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For calendar year 2016, or tax year beginning 01-01-2016, and ending 12-31-2016

Name of foundation COGSWELL BENEVOLENT TRUST		A Employer identification number 02-0235690	
Number and street (or P O box number if mail is not delivered to street address) 1001 ELM STREET		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code MANCHESTER, NH 03101		B Telephone number (see instructions) (603) 622-4013	
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) \$ 33,588,652		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here	
J Accounting method ☒ Cash ☐ Accrual ☐ Other (specify) (Part I, column (d) must be on cash basis)			

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(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	445			
	4 Dividends and interest from securities	916,294	916,294		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	-472,161			
	b Gross sales price for all assets on line 6a	10,946,460			
	7 Capital gain net income (from Part IV, line 2)		0		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	 2,815	0		
	12 Total. Add lines 1 through 11	447,393	916,294		
	13 Compensation of officers, directors, trustees, etc	75,000	37,500		37,500
	14 Other employee salaries and wages	30,220	15,110		15,110
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	 12,145	6,072		6,073
	c Other professional fees (attach schedule)	 149,609	149,609		0
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	 7,106	5,950		1,156
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy	5,003	2,501		2,502
	21 Travel, conferences, and meetings	2,000	1,000		1,000
	22 Printing and publications				
	23 Other expenses (attach schedule)	 24,148	14,893		9,255
	24 Total operating and administrative expenses. Add lines 13 through 23	305,231	232,635		72,596
	25 Contributions, gifts, grants paid	1,294,390			1,294,390
	26 Total expenses and disbursements. Add lines 24 and 25	1,599,621	232,635		1,366,986
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-1,152,228			
	b Net investment income (if negative, enter -0-)		683,659		
c Adjusted net income (if negative, enter -0-)					

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 (a) Book Value	End of year (b) Book Value (c) Fair Market Value		
Assets	1	Cash—non-interest-bearing	1,284,859	1,176,800	1,176,800
	2	Savings and temporary cash investments			
	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)	19,603,450	18,180,357	24,163,468
	c	Investments—corporate bonds (attach schedule)	7,748,294	8,127,218	8,248,384
	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)	28,636,603	27,484,375	33,588,652	
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 ▶ _____)			
	23	Total liabilities (add lines 17 through 22)	0	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			
	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	28,636,603	27,484,375	
	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	0	0	
	30	Total net assets or fund balances (see instructions)	28,636,603	27,484,375	
31	Total liabilities and net assets/fund balances (see instructions) .	28,636,603	27,484,375		

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	28,636,603
2	Enter amount from Part I, line 27a	2	-1,152,228
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3	4	27,484,375
5	Decreases not included in line 2 (itemize) ▶ _____	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	27,484,375

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 Additional Data Table			
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 See Additional Data Table			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(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	
a See Additional Data Table			
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	-472,161
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 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))
2015	1,734,825	33,041,159	0 052505
2014	1,573,182	32,934,179	0 047767
2013	1,496,503	34,494,824	0 043383
2012	1,372,867	30,424,244	0 045124
2011	1,345,109	29,679,263	0 045322

2 Total of line 1, column (d)	2	0 234101
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 046820
4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5	4	32,339,689
5 Multiply line 4 by line 3	5	1,514,144
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	6,837
7 Add lines 5 and 6	7	1,520,981
8 Enter qualifying distributions from Part XII, line 4 ,	8	1,366,986

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	13,673
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	13,673
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	13,673
6	Credits/Payments		
a	2016 estimated tax payments and 2015 overpayment credited to 2016	6a	13,506
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	7,000
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	20,506
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	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid . . . ▶	10	6,833
11	Enter the amount of line 10 to be Credited to 2017 estimated tax ▶ 6,833 Refunded ▶	11	0

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	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ _____ 0 (2) On foundation managers ▶ \$ _____ 0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ _____ 0		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities	2	No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T	5	No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ NH		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	8b	Yes
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	No
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>N/A</u>	13	Yes	
14	The books are in care of ► <u>CHARLES GOODWIN</u> Telephone no ► <u>(603) 622-4013</u>			

Located at ► 1001 ELM STREET MANCHESTER NH ZIP+4 ► 031011828

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		
16	At any time during calendar year 2016, 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	Yes	No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," enter the name of the foreign country ►			

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.

