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**Return of Private Foundation** 

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

OMB No 1545-0052 2016

Department of the Treasury

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

Open to Public Inspection Information about Form 990-PF and its separate instructions is at www.irs.gov/form990nf.

For	calone	dar year 2016 or tax year beginning	2016 a	nd ending	1	<u></u>	, 20
		oundation Franklin Home for the Aged Assoc	, 2010, a	ila chang		identification number	,
Na	me of f	_			02 - 02 02		
		aka Peabody Home					<del></del>
		nd street (or P O box number if mail is not delivered to street address)	Ro	om/suite	(603)93	number (see instructions)	
		abody Place					
	-	wn, state or province, country, and ZIP or foreign postal code			C If exempti	on application is pending, o	check here
		lin, NH 03235	-5 - 5	<u> </u>	D 4 Farrer	luckene obook ber	
G	heck a		of a former public charit	ty	D 1. Foreigi	n organizations, check here	· · · · •
		Final return Amended ref			2. Foreigr	organizations meeting the	e 85% test,
		Address change Name chang	<del></del>		check	here and attach computation	on · · · · •
H_C	1	type of organization X Section 501(c)(3) exempt privi				oundation status was term	inated under
1_			axable private foundation		section 50	)7(b)(1)(A), check here	· · · •
-		rket value of all assets at J Accounting method:	Cash X A	Accrual		dation is in a 60-month ter	
е	nd of	/ear (from Part II, col (c), Other (specify)			under sec	tion 507(b)(1)(B), check h	ere ► 📘
	ne 16)		e on cash basis.)			<del></del>	
Pa	rt i	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) N=4			(d) Disbursements for charitable
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books		investment come	(c) Adjusted net income	purposes
		the amounts in column (a) (see instructions) )	50010			<u> </u>	(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)			***************************************	<u> </u>	·····
	2	Check ► X if the foundation is not required to attach Sch. B					·
	3	Interest on savings and temporary cash investments	144		144	144	
	4	Dividends and interest from securities	45,210		45,210	45,210	
	5a	Gross rents			····		
	b	Net rental income or (loss)					<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>
a	6a	Net gain or (loss) from sale of assets not on line 10	22,870				
Revenue	b	Gross sales pnce for all assets on line 6a 792,759	******************************			<u> </u>	
eve	7	Capital gain net income (from Part IV, line 2)			22,870		·····
ž	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances .			434		
	b	Less. Cost of goods sold				_	
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule) STM106	2,223,077			2,223,077	
_	12	Total. Add lines 1 through 11	2,291,301		68,224	2,268,431	
	13	Compensation of officers, directors, trustees, etc					
es	14	Other employee salaries and wages	1,460,831			1,460,831	
nses	15	Pension plans, employee benefits	324,764			324,764	
<u>~</u>	16a	Legal fees (attach schedule)					
Ž	b	Accounting fees (attach schedule) RECEIVESTMIOS	11,522			11,522	
ڪٰۃِ	С	Other professional fees (attach schedule)					
ex <u>ta</u>	17	Interest	4,493			4,493	
≥ŧ	18	Taxes (attach schedule) (see instructions) \$ 5.2015TM100	3,086			3,086	
Operating and Administrative Expension	19	Depreciation (attach schedule) and depletion . STM 26	57,584			57,584	· · · · · · · · · · · · · · · · · · ·
ুট	20	Occupancy	64,545	<del></del>		64,545	<u> </u>
FIL D	21	Travel, conferences, and meetings					
争	22	Printing and publications	49,216	1		49,216	
gu	23	Other expenses (attach schedule) . STM124 STM10.3	419,589			419,588	<del></del>
at.	24	Total operating and administrative expenses.					
per		Add lines 13 through 23	2,395,630	1	a	2,395,629	0
ō	25	Contributions, gifts, grants paid	0				
	26	Total expenses and disbursements. Add lines 24 and 25	2,395,630		<u> </u>	2,395,629	0
	27	Subtract line 26 from line 12.	, , , , , , , , , , , , , , , , , , , ,		<u>_</u>		
	а	Excess of revenue over expenses and disbursements .	(104,329	İ		-	
	b	Net investment income (if negative, enter -0-)	\	<del> </del>	68,224		······································
	c	Adjusted net income (If negative, enter -0-)	111 - 111 - 1111	<del> </del>			Treme into pet their
			L	L		L Y	

