89	0	89	
COFFEE URN	2007-01-01	184	147	SL	10 0000000000000	18	0	18	
REPLACE MOTOR IN HOYT DRYER	2007-01-01	581	465	SL	10 0000000000000	58	0	58	
VACUUM CLEANER	2007-01-01	491	393	SL	10 0000000000000	49	0	49	
VARIOUS MATTRESSES AND OTHER	2008-01-01	2,121	1,485	SL	10 0000000000000	212	0	212	
VARIOUS TOILETS	2008-01-01	1,140	399	SL	20 0000000000000	57	0	57	
LAUNDRY BASKETS	2008-01-01	313	313	SL	5 0000000000000	0	0	0	
FREEZER & INSTALLATION	2008-01-01	4,131	1,446	SL	20 0000000000000	207	0	207	
HUEBSCH GAS DRYER	2008-01-01	4,125	1,444	SL	20 0000000000000	206	0	206	
CARPETING	2008-01-01	1,734	809	SL	15 0000000000000	116	0	116	
DIGITAL SCALE FOR LIFT	2008-01-01	625	438	SL	10 0000000000000	63	0	63	
ROUND TABLE FOR NURSE STATION	2008-01-01	920	322	SL	20 0000000000000	46	0	46	
HI-LOW TABLE	2009-01-01	4,852	2,911	SL	10 0000000000000	485	0	485	
HOT WATER MAKER	2009-01-01	5,635	3,381	SL	10 0000000000000	564	0	564	
PAYROLL TIME & DATA TERMINAL	2009-01-01	2,090	1,254	SL	10 0000000000000	209	0	209	

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
ICE MAKER	2009-01-01	1,889	1,133	SL	10 0000000000000	189	0	189	
BEDROOM SETS	2009-01-01	1,793	1,076	SL	10 0000000000000	179	0	179	
BATHROOM REMODELING	2009-01-01	349	210	SL	10 0000000000000	35	0	35	
VARIOUS BEDROOM FURNITURE	2009-01-01	1,330	798	SL	10 0000000000000	133	0	133	
TWO MATTRESSES	2009-01-01	756	454	SL	10 0000000000000	76	0	76	
HEADBOARD & BED FRAME	2009-01-01	477	286	SL	10 0000000000000	48	0	48	
VARIOUS BEDFRAMES, CHAIRS, CHESTS	2009-07-01	7,935	4,364	SL	10 0000000000000	794	0	794	
RAISED FLOWER BED	2009-07-01	733	403	SL	10 0000000000000	73	0	73	
MATTRESSES	2009-07-01	1,179	648	SL	10 0000000000000	118	0	118	
BATHROOM VANITY	2009-07-01	316	174	SL	10 0000000000000	32	0	32	
VARIOUS FURNITURE - REDISENT ROOMS	2010-07-01	597	269	SL	10 0000000000000	60	0	60	
REMOTE DISHWASHER BOOSTER	2010-07-01	2,495	1,123	SL	10 0000000000000	250	0	250	
GARBAGE DISPOSAL	2010-07-01	2,490	1,121	SL	10 0000000000000	249	0	249	
UPGRADE WEBSITE	2010-07-01	4,900	2,205	SL	10 0000000000000	490	0	490	
COMPUTER - DEANNA	2012-01-01	1,150	345	SL	10 0000000000000	115	0	115	
REUPHOLSTER DINING ROOM CHAIRS	2010-07-01	7,291	3,281	SL	10 0000000000000	729	0	729	
TWO DOOR FREEZER	2010-07-01	5,075	2,284	SL	10 0000000000000	508	0	508	
CARDI'S RECLINER	2012-01-01	194	58	SL	10 0000000000000	19	0	19	
DELTA BECKWITH ELEVATOR	2012-01-01	1,950	585	SL	10 0000000000000	195	0	195	
MATTRESSES	2012-01-01	1,294	388	SL	10 0000000000000	129	0	129	