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(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 2016?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? ☒ Yes ☐ No			
	If "Yes," list the years ► 2015, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions)	2b	Yes	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ No			
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		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		No

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

5a During the year did the foundation pay or incur any amount to (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). ☐ Yes ☒ No (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? ☐ Yes ☒ No Organizations relying on a current notice regarding disaster assistance check here. ☐ Yes ☒ No	5b		
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	6b		No
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No If "Yes" to 6b, file Form 8870			
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No	7b		
b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ Yes ☒ No			

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

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
CHARLES GOODWIN 433 N BAY STREET MANCHESTER, NH 03104	TRUSTEE 20 00	25,000	0	0
PETER KACHAVOS 412 ARAH STREET MANCHESTER, NH 03104	TRUSTEE 20 00	25,000	0	0
MARK NORTHRIDGE 344 DREW HILL ROAD ALTON, NH 03809	TRUSTEE 20 00	25,000	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	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) 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. ►		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1	
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 ►	0

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	31,373,019
b	Average of monthly cash balances.	1b	1,459,153
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	32,832,172
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	32,832,172
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	492,483
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	32,339,689
6	Minimum investment return. Enter 5% of line 5.	6	1,616,984

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	1,616,984
2a	Tax on investment income for 2016 from Part VI, line 5.	2a	13,673
b	Income tax for 2016 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	13,673
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	1,603,311
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	1,603,311
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	1,603,311

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	1,366,986
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	4	1,366,986
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	1,366,986

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 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				1,603,311
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only.			1,499,535	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2016				
a From 2011.				
b From 2012.				
c From 2013.				
d From 2014.				
e From 2015.				
f Total of lines 3a through e.	0			
4 Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ <u>1,366,986</u>				
a Applied to 2015, but not more than line 2a			1,366,986	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2016 distributable amount.				0
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
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.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions			132,549	
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017				1,603,311
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).	0			
8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions).	0			
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	0			
10 Analysis of line 9				
a Excess from 2012.				
b Excess from 2013.				
c Excess from 2014.				
d Excess from 2015.				
e Excess from 2016.				

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 2016, enter the date of the ruling.	1929-09-28
b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)	

	Tax year	Prior 3 years			(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
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 organization had \$5,000 or more in assets at any time during the year—see instructions.)

1	Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2)) b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest
2	Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.
a	The name, address, and telephone number or e-mail address of the person to whom applications should be addressed COGSWELL BENEVOLENT TRUST 1001 ELM STREET MANCHESTER, NH 03101 (603) 622-4013
b	The form in which applications should be submitted and information and materials they should include APPLICATION WITH COPY OF 501(C)(3) DETERMINATION LETTER
c	Any submission deadlines NONE
d	Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors 90% OF AWARDS HAVE TO STAY IN NEW HAMPSHIRE PER TRUST DOCUMENT

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			3a	1,294,390
b <i>Approved for future payment</i>				
Total			3b	0

Enter gross amounts unless otherwise indicated

(See worksheet in line 13 instructions to verify calculations)

[illegible]

Part XVII

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

[illegible]

- 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

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

Print/Type preparer's name MARIE C MCKAY	Preparer's Signature	Date 2017-10-17	Check if self-employed ☐	PTIN P00294931
Firm's name ► BIGELOW & COMPANY CPA PLLC				Firm's EIN ► 02-0394333
Firm's address ► 500 COMMERCIAL STREET MANCHESTER, NH 03101				Phone no (603) 627-7659

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
RBC - 19012 CAP GAIN DIST	P		
RBC - 19012	P		
RBC - 19012	P		
RBC - 19012	P		
RBC - 19012 WASH SALE	P		
RBC - 61575	P		
RBC - 61575	P		
RBC - 23312	P		
RBC - 23312	P		
RBC - 27112	P		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(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)
5,805			5,805
1,003,885		905,142	98,743
400,893		402,603	-1,710
3,505,975		3,929,580	-423,605
10			10
4,329,368		4,324,429	4,939
582,854		573,931	8,923
47		53	-6
362,919		285,618	77,301
1,270		2,079	-809

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) 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	
			5,805
			98,743
			-1,710
			-423,605
			10
			4,939
			8,923
			-6
			77,301
			-809