		Release Shoots Attached schedules and amounts in the description column	Beginning of year	End of y	/ear		
Pa	rt II	Balance Sheets Attached schedules and amounts in the description country should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1,	Cash - non-interest-bearing	260	300	300		
	2	Savings and temporary cash investments	15,630	44,695	44,695		
		Accounts receivable ► 43,173					
		Less: allowance for doubtful accounts	52,410	43,173	43,173		
- 1	4	Pledges receivable ▶					
		Less allowance for doubtful accounts					
l	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)	<b>†</b>				
		Less allowance for doubtful accounts					
ţ	8	Inventories for sale or use					
Assets	9	Prepaid expenses and deferred charges	15,170	22,845	22,845		
Ä	10a	Investments - U.S and state government obligations (attach schedule)					
	b	Investments - corporate stock (attach schedule)					
	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) STM118	1,840,038	1,753,609	1,823,999		
	14	Land, buildings, and equipment, basis ► 2,514,326		.,			
		Less accumulated depreciation (attacs/EMIeitu9e) > 1,673,341	865,180	840,985	840,985		
	15	Other assets (describe  )					
	16	Total assets (to be completed by all filers - see the					
		instructions Also, see page 1, item I)	2,788,688	2,705,607	2,775,997		
	17	Accounts payable and accrued expenses	173,232	194,477			
	18	Grants payable					
Liabilities	19	Deferred revenue					
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons					
jab	21	Mortgages and other notes payable (attach schedule)					
	22	Other liabilities (describe					
	23	Total liabilities (add lines 17 through 22)	173,232	194,477			
		Foundations that follow SFAS 117, check here X					
S	1	and complete lines 24 through 26 and lines 30 and 31.					
nces	24	Unrestricted	2,615,456	2,511,130			
Fund Balar	25	Temporarily restricted					
ä	26	Permanently restricted					
n d	Ì	Foundations that do not follow SFAS 117, check here . ▶					
Ţ		and complete lines 27 through 31.					
ō	27	Capital stock, trust principal, or current funds					
Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund					
SS	29	Retained earnings, accumulated income, endowment, or other funds					
at A	30	Total net assets or fund balances (see instructions)	2,615,456	2,511,130			
Net	31	Total liabilities and net assets/fund balances (see					
		instructions)	2,788,688	2,705,607			
P	art I	Analysis of Changes in Net Assets or Fund Balan	ces				
1	Tota	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	2,615,456		
2	Ente	r amount from Part I, line 27a			(104,329)		
3	Othe	r increases not included in line 2 (itemize) ►STM115		3	3		
4 Add lines 1, 2, and 3							
		eases not included in line 2 (itemize)		5			
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30 .	6	2,511,130		

2-story brick wareh	the kind(s) of property sold (e.g., real ouse, or common stock, 200 shs MLC	estate, Co)	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
la Securities			P	01-01-2015	12-31-2016
b Securities			P	01-01-2013	12-31-2016
С					
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or plus exper	other basis nse of sale		ain or (loss) (f) minus (g)
a 338,337			362,101		(23,764
b 454,422			407,788		46,634
c					
d					
е					
Complete only for assets showi	ng gain in column (h) and owned b	y the foundation on	12/31/69	(I) Coins (C	Col (h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess		col (k), but no	ot less than -0-) or (from col (h))
a		<del>                                     </del>			(23,76
b					46,634
c					20,03
d		<del>                                     </del>	-		
e		<del></del>			·
2 Capital gain net income or (net	capital loss) 🤻 🦭 🦠	ilso enter in Part I, lir enter -0- in Part I, lir	<b>&gt;</b>	2	22.07
. • ,	oss) as defined in sections 1222(5	) and (6):	ie i	2	22,87
Death Bas 0	8, column (c) (see instructions). If (	(loss), enter -0- ın	}	3	(23,76
	ider Section 4940(e) for R	Reduced Tax or	Net Investm	ent Income	(20),
"Yes," the foundation does not qu	ction 4942 tax on the distributable a	complete this part.	·		Yes X N
Enter the appropriate amount in	each column for each year, see the	ne instructions before	e making any entri	es.	
(a) Base period years Calendar year (or tax year beginning	(b) Adjusted qualifying distributio	ns Net value of	(c) noncharitable-use a	Dis	4.43
2015			monorial master ase a		(d) stribution ratio ) divided by col (c))
			TIONORIA MODIO DE LA		stribution ratio
2014					stribution ratio
2014 2013					stribution ratio
					stribution ratio
2013					stribution ratio
2013 2012					stribution ratio
2013 2012					stribution ratio
2013 2012 2011 2 Total of line 1, column (d)	- 5-year base period - divide the to			ssets (col (b	stribution ratio
2013 2012 2011  2 Total of line 1, column (d)	e 5-year base period - divide the to	tal on line 2 by 5, or		col (b	stribution ratio
2013 2012 2011  **Total of line 1, column (d)		tal on line 2 by 5, or		ssets (col (b	stribution ratio
2013 2012 2011  Total of line 1, column (d)	e 5-year base period - divide the to	tal on line 2 by 5, or l 5 years		col (b	stribution ratio
2013 2012 2011  2 Total of line 1, column (d)	e 5-year base period - divide the to has been in existence if less than	tal on line 2 by 5, or l 5 years		(col (b	tribution ratio ) divided by col (c))
2013 2012 2011  Protal of line 1, column (d)	e 5-year base period - divide the too has been in existence if less than able-use assets for 2016 from Part	tal on line 2 by 5, or l 5 years		2 3 . 4	tribution ratio ) divided by col (c))
2013 2012 2011  2 Total of line 1, column (d)	e 5-year base period - divide the too has been in existence if less than able-use assets for 2016 from Part	tal on line 2 by 5, or l 5 years		2 3 . 4 . 5	stribution ratio
2013 2012 2011  2 Total of line 1, column (d)	e 5-year base period - divide the too has been in existence if less than able-use assets for 2016 from Part 	tal on line 2 by 5, or 5 years		2 . 3 . 4 . 5 . 6	tribution ratio ) divided by col (c))

