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 separate instructions is at www.irs.gov/form990pf.**

OMB No 1545-0052

2015

Open to Public Inspection

For calendar year 2015 or tax year beginning , 2015, and ending , 20

Name of foundation THE CHARLOTTE HOME	**A** Employer identification number 04-6107990
Number and street (or P O box number if mail is not delivered to street address) PO BOX 111 — Room/suite	**B** Telephone number (see instructions) (978)688-7211
City or town, state or province country, and ZIP or foreign postal code North Andover, MA 01845	**C** If exemption application is pending, check here ▶ ☐
G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change	**D** 1. Foreign organizations, check here ▶ ☐ 2. Foreign organizations meeting the 85% test, check here and attach computation ▶ ☐
H Check type of organization ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation	**E** If private foundation status was terminated under section 507(b)(1)(A), check here ▶ ☐
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ $ 1,286,940 **J** Accounting method ☒ Cash ☐ Accrual ☐ Other (specify) (Part I, column (d) must be on cash basis)	**F** If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ ☐

		Part I **Analysis of Revenue and Expenses** (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	**(a)** Revenue and expenses per books	**(b)** Net investment income	**(c)** Adjusted net income	**(d)** Disbursements for charitable purposes (cash basis only)
Revenue	1	Contributions, gifts, grants, etc , received (attach schedule)				
	2	Check ▶ ☒ if the foundation is **not** required to attach Sch B				
	3	Interest on savings and temporary cash investments	5	5		
	4	Dividends and interest from securities	25,155	25,155		
	5a	Gross rents				
	b	Net rental income or (loss)				
	6a	Net gain or (loss) from sale of assets not on line 10	115,888			
	b	Gross sales price for all assets on line 6a 274,776				
	7	Capital gain net income (from Part IV, line 2)		115,888		
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less Cost of goods sold				
	c	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule) STM106	305	305		
	12	**Total.** Add lines 1 through 11	141,353	141,353		
Operating and Administrative Expenses	13	Compensation of officers, directors, trustees, etc				
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits				
	16a	Legal fees (attach schedule)				
	b	Accounting fees (attach schedule) STM108	1,750			
	c	Other professional fees (attach schedule) STM109	4,852	4,852		
	17	Interest				
	18	Taxes (attach schedule) (see instructions) STM110	763	763		
	19	Depreciation (attach schedule) and depletion				
	20	Occupancy				
	21	Travel, conferences, and meetings	18	18		
	22	Printing and publications				
	23	Other expenses (attach schedule) STM103	535			
	24	**Total operating and administrative expenses.** Add lines 13 through 23	7,918	5,633		0
	25	Contributions, gifts, grants paid	65,000			65,000
	26	**Total expenses and disbursements.** Add lines 24 and 25	72,918	5,633		65,000
	27	Subtract line 26 from line 12				
	a	**Excess of revenue over expenses and disbursements**	68,435			
	b	**Net investment income** (if negative, enter -0-)		135,720		
	c	**Adjusted net income** (if negative, enter -0-)			0	

NOV 1 6 2016

For Paperwork Reduction Act Notice, see instructions.

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Form **990-PF** (2015)

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		10,200	10,200
	2	Savings and temporary cash investments	41,645	39,834	39,834
	3	Accounts receivable ▶			
		Less allowance for doubtful accounts ▶			
	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			
	10a	Investments - U S and state government obligations (attach schedule)			
	b	Investments - corporate stock (attach schedule) STM137	1,073,637	1,130,685	1,236,906
	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)			
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ▶)			
	16	**Total assets** (to be completed by all filers - see the instructions Also, see page 1, item I)	1,115,282	1,180,719	1,286,940
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶ STM121)	2,998		
	23	**Total liabilities** (add lines 17 through 22)	2,998	0	
Net Assets or Fund Balances		**Foundations that follow SFAS 117, check here ▶ ☒ and complete lines 24 through 26 and lines 30 and 31.**			
	24	Unrestricted	1,112,284	1,180,719	
	25	Temporarily restricted			
	26	Permanently restricted			
		Foundations that do not follow SFAS 117, check here ▶ ☐ and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
	30	**Total net assets or fund balances** (see instructions)	1,112,284	1,180,719	
	31	**Total liabilities and net assets/fund balances** (see instructions)	1,115,282	1,180,719	