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
WATER COOLER	2012-01-01	782	234	SL	10 0000000000000	78	0	78	
GAS DRYER	2012-01-01	4,419	1,326	SL	10 0000000000000	442	0	442	
COMPUTER FOR RESIDENTS	2012-01-01	1,148	344	SL	10 0000000000000	115	0	115	
USED LIFE CHAIR	2012-01-01	200	60	SL	10 0000000000000	20	0	20	
QUEEN MATTRESSES	2012-01-01	750	225	SL	10 0000000000000	75	0	75	
WHIRLPOOL	2012-01-01	12,713	3,814	SL	10 0000000000000	1,271	0	1,271	
MATTRESSES	2012-01-01	1,166	350	SL	10 0000000000000	117	0	117	
CHAIRS	2012-01-01	538	161	SL	10 0000000000000	54	0	54	
AWNINGS & UMBRELLAS	2012-01-01	332	99	SL	10 0000000000000	33	0	33	
SNOWBLOWER	2012-01-01	950	285	SL	10 0000000000000	95	0	95	
REFRIGERATOR	2012-01-01	4,500	1,350	SL	10 0000000000000	450	0	450	
SECURITY CAMERA - REPLACEMENT	2013-01-01	903	90	SL	20 0000000000000	45	0	45	
WING CHAIR	2013-01-01	299	60	SL	10 0000000000000	30	0	30	
MATTRESSES	2013-01-01	13,634	2,727	SL	10 0000000000000	1,363	0	1,363	
CARPET CLEANER/EXTRACTOR	2013-01-01	650	260	SL	5 0000000000000	130	0	130	
CHAIR	2013-01-01	400	80	SL	10 0000000000000	40	0	40	
HD TELEVISION	2013-01-01	650	260	SL	5 0000000000000	130	0	130	
DVD PLAYER	2013-01-01	110	44	SL	5 0000000000000	22	0	22	
WING CHAIR/BEDFRAME	2013-01-01	349	70	SL	10 0000000000000	35	0	35	
MICROWAVE	2013-01-01	170	68	SL	5 0000000000000	34	0	34	

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
MATTRESSES	2013-01-01	1,621	324	SL	10 0000000000000	162	0	162	
POWER RECLINING CHAIR	2013-01-01	605	242	SL	5 0000000000000	121	0	121	
DIGITAL CAMERA	2013-01-01	290	116	SL	5 0000000000000	58	0	58	
SHELVING	2014-07-01	893	45	SL	10 0000000000000	89	0	89	
MATTRESSES	2014-07-01	470	24	SL	10 0000000000000	47	0	47	
FURNITURE - SIMONS	2014-07-01	2,944	147	SL	10 0000000000000	294	0	294	
TOILET	2014-07-01	224	11	SL	10 0000000000000	22	0	22	
WANDER GUARD ALARMS	2014-07-01	9,789	489	SL	10 0000000000000	979	0	979	
GAME TABLE	2014-07-01	2,600	130	SL	10 0000000000000	260	0	260	
CHAIRS	2014-07-01	2,700	135	SL	10 0000000000000	270	0	270	
ELECTRIC MIXER	2014-07-01	136	14	SL	5 0000000000000	27	0	27	
BLENDER	2014-07-01	663	66	SL	5 0000000000000	133	0	133	
WHEELCHAIR SCALE	2014-07-01	3,415	171	SL	10 0000000000000	342	0	342	
COMPUTER	2014-07-01	2,376	238	SL	5 0000000000000	475	0	475	
EMERGENCY GENERATOR FOR ELEVATOR	2004-01-01	59,940	32,967	SL	20 0000000000000	2,997	0	2,997	
RELOCATE LOAD PANEL	2005-01-01	653	653	SL	10 0000000000000	0	0	0	
EXHAUST CHANGER	2005-01-01	767	767	SL	10 0000000000000	0	0	0	
2007 VAN	2008-07-31	36,428	23,374	SL	10 0000000000000	3,643	0	3,643	
SIGNAGE	2008-07-31	250	160	SL	10 0000000000000	25	0	25	
LAUNDRY ROOM VENT	2015-10-23	3,330		SL	7 0000000000000	79	0	79	

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
SPRINKER HEADS	2015-11-09	3,800		SL	27 5000000000000	32	0	32	
HEATING UNITS	2015-05-30	32,275		SL	27 5000000000000	941	0	941	
NURSING CHAIRS	2015-06-01	3,954		SL	7 0000000000000	329	0	329	
TANKLESS HOT WATER SYSTEM	2015-06-12	5,863		SL	7 0000000000000	489	0	489	
REUPHOLSTER 2 CHAIRS	2015-09-23	1,950		SL	5 0000000000000	98	0	98	

TY 2015 Investments Corporate Stock Schedule

Name: THE DOOLITTLE HOME INC

EIN: 04-2103763

Name of Stock	End of Year Book Value	End of Year Fair Market Value
EQUITY SECURITIES	24,528	24,528

TY 2015 Investments - Other Schedule

Name: THE DOOLITTLE HOME INC

EIN: 04-2103763

Category / Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
MUTUAL FUNDS	FMV	1,483,853	1,483,853
OTHER SECURITIES	FMV	500	500

**TY 2015 Land, Etc.
Schedule****Name:** THE DOOLITTLE HOME INC**EIN:** 04-2103763

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
LAND IMPROVEMENTS	58,968	49,979	8,989	8,989
BUILDING	523,837	302,778	221,059	221,059
NURSING UNIT	1,168,523	646,087	522,436	522,436
FURNITURE AND EQUIPMENT	340,961	187,449	153,512	153,512
GENERATOR	61,359	35,885	25,474	25,474
MOTOR VEHICLES	36,678	27,509	9,169	9,169
LAND	6,822	0	6,822	6,822