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
RBC - 27112	P		
RBC - 27112	P		
RBC - 27112	P		
RBC - 27112 ACCRUED MARKET DISCOUNT	P		
RBC - 27112 ACCRUED MARKET DISCOUNT	P		
RBC - 27112	P		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(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)
421,686		568,746	-147,060
284,824		324,684	-39,860
46,733		101,756	-55,023
73			73
65			65
53			53

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(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	
			-147,060
			-39,860
			-55,023
			73
			65
			53

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
ALTON COMMUNITY SERVICES 141 MAIN STREET ALTON, NH 03809	NONE	501(C)(3)	PURCHASE FREEZER	2,500
AMERICAN DIABETES ASSOCIATION OF NEW ENGLAND 146 CLIFFORD STREET PROVIDENCE, RI 02903	NONE	501(C)(3)	FUND FOUR NH RESIDENTS TO ATTEND CAMP CAREFREE	5,000
AMERICAN RED CROSS OF NEW HAMPSHIRE 2 MAITLAND STREET CONCORD, NH 03301	NONE	501(C)(3)	REPLENISH DISASTER RELIEF FUND	10,000
APPALACHIAN MOUNTAIN TEEN PROJECT 85 BAY STREET WOLFEBORO, NH 03894	NONE	501(C)(3)	SUPPORT YOUTH PLACED-BASED EDUCATION PROJECT	6,000
APPALACHIAN MOUNTAIN TEEN PROJECT 85 BAY STREET WOLFEBORO, NH 03894	NONE	501(C)(3)	SUPPORT PATHWAYS TO LEADERSHIP PROGRAM	6,000
Total ► 3a				1,294,390

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
AVIATION MUSEUM OF NH 27 NAVIGATOR RD LONDONDERRY, NH 03053	NONE	501(C)(3)	EDUCATIONAL ENRICHMENT THROUGH TECHNOLOGY PROJECT	5,000
BARTON CENTER FOR DIABETES EDUCATION INC PO BOX 356 NORTH OXFORD, MA 01537	NONE	501(C)(3)	CAMPERSHIPS	25,000
BEKTASH TEMPLE 189 PEMBROKE ROAD CONCORD, NH 03302	NONE	501(C)(3)	\$3,000 EACH SHRINE BURNS INSTITUTE IN BOSTON & SHRINE HOSPITAL FOR CRIPPLED (\$6,000)	6,000
BETHLEHEM REDEVELOPMENT ASSOC 2050 MAIN ST BETHLEHEM, NH 03574	NONE	501(C)(3)	FRIENDS OF THE COLONIAL THEATRE CAPITAL CAMPAIGN FOR RENOVATIONS	10,000
BHUTANESE COMMUNITY OF NH 510 CHESTNUT ST STE 200 MANCHESTER, NH 03101	NONE	501(C)(3)	DELIVER INTENSIVE CASE MANAGEMENT SERVICES TO REFUGEES IN MANCHESTER	12,500
Total ► 3a				1,294,390

Form 990PF Part XV Line 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 <i>Paid during the year</i>				
CANDIA TOWN OF 74 HIGH STREET CANDIA, NH 03034	NONE	501(C)(3)	SUPPORT FOR CANDIA FOOD PANTRY	2,500
CASA OF NH 138 COOLIDGE AVE MANCHESTER, NH 03101	NONE	501(C)(3)	UPGRADE COMPUTER SYSTEM	18,000
CATCH NEIGHBORHOOD HOUSING 76 S STATE ST CONCORD, NH 03301	NONE	501(C)(3)	YOUR HOME CAPITAL CAMPAIGN	25,000
CATHOLIC MEDICAL CENTER 100 MCGREGOR STREET MANCHESTER, NH 03102	NONE	501(C)(3)	PURCHASE AND UP-DATED SECURITY SYSTEM FOR THE MATERNITY UNIT	20,000
CIRCLE PROGRAM 85 MAIN ST 5 PORTSMOUTH, NH 03264	NONE	501(C)(3)	RENEWAL OF PARTNERSHIP WITH NH WOMEN'S CAUCUS FOR ART MENTORING GIRLS IN CIRCLE PROGRAM	3,000
Total 3a				1,294,390