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	1,112,284
2	Enter amount from Part I, line 27a	2	68,435
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	1,180,719
5	Decreases not included in line 2 (itemize) ▶	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	1,180,719

Part IV Capital Gains and Losses for Tax on Investment Income

	(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a	See STM134			
b				
c				
d				
e				

	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a	274,776		158,888	115,888
b				
c				
d				
e				

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a				115,888
b				
c				
d				
e				

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 / If (loss), enter -0- in Part I, line 7 } **2** 115,888

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)
If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 . . . . } **3**

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2014	65,626	1,374,181	0.047756
2013	63,598	1,303,414	0.048793
2012	54,393	1,183,017	0.045978
2011	48,676	1,134,426	0.042908
2010	49,291	1,057,674	0.046603

2	**Total** of line 1, column (d)	2	0.232039
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	0.046408
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5	4	1,329,029
5	Multiply line 4 by line 3	5	61,678
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	1,357
7	Add lines 5 and 6	7	63,035
8	Enter qualifying distributions from Part XII, line 4	8	65,000

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

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

1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1 Date of ruling or determination letter: ____________ (attach copy of letter if necessary-see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☒ and enter 1% of Part I, line 27b			1	1,357
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	1,357
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	1,357
6	Credits/Payments				
a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	689		
b	Exempt foreign organizations - tax withheld at source	6b			
c	Tax paid with application for extension of time to file (Form 8868)	6c			
d	Backup withholding erroneously withheld	6d			
7	Total credits and payments Add lines 6a through 6d			7	689
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	668
10	**Overpayment.** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid** ▶			10	
11	Enter the amount of line 10 to be **Credited to 2016 estimated tax** ▶ Refunded ▶			11	

Part VII-A Statements Regarding Activities

			Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a		X
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1b		X
	If the answer is "Yes" to **1a** or **1b,** attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.			
c	Did the foundation file **Form 1120-POL** for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year **(1)** On the foundation ▶ $ ________ **(2)** On foundation managers ▶ $ ________			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ $ ________			
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		X
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of $1,000 or more during the year?	4a		X
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		X
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either ● By language in the governing instrument, or ● By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least $5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	
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	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		X

Part VII-A Statements Regarding Activities (continued)

			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	

Website address ▶ N/A

14 The books are in care of ▶ JOSHUA L MINER Telephone no ▶ 978-688-7211

Located at ▶ PO BOX 111, North Andover, MA ZIP+4 ▶ 01845

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of **Form 1041**-Check here ▶ ☐

and enter the amount of tax-exempt interest received or accrued during the year ▶ 15

			Yes	No
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?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of the foreign country ▶			

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

				Yes	No
1a	During the year did the foundation (either directly or indirectly)				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	☐ **Yes** ☒ **No**			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	☐ **Yes** ☒ **No**			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	☐ **Yes** ☒ **No**			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	☐ **Yes** ☒ **No**			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	☐ **Yes** ☒ **No**			
	(6) Agree to pay money or property to a government official? (**Exception.** Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	☐ **Yes** ☒ **No**			
b	If any answer is "Yes" to 1a(1)-(6), did **any** of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		1b		
	Organizations relying on a current notice regarding disaster assistance check here ▶ ☐				
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015?		1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))				
a	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015?	☐ **Yes** ☒ **No**			
	If "Yes," list the years ▶ ________, ________, ________, ________				
b	Are there any years listed in 2a for which the foundation is **not** applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to **all** years listed, answer "No" and attach statement - see instructions)		2b		X
c	If the provisions of section 4942(a)(2) are being applied to **any** of the years listed in 2a, list the years here ▶ ________, ________, ________, ________				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	☐ **Yes** ☒ **No**			
b	If "Yes," did it have excess business holdings in 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? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015)		3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?		4b		X

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)? 5b

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

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

If "Yes," attach the statement required by Regulations section 53 4945-5(d)