,		02023		F	Page 4	
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - sec	e inst	ructio	ons)		
1a	Exempt operating foundations described in section 4940(d)(2), check here X and enter "N/A" on line 1 ¬	1			,	
	Date of ruling or determination letter: 04-18-1995 (attach copy of letter if necessary-see instructions)	<b>‡</b>				
þ						
	here  and enter 1% of Part I, line 27b	1				
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of	1				
	Part I, line 12, col (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)					
3	Add lines 1 and 2	1	-			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)					
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-				-	
6	Credits/Payments				•	
а	2016 estimated tax payments and 2015 overpayment credited to 2016 6a	1				
b	Exempt foreign organizations - tax withheld at source 6b	1				
С	Tax paid with application for extension of time to file (Form 8868) 6c	I				
d	Backup withholding erroneously withheld 6d	1				
7	Total credits and payments Add lines 6a through 6d	Ť				
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				-	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	†				
11	Enter the amount of line 10 to be: Credited to 2017 estimated tax ▶ Refunded ▶ 11					
Pa	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		<i>,,</i>	Yes	No	
	participate or intervene in any political campaign?		1a		Х	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see					
	Instructions for the definition)?		1b	l	Х	
	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			·		
С	Did the foundation file Form 1120-POL for this year?	. 1	1c		Х	
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. ► \$			1		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		:	<u> </u>		
	on foundation managers. ▶ \$			į		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	ĺ	х	
	If "Yes," attach a detailed description of the activities.		1-11/			
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		Х	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	. 1	4b			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		Х	
	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	[				
	By language in the governing instrument, or					
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that</li> </ul>		1			
	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)				***	
	NH			.		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		ŀ			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	х		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(i)(3) or		<del></del>	<del></del>		
	4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"	l	Ī	Ì		
	complete Part XIV	.	9	x		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	F		<del>-</del>		

names and addresses

10

	n 990-PF (2016) Franklin Home for the Aged Assoc 02-02 rt VII-A Statements Regarding Activities (continued)	02330	F	Page (
11			Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	.   11	162	No X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	·   '''	+	1
	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   www.peabodyhome.org	13	1_1	L.,
14		3 - 934 - 3	718	
	Located at ▶ 24 Peabody Place, Franklin, NH ZIP+4 ▶ 03		7,10	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041-Check here			<u> </u>
	and enter the amount of tax-exempt interest received or accrued during the year		•	
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority		Yes	No
	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	.		- <u></u> -
	the foreign country			
Pai	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required	L.,		1
	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	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X N	,	†	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		1	
	disqualified person?		1	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X N			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		1	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		Į	
	the benefit or use of a disqualified person)?		ŀ	
	(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 X N		}	
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		Í	
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	. 1b	Ī	Ì
	Organizations relying on a current notice regarding disaster assistance check here	1	ļ.,	
С	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 2016?	1c	[	х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		1	
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2016?	,		
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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		Х
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	•		1	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		ļ	
	at any time during the year?	,		
b	If "Yes," did it have excess business holdings in 2016 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 2016)	. 3b	[ ]	
la	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	. 4a	<del>  </del>	^
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?			

Par	t VII-B	Statements Regarding Activities	es tor	Which Forr	n 4720	May Be	Requir	ed (continued)		<del>, , , , , , , , , , , , , , , , , , , </del>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
5a .	During th	e year did the foundation pay or incur any an	nount to				_				
	(1) Carry	y on propaganda, or otherwise attempt to infli	uence le	gislation (section	n 4945(e	e))?	[	Yes X No			
	(2) Influe	ence the outcome of any specific public elect	ion (see	section 4955),	or to carr	ry on,	_				
	direc	tly or indirectly, any voter registration drive?					[	Yes X No			
	. ,	ide a grant to an individual for travel, study, c					[	Yes X No			
	(4) Prov	ide a grant to an organization other than a ch	aritable,	etc, organizati	on descr	ribed in	_	<b>-</b>			
		on 4945(d)(4)(A)? (see instructions)					[	_ Yes ∑ No		1	
	<b>(5)</b> Prov	ide for any purpose other than religious, char	itable, so	cientific, literary	, or educ	ational	_				
	purp	oses, or for the prevention of cruelty to childr	en or ani	mals?			[	Yes X No			
þ	If any an	swer is "Yes" to 5a(1)-(5), did <b>any</b> of the tran	sactions	fail to qualify u	nder the	exceptions of	tescribe	d in			
	Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?										
	•	tions relying on a current notice regarding dis					•	▶ 📙	1 1		
С		ewer is "Yes" to question 5a(4), does the four			from the	e tax	_				
		it maintained expenditure responsibility for the	-			•	٠. [	Yes No			
		attach the statement required by Regulations									
6a		oundation, during the year, receive any funds		or indirectly, to	pay pre	miums	г	T			
	•	sonal benefit contract?			• •		٠ ا	Yes X No			3.7
b		oundation, during the year, pay premiums, di	ectly or	indirectly, on a	personal	benefit conf	ract?		6b	,	<u>X</u>
_		o 6b, file Form 8870			1 11- 1		ſ	ন, ভা,			
7a	•	me during the tax year, was the foundation a		•			. [	Yes X No			
		did the foundation receive any proceeds or h Information About Officers, Dire							7b	01/00	
rai	rt VIII	and Contractors	ECLUIS	, ilusiees,	round	ialion wa	mayer	s, mighty Patu	Empi	oyee	5,
4 1	ict all off	icers, directors, trustees, foundation man	20055 25	nd their comp	nestion	/coo inctru	ntiona)	<del></del>			
	ist all oil	icers, directors, trustees, foundation main	<del></del>	le, and average		mpensation		Contributions to	(e) Expe		
800	990 01	(a) Name and address	hou	rs per week ed to position	` (If n	ot paid, ter -0-)	emple	oyee benefit plans erred compensation		allowar	
	nk Tup		Presi	<del></del>		ter -0-7	and der	erred compensation			
		Canterbury, NH 03224	[	1.00		0		0			0
	n Lard		Vice	President		<u>-</u>					<u>-</u>
		Brook Rd, NH 03235		1.00		0		0			0
	y Palfı		Treas								
_	='	ine Rd, Epsom, NH 03234		1.00		0		o i			0
	dra Gra	···	Clerk								
525	Elbow	Pond Rd, Franklin, NH 03235	ļ	1.00	i	0		0			0
2 (	compensa	ation of five highest-paid employees (othe	r than th	nose included	on line 1	1 - see instr	uctions)	. If none, enter			
	NONE."			_							
				(b) Title, and	average.			(d) Contributions to			
	(a) Name	and address of each employee paid more than \$50	,000	hours per w	reek	(c) Comper	sation	employee benefit plans and deferred	(e) Expe	nse ac allowan	
	. <del></del>			devoted to po	sition			compensation			
Mary	y E Mil	ller		Administr	ator						
107	Baptis	st Hill Road, NH 03224		<del></del>	7.50		,453	18,000			0
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194	7 NH R	oute 140, NH 03837		3	7.50	69	,403	4,543			0
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1 otal	number o	of other employees paid over \$50,000 .	<u></u>	<u> </u>	<u> </u>						0