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
CITY YEAR NEW HAMPSHIRE 848 ELM STREET SUITE 201 MANCHESTER, NH 03101	NONE	501(C)(3)	LAST PMT ON 3-YR \$75,000 PLEDGE FOR EXPANSION OF WHOLE SCHOOL WHOLE CHILD PROGRAM	25,000
CLAREMONT SOUP KITCHEN 53 CENTRAL STREET CLAREMONT, NH 03743	NONE	501(C)(3)	SUPPORT FOR SOUP KITCHEN	2,500
COCHECO VALLEY HUMANE SOCIETY 262 COUNTY FARM RD DOVER, NH 03820	NONE	501(C)(3)	PROVIDE MEDICAL TREATMENT TO ANIMALS	10,000
COPPER CANYON CAMP PO BOX 124 FRANCONIA, NH 03580	NONE	501(C)(3)	SUPPORT SUMMER CAMP FOR LOW-INCOME CHILDREN	8,270
CORNERSTONE VNA 178 FARMINGTON ROAD ROCHESTER, NH 03867	NONE	501(C)(3)	PURCHASE PHYSICAL & OCCUPATIONAL THERAPISTS EQUIPMENT	5,025
Total ▶ 3a				1,294,390

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
D ACRES OF NH 218 STREETER WOODS ROAD DORCHESTER, NH 03266	NONE	501(C)(3)	FOR PURCHASE OF COLLECTIVE BULK GRAIN SILO & IMPLEMENT BULK GRAIN PURCHASING PROG FOR FARMERS	1,000
DENTAL LIFELINE NETWORK PO BOX 3487 CONCORD, NH 03302	NONE	501(C)(3)	SUPPORT DONATED DENTAL SERVICES PROGRAM	5,000
DERRYFIELD SCHOOL 2108 RIVER ROAD MANCHESTER, NH 03104	NONE	501(C)(3)	BREAKTHROUGH MANCHESTER - 14 LOW-INCOME STUDENTS TO PARTICIPATE IN SUMMER PROGRAM	28,000
EASTER SEALS NEW HAMPSHIRE 25 LOWELL STREET MANCHESTER, NH 03101	NONE	501(C)(3)	BIG IDEAS FOR BUILDING INDEPENDENCE CAMPAIGN TO RENOVATE 555 AUBURN STREET (1ST PMT ON PLEDGE)	100,000
FALL MOUNTAIN FRIENDLY MEALS 121 MAIN ST ALSTEAD, NH 03602	NONE	501(C)(3)	PURCHASE A 12X12 WALK-IN FOOD STORAGE FREEZER	5,000
Total 3a				1,294,390

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
FLEUR DE LIS CAMP 120 HOWEVILLE ROAD FITZWILLIAM, NH 03447	NONE	501(C)(3)	PURCHASE CERAMICS EQUIPMENT	4,400
FRIENDS OF THE CONCORD CITY AUDITORIUM PO BOX 652 CONCORD, NH 03302	NONE	501(C)(3)	SUPPORT SEAT RESTORATION PROJECT AT THE AUDI	5,000
FRISBIE MEMORIAL HOSPITAL 11 WHITEHALL RD ROCHESTER, NH 03867	NONE	501(C)(3)	PURCHASE AN INFANT HEARING SCREENER	10,000
GIRL SCOUTS OF THE GREEN & WHITE MTNS 1 COMMERCE DR BEDFORD, NH 03110	NONE	501(C)(3)	UNLEASHING HER POTENTIAL THE CAMPAIGN FOR THE FUTURE OF GIRLS	25,000
GIRLS INC OF NH 815 ELM STREET SUITE 4A MANCHESTER, NH 03101	NONE	501(C)(3)	RENOVATE BUILDING DONATED TO THEM FROM NASHUA HOUSING AUTHORITY	25,000
Total ► 3a				1,294,390