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

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

If "Yes" to 6b, file Form 8870

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

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

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

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

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
JOSHUA L MINER PO BOX 111, North Andover, MA 01845	PRESIDENT 1.00	0	0	0
MARY B MINER PO BOX 111, North Andover, MA 01845	TREASURER 1.00	0	0	0
LYNDA B ROGERS PO BOX 111, North Andover, MA 01845	CLERK 1.00	0	0	0
SANDRA D CANNELLA PO BOX 111, North Andover, MA 01845	TRUSTEE 1.00	0	0	0

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

(a) Name and address of each employee paid more than $50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over $50,000 ▶ 0

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 ▶		

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	
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 ▶	

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	1,296,047
b	Average of monthly cash balances	1b	53,221
c	Fair market value of all other assets (see instructions)	1c	0
d	**Total** (add lines 1a, b, and c)	1d	1,349,268
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	1,349,268
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	20,239
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,329,029
6	**Minimum investment return.** Enter 5% of line 5	6	66,451

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	66,451
2a	Tax on investment income for 2015 from Part VI, line 5	2a	1,357		
b	Income tax for 2015 (This does not include the tax from Part VI)	2b			
c	Add lines 2a and 2b			2c	1,357
3	Distributable amount before adjustments Subtract line 2c from line 1			3	65,094
4	Recoveries of amounts treated as qualifying distributions			4	
5	Add lines 3 and 4			5	65,094
6	Deduction from distributable amount (see instructions)			6	
7	**Distributable amount** as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1			7	65,094

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	65,000
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	**Qualifying distributions.** Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	65,000
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	1,357
6	**Adjusted qualifying distributions.** Subtract line 5 from line 4	6	63,643

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				65,094
2	Undistributed income, if any, as of the end of 2015				
a	Enter amount for 2014 only			4,758	
b	Total for prior years ______ , ______ , ______				
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 ► $ 65,000				
a	Applied to 2014, but not more than line 2a			4,758	
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				60,242
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 2015 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2016				4,852
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 foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			
	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon a "Assets" alternative test - enter. (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

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

1 Information Regarding Foundation Managers:

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

NONE

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

NONE

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

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

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

990APP

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

c Any submission deadlines

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

Part XV **Supplementary Information** (continued)

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
FOOD FOR THE WORLD P.O. BOX 2012 Methuen, MA 01844	UNRELATED	PC	OPERATING SUPPORT	500
GIRL SCOUTS OF EASTERN MASS 95 BERKELEY STREET Boston, MA 02116	UNRELATED	PC	FAB FACTOR PROGRAM LAWRENCE,	1,500
HOME HEALTH VNA 360 MERRIMACK STREET, BUILDING 9 Lawrence, MA 01843	UNRELATED	PC	BACKPACKS FOR REHAB STAFF	2,000
ECCF GREATER LAWRENCE SUMMER FUND 175 ANDOVER STREET, SUITE 101 Danvers, MA 01923	UNRELATED	PC	SUMMER PROGRAMS 2015	8,500
PRESENTATION OF MARY ACADEMY 209 LAWRENCE STREET Methuen, MA 01844	UNRELATED	PC	TUITION ASSISTANCE	5,000
ALTERNATIVE HOUSE P.O. BOX 2100 Lowell, MA 01852	UNRELATED	PC	AFTER SCHOOL, SATURDAY, AND SUMMER	1,500
BOYS AND GIRLS CLUB OF LAWRENCE 136 WATER STREET Lawrence, MA 01843	UNRELATED	PC	GIRLS READ PROGRAM	4,000
LAZARUS HOUSE P.O. BOX 408 Lawrence, MA 01842	UNRELATED	PC	CULINARY TRAINING PROGRAM	3,000
Total . . . . ▶ 3a				
b Approved for future payment				
Total . . ▶ 3b				

Part XV **Supplementary Information** (continued)