Franklin Home for the Aged Assoc

Form 990-PF (2016)

02-0202330

Page 6

EEA

Form 990\_OfOv (2016)

Form 990\_OfOv (2016) Franklin Home for the Aged Assoc 02-0202330
List of Officers, Directors, Trustees, and Key Employees

1 List all officers, directors, trustees, and key employees for the	year even if they wer	e not compensated	·	
(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Form W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
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30 Sterling Drive, Franklin, NH 03235	1.00	<u> </u>		<del></del>
John Benham Member			_	_
PO Box 367, Franklin, NH 03235	1.00	0	00	0
Kathy Fuller Member				
24 Peabody Place, Franklin, NH 03235	1.00	0	0	0
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Form 990-PF (2016) Franklin Home for the Aged Assoc	02-02	202330 Page 7
Part VIII Information About Officers, Directors, Trustees, Found	dation Managers, Highly P	aid Employees,
and Contractors (continued)  3 . Five highest-paid independent contractors for professional services (see instru	ctions) If none enter "NONF "	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		4 TT 8
Total number of others receiving over \$50,000 for professional services	<u>.</u>	
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 Operating and Administrative		
		2,395,630
2		
3		
4		
Part tX-B   Summary of Program-Related Investments (see instruction	ctions)	

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
other program-related investments. See instructions	
stal. Add lines 1 through 3	. ▶

Form **990-PF** (2016)

EEA

Pa	TX Minimum Investment Return (All domestic foundations must complete this part. Foreign	n found	ations,
	see instructions.)		
1 .	. Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	1,762,660
b	Average of monthly cash balances	1b	73,186
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	1,835,846
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	. 0
3	Subtract line 2 from line 1d	3	1,835,846
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see	1	
	instructions)	4	27,538
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,808,308
6_	Minimum investment return. Enter 5% of line 5	6	90,415
Pa	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	foundat	tions
	and certain foreign organizations check here ►   X   and do not complete this part )		
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2016 from Part VI, line 5 2a	]	
b	Income tax for 2016 (This does not include the tax from Part VI )	}	
С	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 amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	
Da	rt XII Qualifying Distributions (see instructions)		
- 9	Qualifying distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	0
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.		
а	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	
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether th	e founda	ation
	qualifies for the section 4940(e) reduction of tax in those years.		

Undistributed income, if any, as of the end of 2016:  a Enter amount for 2015 only Total for pricy years.  5. Excess distributions carryover, if any, to 2016. a From 2011 b From 2011 c From 2013 d From 2014 f Total off innes 3a through e 4. Qualitying distributions for 2016 from Part XI, the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength of the strength	1	Distributable amount for 2016 from Part XI,	(a) Corpus	(b) Years pnor to 2015	(c) 2015	(d) 2016
a Enter amount for 2015 only b Total for prory ears.  Excess distributions carryover, if any, to 2016.  From 2012 From 2012 From 2014 From 2014 From 2014 From 2014 From 2016 From 2015 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 From 2017 Fr		line 7				
b Total for proxyears.  3 Excess distributions carryover, if any, to 2016.  3 From 2011  b From 2013  d From 2014  e From 2015  f Total of lines 3s through e  Qualifying distributions for 2016 from Part XII,  tine 4 ➤ \$  Qualifying distributions for 2016 from Part XII,  tine 4 ➤ \$  Applied to 2015, but not more than line 2a  Applied to 2015, but not more than line 2a  Applied to 2015, but not more than line 2a  Applied to 2015 but not more than line 2a  Applied to 2016 distributions for ocpus (Election required - see instructions)  Applied to 2016 distributions carryover applied to 2016  (If an amount appears in column (a), the same amount must be shown in count (a))  6 Enter the net total of each column as inclicated below:  a Corpus Add ines 3f, 4c, and 4e. Subtract line 5  D Pror years' undistributed mores Subtract line 4b from line 2b  c Enter the amount of pror years' undistributed income for which in e2b  c Enter the amount of pror years' undistributed income for which a noble 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  Undistributed income for 2016 Subtract line 4 from line 2a Taxable amount - see instructions  Undistributed more for 2015. Subtract line 4 and 10 from line 1. This amount must be distributed income for for fine 1 from line 1. This amount must be distributed more for 6 from line 6b. Taxable amount - see instructions  1 Undistributed more for 2016 Subtract line 4 from line 6 from line 6b are seen fine 1. This amount must be distributed more for 6 from line 6b. Taxable amount - see instructions)  5 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions)  5 Excess from 2012  b Excess from 2014  d Excess from 2014  d Excess from 2015	2					
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c Excess from 2014 d Excess from 2015	а	_			<u> </u>	
d Excess from 2015	b			-		<u> </u>
	С	Excess from 2014		:		
e Excess from 2016	d	Excess from 2015			<u>:</u> T	f
	е	Excess from 2016				