TY 2015 Legal Fees Schedule

Name: THE DOOLITTLE HOME INC

EIN: 04-2103763

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL	540	0	375	165

TY 2015 Mortgages and Notes Payable Schedule

Name: THE DOOLITTLE HOME INC

EIN: 04-2103763

Total Mortgage Amount:

Item No.	1
Lender's Name	CAPITAL GUARDIAN
Lender's Title	
Relationship to Insider	NONE
Original Amount of Loan	
Balance Due	281,418
Date of Note	
Maturity Date	
Repayment Terms	
Interest Rate	
Security Provided by Borrower	SECURITIES
Purpose of Loan	WORKING CAPITAL
Description of Lender Consideration	
Consideration FMV	

Item No.	2
Lender's Name	EDWARD JONES
Lender's Title	
Relationship to Insider	NONE
Original Amount of Loan	
Balance Due	137,544
Date of Note	
Maturity Date	
Repayment Terms	
Interest Rate	
Security Provided by Borrower	SECURITIES
Purpose of Loan	WORKING CAPITAL
Description of Lender Consideration	
Consideration FMV	

TY 2015 Other Assets Schedule

Name: THE DOOLITTLE HOME INC

EIN: 04-2103763

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
CONSTRUCTION IN PROGRESS	64,575	0	0

TY 2015 Other Decreases Schedule

Name: THE DOOLITTLE HOME INC

EIN: 04-2103763

Description	Amount
CHANGE IN NET UNREALIZED GAIN (LOSS) ON INVESTMENTS	336,965

TY 2015 Other Expenses Schedule

Name: THE DOOLITTLE HOME INC

EIN: 04-2103763

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LAUNDRY SUPPLIES AND EXPENSE	1,588	0	1,102	486
HOUSEKEEPING SUPPLIES AND EXPENSES	8,757	0	6,074	2,683
FOOD SUPPLIES AND EXPENSES	103,545	0	71,826	31,719
MEDICAL DIRECTOR AND NURSING SUBCONTRACTORS	41,694	0	28,922	12,772
MEDICAL EXPENSES	31,481	0	21,837	9,644
ACTIVITIES EXPENSE	3,648	0	2,530	1,118
RESIDENT SERVICES	17,944	0	12,447	5,497
FUNDRAISING EXPENSES	783	0	543	240
INSURANCE	21,586	0	14,973	6,613
BAD DEBTS	29,481	0	20,450	9,031
WORKERS COMPENSATION	32,917	0	22,833	10,084
ADVERTISING	15,387	0	10,673	4,714
OFFICE EXPENSE	16,878	0	11,708	5,170
OTHER EXPENSES	20,681	0	14,346	6,335
LICENSES AND DUES	2,282	0	1,583	699
PAYROLL SERVICE COSTS	5,879	0	4,078	1,801

TY 2015 Other Income Schedule

Name: THE DOOLITTLE HOME INC

EIN: 04-2103763

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
RESIDENT SERVICE REVENUE	1,324,300		1,324,300
LIFE CARE ADMISSIONS	541,869		541,869

TY 2015 Other Liabilities Schedule

Name: THE DOOLITTLE HOME INC

EIN: 04-2103763

Description	Beginning of Year - Book Value	End of Year - Book Value
ESTIMATED OBLIGATION TO PROVIDE FUTURE SERVICES	687,614	834,737

TY 2015 Other Professional Fees Schedule**Name:** THE DOOLITTLE HOME INC**EIN:** 04-2103763

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
DIETITIAN	7,627	0	5,291	2,336
CHAPLAIN	2,350	0	1,630	720
MARKETING CONSULTANT	25,280	0	17,536	7,744

TY 2015 Taxes Schedule**Name:** THE DOOLITTLE HOME INC**EIN:** 04-2103763

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL TAXES	86,819	0	60,223	26,596
ANNUAL REPORT FEE	500	0	347	153
SALES TAX	15	0	10	5

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. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <u>www.irs.gov/form990</u>.	OMB No 1545-0047 2015

Name of the organization THE DOOLITTLE HOME INC	Employer identification number 04-2103763
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Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)() (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 501(c)(3) taxable private foundation

Check 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, contributions totaling \$5,000 or more (in money or other property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions

Special Rules

- ☐
- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions 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 an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III
- ☐
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc , purposes, but no such contributions totaled 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 totaling \$5,000 or more during the year ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer “No” on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization THE DOOLITTLE HOME INC	Employer identification number 04-2103763
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Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	THE LEBARON FOUNDATION	\$ 5,000	Person <input checked="" type="checkbox"/>
	922 FULLER HILL ROAD		Payroll <input type="checkbox"/>
	WARREN, VT 05674		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Employer identification number
04-2103763

Part II **Noncash Property**
(see instructions) Use duplicate copies of Part II if additional space is needed

[illegible]

Name of organization THE DOOLITTLE HOME INC	Employer identification number 04-2103763
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Part III

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____

Use duplicate copies of Part III if additional space is needed

(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	--		
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	--		
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	--		
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	--		