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
JERICHO ROAD LAWRENCE 3 GREAT POND ROAD North Andover, MA 01845	UNRELATED	PC	CULTURAL INCLUSION PROJECT	2,500
CAMBRIDGE COLLEGE 1000 MASS AVE Cambridge, MA 02138	UNRELATED	PC	SCHOLARSHIPS MENTAL HEALTH COUNSELING	3,000
AFTER SCHOOL PARTNERS 342A BOYLSTON STREET Newton Center, MA 02459	UNRELATED	PC	LAWRENCE, MA PROGRAMMING	3,000
BREAD & ROSES 58 NEWBURY STREET Lawrence, MA 01840	UNRELATED	PC	OPERATING SUPPORT	2,000
ESSEX ART CENTER 56 ISLAND STREET Lawrence, MA 01840	UNRELATED	PC	FEMALE TEACHERS	3,000
PREGNANCY CARE CENTER 496 MAIN STREET Haverhill, MA 01830	UNRELATED	PC	CONTINUUM OF CARE PROGRAM	1,500
LIFE SAVER MINISTRIES 83 MIDDLESEX STREET North Chelmsford, MA 01863	UNRELATED	PC	OPERATING SUPPORT FOR MY FATHER'S PLACE	7,500
LAWRENCE GENERAL HOSPITAL P.O. BOX 189 Lawrence, MA 01842	UNRELATED	PC	TOMOSYNTHESIS BREAST HEALTH SERVICES	2,000
Total . . . . ▶ 3a				
b Approved for future payment				
Total . . . . . . ▶ 3b				

Part XV Supplementary Information (continued)

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
BOYS & GIRLS CLUB OF GREATER LOWELL 657 MIDDLESEX STREET Lowell, MA 01851	UNRELATED	PC	GIRLS LEGO LEAGUE ROBOTICS PROGRAM	4,000
GIRLS, INC 220 WORTHEN STREET Lowell, MA 01852	UNRELATED	PC	ECONOMIC LITERACY PROGRAM FOR GIRLS & YOUNG WOMEN	4,000
MERRIMACK VALLEY YMCA LAWRENCE 101 AMESBURY STREET, 4TH FLOOR Lawrence, MA 01840	UNRELATED	PC	YOUTH IN GOVERNMENT	2,500
FAMILY SERVICE, INC 430 NORTH CANAL STREET Lawrence, MA 01843	UNRELATED	PC	PARENTING JOURNEY PROGRAM SUPPORT	4,000
Total			▶ 3a	65,000
b Approved for future payment				
Total			▶ 3b	

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	5	
4 Dividends and interest from securities			14	25,155	
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			14	305	
8 Gain or (loss) from sales of assets other than inventory			14	115,888	
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)				141,353	

13 **Total.** Add line 12, columns (b), (d), and (e) . 13 141,353

(See worksheet in line 13 instructions to verify calculations)

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

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)

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

			Yes	No
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a	Transfers from the reporting foundation to a noncharitable exempt organization of			
	(1) Cash	1a(1)		X
	(2) Other assets	1a(2)		X
b	Other transactions			
	(1) Sales of assets to a noncharitable exempt organization	1b(1)		X
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)		X
	(3) Rental of facilities, equipment, or other assets	1b(3)		X
	(4) Reimbursement arrangements	1b(4)		X
	(5) Loans or loan guarantees	1b(5)		X
	(6) Performance of services or membership or fundraising solicitations	1b(6)		X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		X

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

(a) Line no	**(b)** Amount involved	**(c)** Name of noncharitable exempt organization	**(d)** Description of transfers, transactions, and sharing arrangements

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

b If "Yes," complete the following schedule

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

Sign Here

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

JOSHUA L MINER	10/18/16	PRESIDENT
Signature of officer or trustee	Date	Title

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

Paid Preparer Use Only

Print/Type preparer's name Christopher A Lee	Preparer's signature Christopher A Lee	Date 09-06-2016	Check ☐ if self-employed	PTIN P00750159
Firm's name ▶ Merrimack Valley Accounting Inc			Firm's EIN ▶	
Firm's address ▶ 105 Beverly Street North Andover MA 01845			Phone no 978-609-1937	

Federal Supporting Statements

Name(s) as shown on return	2015 PG01 FEIN
THE CHARLOTTE HOME	04-6107990

Form 990PF - Part II - Line 22
Other Liabilities Schedule

Statement #121

Description	BOY Amount	EOY Amount
BANK OVERDRAFT	2,998	
Total	2,998	

PG01

Form 990PF - Part II - Line 10(b)
Investments: Corporate Stock Schedule

Statement #137

Category	BOY	Book Value	EOY FMV
BROWN BROTHERS HARRIMAN	1,073,637	1,130,685	1,236,906
Totals	1,073,637	1,130,685	1,236,906