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Form **990-PF** (2016)

Part	XIV Private Operating Foun	dations (see instruc	ctions and Part V	/II-A, question 9)		
1a	If the foundation has received a ruling or c	letermination letter that it	is a private operating	H		
	foundation, and the ruling is effective for 2	016, enter the date of the	ruling	<u>*</u>	. L	
b	Check box to indicate whether the founda	tion is a private operating	foundation described	d in section X	. 4942(J)(3) or 494	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) 10ta1
	each year listed	d	O	25,154	39,321	64,475
ь	85% of line 2a			21,381	33,423	54,804
_	Qualifying distributions from Part XII,					
С	line 4 for each year listed .					
d	Amounts included in line 2c not used directly for active conduct of exempt activities .					
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test - enter (1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed	60,277	66,579	63,183	64,335	254,374
С	"Support" alternative test - enter  (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Part	XV Supplementary Information	tion (Complete this	s part only if the	e foundation had	\$5,000 or more in	assets at
	any time during the yea	r - see instructions	<u>s.)                                    </u>			
1 a	Information Regarding Foundation Ma List any managers of the foundation who	have contributed more the			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	on (or an equally large n	ortion of the	
-	ownership of a partnership or other entity				or don or the	
			•			
2	Information Regarding Contribution,	Grant, Gift, Loan, Schol	arship etc. Program			
_			• • • •			
	Check here ► X if the foundation only unsolicited requests for funds. If the four	makes contributions to p	s etc. (see instructio	e organizations and doe	s not accept	
	other conditions, complete items 2a, b, c		s, etc. (see instructio	ins) to individuals of org	anizations under	
а	The name, address, and telephone num	<del>`</del>	he person to whom a	nnlications should be a	ddreesed:	
_		oor of a man address of a	no person to whom a	pplications should be a	uuresseu.	
b	The form in which applications should be	submitted and information	on and materials they	should include.		
c	Any submission deadlines					
d	Any restrictions or limitations on awards factors	such as by geographica	l areas, charitable fie	lds, kinds of institutions	, or other	

EEA

3 Grants and Contributions Paid Duri	ng the Year or Approve	d for Future f	Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or busines	s) or substantial contributor			
a Paid during the year				
b Approved for future payment	<u> </u>	<del>,</del>	<b>▶ 3a</b>	-
Total			▶ 3b	