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
GRANITE UNITED WAY 228 MAPLE STREET 4TH FLOOR MANCHESTER, NH 03103	NONE	501(C)(3)	WHOLE VILLAGE FAMILY RESOURCE CENTER'S VITA SITE	7,000
GRANITE UNITED WAY 228 MAPLE STREET 4TH FLOOR MANCHESTER, NH 03103	NONE	501(C)(3)	2015 ANNUAL CAMPAIGN	55,000
GRANITE YMCA 30 MECHANIC STREET MANCHESTER, NH 03101	NONE	501(C)(3)	4TH GRADE WATER SAFETY PROGRAM	5,000
GRANITE YMCA 30 MECHANIC STREET MANCHESTER, NH 03101	NONE	501(C)(3)	FINAL PMT ON 11/19/14 PLEDGE FOR DEVELOPMENT OF CENTERS FOR TEEN LEADERSHIP IN DOWNTOWN MANCHESTER AND ALLARD CENTER	50,000
INTI ACADEMY OF MANCHESTER 396 VALLEY STREET MANCHESTER, NH 03103	NONE	501(C)(3)	SUPPORT 4 ART CLASSES AT THE CURRIER ART CENTER FEATURING STEM TOPICS	7,500
Total ► 3a				1,294,390

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
KINGSWOOD YOUTH CENTER 565 CENTER STREET WOLFEBORO, NH 03894	NONE	501(C)(3)	REPAIR 12 PASSENGER VAN	3,563
LIFEBRIDGE INC PO BOX 187 WOLFEBORO, NH 03894	NONE	501(C)(3)	EXPAND YOUTH MENTORING SERVICES IN BELKNAP, CARROLL, GRAFTON & STRAFFORD COUNTIES	15,000
LIVE & LET LIVE FARM INC 20 PARADISE LANE CHICHESTER, NH 03258	NONE	501(C)(3)	PURCHASE A SECOND HAND PLOW TRUCK TO CLEAR FARM ROADS IN WINTER AT RESCUE	10,000
MANCHESTER COMMUNITY HEALTH CENTER 145 HOLLIS STREET MANCHESTER, NH 03101	NONE	501(C)(3)	FINAL PMT ON 2/15 PLEDGE FOR \$125,000 FOR COMBINING WITH CHILD HEALTH SERV	50,000
MANCHESTER POLICE ATHLETIC LEAGUE 405 VALLEY STREET MANCHESTER, NH 03103	NONE	501(C)(3)	RENOVATION OF OFFICER MICHAEL BRIGGS COMMUNITY CENTER	20,000
Total 3a				1,294,390

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
MASONIC GRAND LODGE 30 MONT VERNON STREET MILFORD, NH 03055	NONE	501(C)(3)	THE "DARE" PROGRAM	2,000
MERRIMACK VALLEY DAY CARE SERVICE 19 N FRUIT STREET CONCORD, NH 03301	NONE	501(C)(3)	REPAIRS TOWARDS ROOF, HEATING & SPRINKLER SYSTEMS	10,000
MIRACLES IN MOTION 118 WYMAN RD KEENE, NH 03431	NONE	501(C)(3)	EQUINE FACILITATED LEARNING PROGRAM FOR AT-RISK YOUTH	2,500
MONADNOCK FAMILY SERVICES 64 MAIN STREET 201 KEENE, NH 03431	NONE	501(C)(3)	SET-UP COSTS FOR OFF-SITE SERVICE PROVIDER TO IMPROVE DATA SECURITY	10,000
MOUNT WASHINGTON VALLEY MASONIC ANGEL FUND PO BOX 2483 NORTH CONWAY, NH 03860	NONE	501(C)(3)	ASSIST NEEDY CHILDREN IN FULFILLING A NEED (CLOTHES, MEDICAL, FOOD)	2,000
Total ► 3a				1,294,390