Federal Supporting Statements

2015 PG01

Name(s) as shown on return: THE CHARLOTTE HOME

Your Social Security Number: 04-6107990

Form 990PF - Part I - Line 23 - Other Expenses Schedule

Statement #103~

Description	Revenue and expenses	Net investment	Adjusted net income	Charitable purpose
STATE FILING FEE	35	0	0	0
OTHER OPERATIONS EXPENSES	500	0	0	0
Totals	535	0	0	0

PG01

Form 990PF - Part I - Line 11 - Other Income Schedule

Statement #106~

Description	Revenue and expenses	Net investment	Adjusted net income
INVESTMENT DISTRIBUTIONS	305	305	0
Totals	305	305	0

Federal Supporting Statements

2015 PG01

Name(s) as shown on return
THE CHARLOTTE HOME

Your Social Security Number
04-6107990

Form 990PF - Part I - Line 16(b) - Accounting Fees Schedule

Statement #108~

Description	Revenue and expenses	Net investment	Adjusted net income	Charitable purpose
CARL B. BINDMAN CPA PC	1,750	0	0	0
Totals	1,750	0	0	0

PG01

Form 990PF - Part I - Line 16(c) - Other Professional Fees Schedule

Statement #109~

Description	Revenue and expenses	Net investment	Adjusted net income	Charitable purpose
BROWN BROTHERS HARRIMAN	4,852	4,852	0	0
Totals	4,852	4,852	0	0

Federal Supporting Statements

2015 PG01

Name(s) as shown on return

THE CHARLOTTE HOME

Your Social Security Number

04-6107990

Form 990PF - Part I - Line 18 - Taxes Schedule

Statement #110~

Description	Revenue and expenses	Net investment	Adjusted net income	Charitable purpose
FOREIGN TAXES	763	763	0	0
Totals	763	763	0	0

Federal Supporting Statements

2015 PG01

Name(s) as shown on return: THE CHARLOTTE HOME

Your Social Security Number: 04-6107990

Form 990-PF - Part IV - Capital Gains And Losses Information (Overflow)