inter gross a	mounts unless otherwise indicated.	Unrelated (a)	d business income (b)	Excluded by s	ection 512, 513, or 514 (d)	(e)  Related or exempt function income
4 Dragge	and the revenue!	Business code	Amount	Exclusion code	Amount	(See instructions)
•	service revenue.	code				2,222,795
L	sing Home Service				<del></del>	
		_			<del></del> -	
				<del>                                     </del>		
·						
g Fees a	and contracts from government agencies					
_	ship dues and assessments	<u> </u>				
	on savings and temporary cash investments	_	*****			144
	s and interest from securities					45,210
	al income or (loss) from real estate					
	financed property	1.1				
	ebt-financed property					
	al income or (loss) from personal property					
	vestment income					22,870
	(loss) from sales of assets other than inventory					
-	me or (loss) from special events					
	rofit or (loss) from sales of inventory					
•	venue. a Miscellaneous					282
_						
. —						
С				1		
c						
d	Add columns (b), (d), and (e)					2,291,301
d e 12 Subtotal	Add columns (b), (d), and (e)				13	2,291,301
d					13	
d e 12 Subtotal 13 Total. A (See workshi	Add columns (b), (d), and (e)					
d e 12 Subtotal 13 Total. A (See worksh	Add columns (b), (d), and (e)	Accomp	lishment of Ex	cempt Purpo	oses	2,291,301
d e 12 Subtotal 13 Total. A	Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Leet in line 13 instructions to verify calculations.)  B Relationship of Activities to the	Accomp	olishment of Ex	cempt Purpe Part XVI-A conf	oses ributed importantly to t	2,291,30
d e 12 Subtotal 13 Total. A (See workshopert XVI-	Add columns (b), (d), and (e)	e Accompone is report	olishment of Exted in column (e) of the than by providing	Rempt Purpo Part XVI-A conf funds for such	oses ributed importantly to t purposes) (See instru	2,291,30
d e 12 Subtotal 13 Total. A (See workshe Part XVI- Line No.	Add columns (b), (d), and (e)	e Accompone is report surposes (otherwise colle	olishment of Extended in column (e) of her than by providing	cempt Purpo Part XVI-A conf funds for such	oses  ributed importantly to t purposes) (See instru  or the	2,291,30
d e 12 Subtotal 13 Total. A (See workshe Part XVI- Line No.	Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Leet in line 13 instructions to verify calculations.)  B Relationship of Activities to the Explain below how each activity for which incompact accomplishment of the foundation's exempt of this amount includes all reverse.	e Accompone is report ourposes (otherwise college). The	clishment of Extended in column (e) of the than by providing ected from reservenues c	empt Purpe Part XVI-A conf funds for such sidents for over exper	oses  ributed importantly to t purposes) (See instru  or the	2,291,30
d e 12 Subtotal 13 Total. A (See workshe Part XVI- Line No.	Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Beet in line 13 instructions to verify calculations.)  B Relationship of Activities to the Explain below how each activity for which incaccomplishment of the foundation's exempt put this amount includes all reverservices which the home provides	e Accompone is report ourposes (otherwise college). The	clishment of Extended in column (e) of the than by providing ected from reservenues c	empt Purpe Part XVI-A conf funds for such sidents for over exper	oses  ributed importantly to t purposes) (See instru  or the	2,291,30
d e 12 Subtotal 13 Total. A (See workshe Part XVI- Line No.	Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  eet in line 13 instructions to verify calculations.)  B Relationship of Activities to the Explain below how each activity for which incomplishment of the foundation's exempt of the foundation accomplishment includes all reverse services which the home provides as food, shelter and other reservices.	e Accompone is report ourposes (otherwise college). The	clishment of Extended in column (e) of the than by providing ected from reservenues c	empt Purpe Part XVI-A conf funds for such sidents for over exper	oses  ributed importantly to t purposes) (See instru  or the	2,291,30
d e 12 Subtotal 13 Total. A (See workshe Part XVI- Line No.	Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Beet in line 13 instructions to verify calculations.)  B Relationship of Activities to the Explain below how each activity for which incomplishment of the foundation's exempt of the services which the home provides as food, shelter and other results.	e Accompone is report ourposes (otherwise college). The	clishment of Extended in column (e) of the than by providing ected from reservenues c	empt Purpe Part XVI-A conf funds for such sidents for over exper	oses  ributed importantly to t purposes) (See instru  or the	2,291,30
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d e 12 Subtotal 13 Total. A (See worksho Part XVI- Line No.	Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Leet in line 13 instructions to verify calculations.)  B Relationship of Activities to the Explain below how each activity for which incomplishment of the foundation's exempt of the foundation's exempt of this amount includes all reverse services which the home provides as food, shelter and other results self-explanatory  Self-explanatory  Self-explanatory	e Accompone is report ourposes (otherwise college). The	clishment of Extended in column (e) of the than by providing ected from reservenues c	empt Purpe Part XVI-A conf funds for such sidents for over exper	oses  ributed importantly to to the purposes) (See instruent the	2,291,300
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d e 12 Subtotal 13 Total. A (See worksho Part XVI- Line No.	Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Leet in line 13 instructions to verify calculations.)  B Relationship of Activities to the Explain below how each activity for which incomplishment of the foundation's exempt of the foundation's exempt of this amount includes all reverse services which the home provides as food, shelter and other results self-explanatory  Self-explanatory  Self-explanatory	e Accompone is report ourposes (otherwise college). The	clishment of Extended in column (e) of the than by providing ected from reservenues c	empt Purpe Part XVI-A conf funds for such sidents for over exper	oses  ributed importantly to to the purposes) (See instruent the	2,291,30
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d e 12 Subtotal 13 Total. A (See worksho Part XVI- Line No.	Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Leet in line 13 instructions to verify calculations.)  B Relationship of Activities to the Explain below how each activity for which incommon accomplishment of the foundation's exempt of this amount includes all reverse services which the home provides as food, shelter and other results Self-explanatory  Self-explanatory  Self-explanatory	e Accompone is report ourposes (otherwise college). The	clishment of Extended in column (e) of the than by providing ected from reservenues c	empt Purpe Part XVI-A conf funds for such sidents for over exper	oses  ributed importantly to to the purposes) (See instruent the	2,291,300
d e 12 Subtotal 13 Total. A (See worksho Part XVI- Line No.	Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Leet in line 13 instructions to verify calculations.)  B Relationship of Activities to the Explain below how each activity for which incommon accomplishment of the foundation's exempt of this amount includes all reverse services which the home provides as food, shelter and other results Self-explanatory  Self-explanatory  Self-explanatory	e Accompone is report ourposes (otherwise college). The	clishment of Extended in column (e) of the than by providing ected from reservenues c	empt Purpe Part XVI-A conf funds for such sidents for over exper	oses  ributed importantly to to the purposes) (See instruent the	2,291,300
d e 12 Subtotal 13 Total. A (See worksho Part XVI- Line No.	Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Leet in line 13 instructions to verify calculations.)  B Relationship of Activities to the Explain below how each activity for which incommon accomplishment of the foundation's exempt of this amount includes all reverse services which the home provides as food, shelter and other results Self-explanatory  Self-explanatory  Self-explanatory	e Accompone is report ourposes (otherwise college). The	clishment of Extended in column (e) of the than by providing ected from reservenues c	empt Purpe Part XVI-A conf funds for such sidents for over exper	oses  ributed importantly to to the purposes) (See instruent the	2,291,300
d e 12 Subtotal 13 Total. A (See worksho Part XVI- Line No.	Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Leet in line 13 instructions to verify calculations.)  B Relationship of Activities to the Explain below how each activity for which incommon accomplishment of the foundation's exempt of this amount includes all reverse services which the home provides as food, shelter and other results Self-explanatory  Self-explanatory  Self-explanatory	e Accompone is report ourposes (otherwise college). The	clishment of Extended in column (e) of the than by providing ected from reservenues c	empt Purpe Part XVI-A conf funds for such sidents for over exper	oses  ributed importantly to to the purposes) (See instruent the	2,291,300
d e 12 Subtotal 13 Total. A (See worksho Part XVI- Line No.	Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Leet in line 13 instructions to verify calculations.)  B Relationship of Activities to the Explain below how each activity for which incommon accomplishment of the foundation's exempt of this amount includes all reverse services which the home provides as food, shelter and other results Self-explanatory  Self-explanatory  Self-explanatory	e Accompone is report ourposes (otherwise college). The	clishment of Extended in column (e) of the than by providing ected from reservenues c	empt Purpe Part XVI-A conf funds for such sidents for over exper	oses  ributed importantly to to the purposes) (See instruent the	2,291,300
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d e 12 Subtotal 13 Total. A (See worksho Part XVI- Line No.	Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Leet in line 13 instructions to verify calculations.)  B Relationship of Activities to the Explain below how each activity for which incommon accomplishment of the foundation's exempt of this amount includes all reverse services which the home provides as food, shelter and other results Self-explanatory  Self-explanatory  Self-explanatory	e Accompone is report ourposes (otherwise college). The	clishment of Extended in column (e) of the than by providing ected from reservenues c	empt Purpe Part XVI-A conf funds for such sidents for over exper	oses  ributed importantly to to the purposes) (See instruent the	2,291,300
d e 12 Subtotal 13 Total. A (See worksho Part XVI- Line No.	Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Leet in line 13 instructions to verify calculations.)  B Relationship of Activities to the Explain below how each activity for which incommon accomplishment of the foundation's exempt of this amount includes all reverse services which the home provides as food, shelter and other results Self-explanatory  Self-explanatory  Self-explanatory	e Accompone is report ourposes (otherwise college). The	clishment of Extended in column (e) of the than by providing ected from reservenues c	empt Purpe Part XVI-A conf funds for such sidents for over exper	oses  ributed importantly to to the purposes) (See instruent the	2,291,300
d e 12 Subtotal 13 Total. A (See worksho Part XVI- Line No.	Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Leet in line 13 instructions to verify calculations.)  B Relationship of Activities to the Explain below how each activity for which incommon accomplishment of the foundation's exempt of this amount includes all reverse services which the home provides as food, shelter and other results Self-explanatory  Self-explanatory  Self-explanatory	e Accompone is report ourposes (otherwise college). The	clishment of Extended in column (e) of the than by providing ected from reservenues c	empt Purpe Part XVI-A conf funds for such sidents for over exper	oses  ributed importantly to to the purposes) (See instruent the	2,291,300
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d e 12 Subtotal 13 Total. A (See worksho Part XVI- Line No.	Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  Leet in line 13 instructions to verify calculations.)  B Relationship of Activities to the Explain below how each activity for which incommon accomplishment of the foundation's exempt of this amount includes all reverse services which the home provides as food, shelter and other results Self-explanatory  Self-explanatory  Self-explanatory	e Accompone is report ourposes (otherwise college). The	clishment of Extended in column (e) of the than by providing ected from reservenues c	empt Purpe Part XVI-A conf funds for such sidents for over exper	oses  ributed importantly to to the purposes) (See instruent the	2,291,300