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
NASHUA CHILDREN'S HOME 125 AMHERST STREET NASHUA, NH 03064	NONE	501(C)(3)	TRANSITIONAL LIVING PROGRAM	10,000
NEIGHBORWORKS SOUTHERN NH 810 ELM ST MANCHESTER, NH 03101	NONE	501(C)(3)	NASHUA TREE STREETS REVITALIZATION PROJECT	25,000
NEW DURHAM FOOD PANTRY 5 MAIN STREET NEW DURHAM, NH 03855	NONE	501(C)(3)	SPECIAL YEAR-END SUPPORT	2,500
NEW HORIZONS FOR NEW HAMPSHIRE INC 199 MANCHESTER STREET PO BOX 691 MANCHESTER, NH 03105	NONE	501(C)(3)	26TH ANNUAL WALK AGAINST HUNGER	20,000
NEW HORIZONS FOR NEW HAMPSHIRE INC 199 MANCHESTER STREET PO BOX 691 MANCHESTER, NH 03105	NONE	501(C)(3)	22ND ANNUAL THANKSGIVING BREAKFAST	20,000
Total 				1,294,390
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
NEW HORIZONS FOR NEW HAMPSHIRE INC 199 MANCHESTER STREET PO BOX 691 MANCHESTER, NH 03105	NONE	501(C)(3)	\$75,000 PLEDGE FOR RENOVATIONS TO MAIN BLDG & ANGIES SHELTER \$35,000 TO BE PD IN 2017	40,000
NH CENTER FOR NONPROFITS 84 SILK FARM ROAD 1 CONCORD, NH 03301	NONE	501(C)(3)	SUPPORT HOFFMAN-HAAS FELLOWSHIP PROGRAM	5,000
NH COMMUNITY LOAN FUND 7 WALL STREET CONCORD, NH 03301	NONE	501(C)(3)	SUPPORT INDIVIDUAL DEVELOPMENT ACCOUNT	15,000
NH FOOD BANK 700 E INDUSTRIAL PARK DRIVE MANCHESTER, NH 03109	NONE	501(C)(3)	PURCHASE THANKSGIVING TURKEYS	50,000
NH HISTORICAL SOCIETY 30 PARK STREET CONCORD, NH 03301	NONE	501(C)(3)	CREATE A COMPREHENSIVE 4TH GRADE SOCIAL STUDIES CURRICULUM FOR EDUCATORS & STUDENTS	15,000
Total 3a				1,294,390

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
NH INSTITUTE OF ART 148 CONCORD ST MANCHESTER, NH 03104	NONE	501(C)(3)	YOUTH ART INITIATIVE	10,000
NH JUVENILE COURT DIVERSION NETWORK 23 WAKEFIELD ST ROCHESTER, NH 03867	NONE	501(C)(3)	MONTH OF EXPENSES TO ALLOW THEM TIME TO SECURE SUSTAINABLE FUNDING	5,000
NH MUSIC FESTIVAL 7 MAIN STREET PLYMOUTH, NH 03264	NONE	501(C)(3)	SUPPORT SUMMER CONCERTS	5,000
NH PHILHARMONIC 83 HANOVER STREET MANCHESTER, NH 03101	NONE	501(C)(3)	EDUCATIONAL OUTREACH PROGRAM SUPPORT	4,000
NH STATE LIBRARY 20 PARK STREET CONCORD, NH 03301	NONE	501(C)(3)	KIDS, BOOKS & THE ARTS PROGRAM	1,500
Total ▶ 3a				1,294,390

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
NORTHERN HUMAN SERVICES 257 EATON RD CONWAY, NH 03818	NONE	501(C)(3)	SUPPORT COMMON GROUND PROGRAM	15,000
OPPORTUNITY NETWORKS 11 CALDWELL DRIVE AMHERST, NH 03031	NONE	501(C)(3)	DEVELOPMENT OF HEALTH & WELLNESS PROGRAM FOR THOSE WITH DEVELOPMENTAL DISABILITIES	10,000
OSSIPEE CHILDREN'S FUND PO BOX 685 CENTER OSSIPEE, NH 03814	NONE	501(C)(3)	FINANCIAL ASSISTANCE TO LOW-INCOME FAMILIES	3,000
OSSIPEE CONCERNED CITIZENS INC 3 DORE ST OSSIPEE, NH 03814	NONE	501(C)(3)	COST OF 'FOOD ONLY' FOR OVERSERVED MEALS IN ELDERLY NUTRITION PROGRAM	5,000
PEMI-BAKER COMMUNITY MENTAL HEALTH 101 BOULDER POINT DR SUITE 3 PLYMOUTH, NH 03264	NONE	501(C)(3)	MAINTENANCE & UPGRADES TO THE THERAPEUTIC POOL	4,000
Total ► 3a				1,294,390