Statement #134~

Description	P-Purchase D-Donation	Date Acquired	Date Sold	Sales Price	Depreciation	Cost or other basis	Gain or Loss	Gains Minus Excess or Losses
TARGET CORP, 35 SHS	P	08-01-2011	01-07-2015	2,678		1,783	895	895
TARGET CORP, 4 SHS	P	08-01-2011	01-13-2015	307		204	103	103
WAL-MART STORES INC, 9 SHS	P	09-18-2007	01-13-2015	815		400	415	415
TARGET CORP, 21 SHS	P	08-01-2011	01-15-2015	1,618		1,015	603	603
BERKSHIRE HATHAWAY INC, CL B	P	05-19-2006	01-20-2015	4,456		1,832	2,624	2,624
WASTE MANAGEMENT INC, 14 SHS	P	05-18-2007	01-21-2015	739		540	199	199
WASTE MANAGEMENT INC, 19 SHS	P	05-18-2007	01-22-2015	1,003		717	286	286
WASTE MANAGEMENT INC, 22 SHS	P	12-20-2007	01-23-2015	1,160		728	432	432
TARGET CORP, 20 SHS	P	08-05-2011	02-04-2015	1,518		963	555	555
TARGET CORP, 25 SHS	P	08-05-2011	02-18-2015	1,923		1,205	718	718
CALIFORNIA RESOURCES CORP, 76 SHS	P	12-01-2010	02-20-2015	550		330	220	220
TARGET CORP, 20 SHS	P	08-05-2011	02-23-2015	1,535		963	572	572
TARGET CORP, 20 SHS	P	08-05-2011	02-25-2015	1,539		964	575	575
TARGET CORP, 33 SHS	P	08-05-2011	03-04-2015	2,574		1,585	989	989
TARGET CORP, 52 SHS	P	08-09-2011	03-05-2015	4,060		2,473	1,587	1,587
WASTE MANAGEMENT INC, 25 SHS	P	12-20-2007	04-08-2015	1,367		827	540	540
WASTE MANAGEMENT INC, 5 SHS	P	12-20-2007	04-09-2015	274		165	109	109
GOOGLE INC CL C, .17 SHS	P	01-30-2012	05-13-2015	92		49	43	43
CHUBB CORP, 20 SHS	P	07-20-2007	07-01-2015	2,449		1,037	1,412	1,412
CHUBB CORP, 15 SHS	P	07-20-2007	07-02-2015	1,838		776	1,062	1,062
BAXTER INTL INC, 200 SHS	P	12-01-2010	07-14-2015	7,522		5,228	2,294	2,294
BERKSHIRE HATHAWAY INC CL B, 55 SHS	P	05-19-2006	09-15-2015	7,282		3,358	3,924	3,924
CHUBB CORP, 30 SHS	P	10-08-2008	09-15-2015	3,634		1,283	2,351	2,351
COMCAST CORP CL A, 355 SHS	P	12-01-2010	09-15-2015	20,291		9,168	11,123	11,123
DENTSPLY INTL INC, 80 SHS	P	07-29-2010	09-15-2015	4,356		2,310	2,046	2,046
EBAY INC, 100 SHS	P	06-30-2010	09-15-2015	2,598		948	1,650	1,650
GOOGLE INC CL C, 25 SHS	P	12-01-2010	09-15-2015	15,913		7,440	8,473	8,473
LIBERTY INTERACTIVE CORP, 255 SHS	P	12-01-2010	09-15-2015	7,071		3,310	3,761	3,761
MICROSOFT CORP, 330 SHS	P	12-01-2010	09-15-2015	14,566		8,729	5,837	5,837
NESTLE, 295 SHS	P	10-26-2004	09-15-2015	22,092		7,028	15,064	15,064
NOVARTIS, 130 SHS	P	03-19-2007	09-15-2015	12,523		7,354	5,169	5,169
PROGRESSIVE CORP, 620 SHS	P	12-01-2010	09-15-2015	18,956		11,164	7,792	7,792
HENRY SCHEIN INC, 45 SHS	P	11-21-2011	09-15-2015	6,100		2,765	3,335	3,335
US BANCORP, 630 SHS	P	12-01-2010	09-15-2015	26,450		14,074	12,376	12,376

Federal Supporting Statements

2015 PG02

Name(s) as shown on return

THE CHARLOTTE HOME

Your Social Security Number

04-6107990

Form 990-PF - Part IV - Capital Gains And Losses Information (Overflow)

Statement #134~

Description	P-Purchase D-Donation	Date Acquired	Date Sold	Sales Price	Depreciation	Cost or other basis	Gain or Loss	Gains Minus Excess or Losses
UNILEVER, 100 SHS	P	12-01-2010	09-15-2015	3,916		3,842	74	74
WASTE MANAGEMENT INC, 70 SHS	P	12-20-2007	09-15-2015	3,509		2,314	1,195	1,195
ZOETIS INC, 225 SHS	P	12-01-2010	09-15-2015	10,141		7,055	3,086	3,086
T ROWE PRICE NEW ASIA FD, 1689 SHS	P	02-18-2011	09-16-2015	25,117		30,000	(4,883)	(4,883)
CHUBB CORP, 5 SHS	P	10-08-2008	11-02-2015	649		214	435	435
CHUBB CORP, 9 SHS	P	10-08-2008	11-03-2015	1,167		385	782	782
CHUBB CORP, 5 SHS	P	10-08-2008	11-05-2015	647		214	433	433
CHUBB CORP, 6 SHS	P	10-08-2008	11-11-2015	777		257	520	520
ALPHABET INC CL C, 5 SHS	P	12-01-2010	11-16-2015	3,618		1,448	2,170	2,170
ALPHABET INC CL C, 1 SH	P	12-01-2010	11-17-2015	729		307	422	422
CHUBB CORP, 10 SHS	P	10-08-2008	11-17-2015	1,297		428	869	869
CHUBB CORP, 65 SHS	P	07-20-2007	07-14-2015	7,930		3,334	4,596	4,596
CHUBB CORP, 50 SHS	P	07-20-2007	07-31-2015	6,250		2,513	3,737	3,737
BAXTER INTL INC, 171 SHS	P	12-01-2010	08-06-2015	7,180		3,862	3,318	3,318
Total				274,776		158,888	115,888	115,888