Part			ganizations	nsiers to and transa	CHOIIS and	a Relation	isiliha AA	itii Nonc	marita	aDie	
1 . D	id the org	anization direc	ctly or indirectly engage	e in any of the following with a	any other orga	nization des	cribed			Yes	No
ın	section 5	501(c) of the C	ode (other than section	n 501(c)(3) organizations) or	ın section 527	, relating to	oolitical				
or	rganızatıc	ons?									ĺ
a Tı	ransfers f	from the report	ing foundation to a nor	ncharitable exempt organizati	on of						ĺ
(1	) Cash								1a(1)		X
(2	) Other	assets .							1a(2)		X
<b>b</b> O	ther trans	sactions									
(1	) Sales	of assets to a r	noncharitable exempt o	organization					1b(1)		X
(2	) Purcha	ases of assets	from a noncharitable e	exempt organization					1b(2)		X
(3	) Rental	of facilities, ed	quipment, or other asse	ets					1b(3)		X
	•		ngements						1b(4)		X
(5	5) Loans	or loan quaran	itees						1b(5)		X
•	•	=		fundraising solicitations					1b(6)		X
•	,		•	ner assets, or paid employees	s				1c		X
	_			plete the following schedule		ould always				<b>'</b>	
		-		ven by the reporting foundation							
				t, show in column (d) the value					l.		
(a) Line i	1	mount involved		naritable exempt organization			sfers, transacti			angeme	ents
(4) 211.0	1.0 (.2) /		(0) (10	<u></u>	1 (2,230		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
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				han section 501(c)(3)) or in s	ection 527?				Ye	s X	No
b It			lowing schedule.		<del></del>						
	(a	) Name of organ	nization	(b) Type of organizati	on		(c) Descript	ion of relation	nship		
				<del></del>							
	T	<del></del>									
		nalties of perjury, I nd complete Decla	declare that I have examined aration of preparer (other than	this return, including accompanying taxpayer) is based on all information	schedules and sta of which prepare	atements, and to r has any knowl	the best of my tedge	knowledge and	belief, it	is true,	
Sign		\	0///	2/2/11		•		May the IR	S discus	s this re	tum
Here		y Miller	1/1/1/1	1 15/11/2017	Adminis	trator		with the pre	eparer sh	own bel	<u>ow</u>
	Signa	ture of officer or tru		Date	Title			(see inst )?	<u> X</u>	Yes	∐ No
De: 4		Print/Type prepar	er's name	Preparer's signature	1 -0-	Date	Che	ck If	PTIN		
Paid		Kimberly	R Edwards CPA	I'm K. Cawa	AS CPA	05-08-20	17 self-	employed P	0189	4453	
Prep	arer	Firm's name	▶ Edwards & A	ssociates, CPA, PC			Firm's EIN	<del>`</del>			
Use	Only	Firm's address	▶ 51 Park Str	eet			Phone no				
			Northfield 1	NH 03276				03-286-8	3000		
									-		