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
PRESCOTT PARK ARTS FESTIVAL PO BOX 4370 PORTSMOUTH, NH 03802	NONE	501(C)(3)	INSTALL NEW STRUCTURAL EQUIPMENT	15,000
RIVERBEND COMMUNITY MENTAL HEALTH 105 LOUDON ROAD BUILDING 4 CONCORD, NH 03301	NONE	501(C)(3)	SUPPORT CHOICES ADDICTION RECOVERY SERVICE	20,000
SALVATION ARMY MANCHESTER 121 CEDAR STREET MANCHESTER, NH 03103	NONE	501(C)(3)	RED KETTLE CAMPAIGN	25,000
SEACOAST SCIENCE CENTER 570 OCEAN BLVD RYE, NH 03870	NONE	501(C)(3)	FOR SITE SAFETY & ACCESSIBILITY UPGRADES	10,300
SOCIETY FOR THE PROTECTION OF NH FORESTS 54 PORTSMOUTH STREET CONCORD, NH 03301	NONE	501(C)(3)	SUPPORT FOR SECOND YEAR OF THE CONSERVATION CENTER UPGRADE	20,000
Total ► 3a				1,294,390

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
SONSHINE SOUP KITCHEN 4 CRYSTAL AVE DERRY, NH 03038	NONE	501(C)(3)	SPECIAL YEAR-END SUPPORT	2,500
SOUTHERN NH SERVICES 410 PINE ST MANCHESTER, NH 03103	NONE	501(C)(3)	ESTABLISH 3 PRE- KINDERGARTEN CLASSROOMS AT WEST HIGH SCHOOL	20,000
SPEARE MEMORIAL HOSPITAL 16 HOSPITAL RD PLYMOUTH, NH 03264	NONE	501(C)(3)	PURCHASE A RAPID BLOOD TRANSFUSER	9,250
SPECIAL NEEDS SUPPORT CENTER 12 FLYNN STREET LEBANON, NH 03766	NONE	501(C)(3)	SUPPORT FOR ART LAB & HAPPENINGS PROGRAM	3,000
ST JOSEPH COMMUNITY SERVICES 323 FRANKLIN ST MANCHESTER, NH 03101	NONE	501(C)(3)	RESTORE 5TH DAY TO MEALS- ON-WHEELS PROGRAM	25,000
Total ► 3a				1,294,390

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Name and address (home or business)				
a <i>Paid during the year</i>				
ST KIERAN COMMUNITY CENTER FOR THE ARTS 155 EMERY ST BERLIN, NH 03570	NONE	501(C)(3)	ADDRESS SAFETY ISSUES AT CENTER IN RENOVATION	5,000
STRAWBERRY BANKE 14 HANCOCK STREET PORTSMOUTH, NH 03801	NONE	501(C)(3)	SUPPORT HISTORY WITHIN REACH EDUCATIONAL OUTREACH PROGRAM	10,000
SULLIVAN COUNTY ORAL HEALTH COLLABORATIVE 1 TREMONT ST CLAREMONT, NH 03743	NONE	501(C)(3)	PURCHASE DENTAL EQUIPMENT	7,282
SUPREME COUNCIL HEADQUARTERS PO BOX 519 LEXINGTON, MA 02420	NONE	501(C)(3)	SUPPORT FOR CHARITIES IN THE MOST NEED	2,000
THE COMMUNITY KITCHEN INC 35 - 37 MECHANIC STREET KEENE, NH 03431	NONE	501(C)(3)	\$10,000 FOR THE COALITION OF FOOD PANTRY'S & \$2,500 FOR THE FALL MOUNTAIN FOOD SHELF	12,500
Total ▶ 3a				1,294,390

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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Name and address (home or business)				
a Paid during the year				
THE FRONT DOOR 7 CONCORD STREET NASHUA, NH 03064	NONE	501(C)(3)	RENOVATIONS TO VICTORY HOUSE TRANSITIONAL HOUSING	10,000
THE GIBSON CENTER FOR SENIOR SERVICES INC 14 GROVE ST NORTH CONWAY, NH 03860	NONE	501(C)(3)	REPAIR & REPLACE PART OF WATER SYSTEM AT SILVER LAKE LANDING SENIOR HOUSING IN MADISON, NH	15,000
THE MAYHEW PROGRAM 293 W SHORE RD BRISTOL, NH 03222	NONE	501(C)(3)	FOR CURRENT PROGRAM USE	15,000
THE MAYHEW PROGRAM 293 W SHORE RD BRISTOL, NH 03222	NONE	501(C)(3)	BALANCE NEEDED FROM ORIGINAL \$48,000 REQUEST FOR FIND YOUR BEST CAPITAL CAMPAIGN	33,000
THE MUSIC HALL 28 CHESTNUT ST PORTSMOUTH, NH 03801	NONE	501(C)(3)	EXPAND & ENHANCE OUTREACH OFFERINGS IN 2016-2017 SEASON	10,000
Total ▶ 3a				1,294,390