Federal Supporting Statements	2015 PG01
Name(s) as shown on return THE CHARLOTTE HOME	Your Social Security Number 04-6107990

Form 990PF - Part XV - Line 2
Application Submission Information

Grant Program
CHARLOTTE HOME GRANT

Applicant Name
JOSHUA MINER

Address
PO BOX 111
North Andover, MA 01845

Telephone
978-688-7211

Email Address

Form & Content
APPLICANTS NEED TO SUBMIT THREE COPIES OF THE GRANT APPLICATION, WHICH SHOULD INCLUDE: 1)A COVER LETTER AND PROPOSAL NARRATIVE OF NO MORE THAN FIVE PAGES, 2)COPY OF IRS DETERMINATION LETTER WHICH INDICATES APPLICANT QUALIFIES UNDER 501(C)(3) TO BE TAX EXEMPT, 3)PROOF OF INCORPORATION IN MASSACHUSETTS, 4)NAME, ADDRESS, TELEPHONE NUMBER OF BOARD MEMBER OR EXECUTIVE,

Submission Deadline
QUARTERLY

Restrictions on Award
TO SUPPORT PROGRAMS THAT SERVE THE WELFARE OF WOMEN IN THE MERRIMACK VALLEY, WITH EMPHASIS ON PROGRAMS THAT CONTRIBUTE TO THEIR ECONOMIC INDEPENDENCE. GRANTS WILL BE MADE TO MASSACHUSETTS CORPORATIONS THAT HAVE BEEN DETERMINED BY THE IRS UNDER SECTION 501(C)(3). NO GRANTS TO INDIVIDUALS.

Name(s) as shown on return

THE CHARLOTTE HOME

Your Social Security Number

04-6107990

Form 990PF - Part XV - Line 2
Application Submission Information

Grant Program
CHARLOTTE HOME GRANT

Applicant Name
CONTINUED

Address
PO BOX 111
North Andover, MA 01845

Telephone
978-688-7211

Email Address

Form & Content
5)FINANCIAL INFORMATION AND BUDGET FIGURES FOR THE PARTICULAR PROGRAM FOR WHICH FUNDING IS REQUESTED, AS WELL AS FINANCIAL INFORMATION ABOUT ORGANIZATION (CURRENT YEAR BUDGET), 6)LIST OF BOARD OF DIRECTORS, 7)PRIOR YEAR AUDITOR'S REPORT, IF AVAILABLE. IF NOT, PRIOR YEAR'S UNAUDITED FIGURES. THE CHARLOTTE HOME TRUSTEES MEET QUARTERLY TO REVIEW AND VOTE ON REQUESTS PRIOR TO PAYMENT.

Submission Deadline
QUARTERLY

Restrictions on Award
ORGANIZATONS RECEIVING FUNDS FROM THE CHARLOTTE HOME WILL BE EXPECTED TO SUBMIT A FULL REPORT ON THE EXPENDITURE OF THE GRANT MONIES.

Federal Supporting Statements

2015 PG03

Name(s) as shown on return

THE CHARLOTTE HOME

Your Social Security Number

04-6107990

Form 990PF - Part XV - Line 2
Application Submission Information

Grant Program
CHARLOTTE HOME GRANT

Applicant Name
CONTINUED

Address
PO BOX 111
North Andover, MA 01845

Telephone
978-688-7211

Email Address

Form & Content
GRANT APPLICATIONS ARE EVALUATED AS THEY ARE RECEIVED TO DETERMINE THE CONSISTENCY WITH THE PURPOSE OF THE CHARLOTTE HOME AND COMPLETENESS OF THE PROPOSAL PACKAGE, ESPECIALLY THE FINANCIAL INFORMATION.

Submission Deadline
QUARTERLY

Restrictions on Award
ONLY ONE APPLICATION WILL BE CONSIDERED FROM AN ORGANIZATION PER CALENDAR YEAR EXCEPT FOR ORGANIZATIONS RUNNING A SUMMER PROGRAM. IN THAT INSTANCE A PROPOSAL MAY BE SUBMITTED FOR SUMMER FUNDING EVEN IF THE AGENCY RECEIVED A GRANT FOR A YEAR-ROUND PROGRAM.