Federal Supporting Statements	2016 PG01
Name(s) as shown on return	FEIN
Franklin Home for the Aged Assoc	02-0202330
Form 990PF - Part III - Line 3 Other Increases Schedule	Statement #115
Rounding	_3
Total	3

PG01

Form 990PF - Part II - Line 13 Investments: Other Schedule

Statement #118

Category	Book value (BOY)1,840,038	Book value (EOY)	FMV (EOY)
Investments		1,753,609	1,823,999
Total	1,840,038	1,753,609	1,823,999

		Federal Su	leral Supporting Statements	ments	2016 PG01
Name(s) as shown on retum					Your Social Secunity Number
Franklin Home for the Aged Assoc					02-0202330
	Form 990PF - Part 1	+	Line 23 - Other Expenses Schedule	edule	Statement #103~
	Revenue	Net	Adjusted	Charitable	
Description	and expenses	investment	net income	purpose	
Other Nursing	100,365	0	100,365	0	
Other Dietary	112,300	0	112,300	0	
Other Laundry	6,888	0	6,888	0	
Other Housekeeping	10,598	0	10,598	0	
Other Activities	7,140	0	7,140	0	
Plant and Operations	62,621	0	62,621	0	
Admin and General Office	7,667	0	7,667	0	
Admin and General Travel	2,436	0	2,436	0	
Admin and General Other	17,066	0	17,066	0	
Admin and General Insurance	72,592	0	72,592	0	
Admin and General Bad Debt	13,958	0	13,958	0	
Portfolio Fees	4,512	0	4,512	0	
Totals	418,143	0	418,143	0	
					PG01
	Form 990PF - Part I	- Line 11	- Other Income Schedule	lule	Statement #106~
	Revenue	Net	Adjusted		
Description	and expenses	investment	net income		
Other Revenue	2,222,795	0 1	2,222,795		
Miscellaneous Income	265	0 0	71		
בוסלומלו לכם ומא					
Totals	2,223,077	0	2,223,077		

-								 	 	_ ۱
2016 PG01 .	Your Social Security Number 02-0202330	Statement #108~			PGO1 Statement #110~					
nents		hedule	Charitable purpose	0		Charitable purpose	0			
Federal Supporting Statements		- Line 16(b) - Accounting Fees Schedule	Adjusted net income	11,522	Form 990PF - Part I - Line 18 - Taxes Schedule	Adjusted net income	3,086			
Federal St			Net Investment	0	990pf - Part I - Line	Net investment	0			
		Form 990PF - Part 1	Revenue and expenses	11,522	Form 9	Revenue and expenses 3,086	3,086			
	Name(s) as shown on return Franklin Home for the Aged Assoc									
	Name(s) as shown on return Franklin Home for the		Description	Totals		<b>Description</b> Taxes	Totals			

•					
2016 PG01 . Your Social Security Number 02-0202330 .	Statement #119~		PG01 Statement #124	Adjusted Net Total Income Amortization 1,445 15,409	1,445
				Net Investment Income	
ments	dule	840,985 840,985	du l e	Current Year Amortization	1,446
eral Supporting Statements	tc. Sche	840,985 840,985 840,985	Line 23 - Amortization Schedule	Amortization Period 15	
Federal Su	- e	1,673,341	•	Prior year Deduction 13,963	13,963
	Form 990PF - Part I	2,514,326 2,514,326	Form 990PF - Part I	Amount Amortized 23,489	23,489
O O O O O	0000	quipment		Date Acquired 02-05-2007	
Name(s) as shown on return		Description Land, buildings, and equipment Total		Description Consultant Fees	Totals

Form 990pF - Part I - Line 19 - Depreciation Schedule  Date Cost or Prior year Computation  Acquired Other basis Depreciation Method Rate Life  01-01-2001 165,407 107,823 M 0 10  165,407 107,823
Form 990PF - Part 1 - Cost or Prior ) Other basis Deprecia 165,407  165,407
Name(s) as shown on return  Franklin Home for the Aged Assoc  Macrs  Totals  Totals