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Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
THE UPPER ROOM 36 TSIENNETO RD DERRY, NH 03038	NONE	501(C)(3)	TEEN INFORMATION FOR PARENTING SUCCESS PROGRAM	20,000
THE WEBSTER HOUSE 135 WEBSTER STREET MANCHESTER, NH 03104	NONE	501(C)(3)	TO SUPPORT THE SERVICES TO HELP YOUTH & PROVIDE THEM WITH A SAFE PLACE TO LIVE	15,000
THOMAS MORE COLLEGE OF LIBERAL ARTS 6 MANCHESTER STREET MERRIMACK, NH 03054	NONE	501(C)(3)	TOWARDS INSTALLATION OF SPRINKLER SYSTEM IN WOMEN'S DORM (KOPKA HALL)	10,000
UNITED NEGRO COLLEGE FUND 15 BROAD STREET BOSTON, MA 02109	NONE	501(C)(3)	2010-2011 ANNUAL CAMPAIGN	5,000
UPREACH THERAPEUTIC EQUESTRIAN CENTER INC 153 PAIGE HILL ROAD GOFFSTOWN, NH 03045	NONE	501(C)(3)	PURCHASE & INSTALL A 10,000 WATT GENERAC XG GENERATOR	4,300
Total ▶ 3a				1,294,390

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
VISITING NURSE & HOSPICE OF VT & NH 88 PROSPECT ST WHITE RIVER JUNCTION, VT 05001	NONE	501(C)(3)	COLSOLIDATE VT & NH OFFICES	10,000
WEST CENTRAL BEHAVIORAL HEALTH 9 HANOVER ST SUITE 2 LEBANON, NH 03766	NONE	501(C)(3)	SUPPORT SAME DAY ACCESS PROJECT	20,000
YMCA CAMP NELLIE HUCKINS 17 CAMP HUCKINS RD FREEDOM, NH 03836	NONE	501(C)(3)	TUITION FOR NEW HAMPSHIRE CAMPERS	10,000
Total ▶ 3a				1,294,390

TY 2016 Accounting Fees Schedule**Name:** COGSWELL BENEVOLENT TRUST**EIN:** 02-0235690

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	12,145	6,072		6,073

TY 2016 Investments Corporate Bonds Schedule

Name: COGSWELL BENEVOLENT TRUST

EIN: 02-0235690

Name of Bond	End of Year Book Value	End of Year Fair Market Value
VARIOUS	8,127,218	8,248,384

TY 2016 Investments Corporate Stock Schedule

Name: COGSWELL BENEVOLENT TRUST

EIN: 02-0235690

Name of Stock	End of Year Book Value	End of Year Fair Market Value
VARIOUS	18,180,357	24,163,468

TY 2016 Other Expenses Schedule**Name:** COGSWELL BENEVOLENT TRUST**EIN:** 02-0235690**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OFFICE EXPENSE	2,497	1,248		1,249
INSURANCE	14,794	7,397		7,397
BOND AMORTIZATION	5,453	5,453		0
UTILITIES	1,219	610		609
STATE FILING FEES	185	185		0

TY 2016 Other Income Schedule**Name:** COGSWELL BENEVOLENT TRUST**EIN:** 02-0235690**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
OTHER INCOME	2,730		2,730
LEVEL 3 CONSENT PAYMENT DISTRIBUTION	85		85

TY 2016 Other Professional Fees Schedule**Name:** COGSWELL BENEVOLENT TRUST**EIN:** 02-0235690

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT ADVISORY FEES	149,609	149,609		0

TY 2016 Taxes Schedule**Name:** COGSWELL BENEVOLENT TRUST**EIN:** 02-0235690

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL TAXES	2,312	1,156		1,156
FOREIGN TAXES WITHHELD	4,794	4,794		0