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

Name of foundation CHARLES H HOOD FOUNDATION		A Employer identification number 04-3507847	
Number and street (or P O box number if mail is not delivered to street address) 95 BERKELEY STREET NO 202		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code BOSTON, MA 02116		B Telephone number (see instructions) (617) 695-9439	
G Check all that apply <div><input type="checkbox"/> Initial return</div> <div><input type="checkbox"/> Initial return of a former public charity</div> <div><input type="checkbox"/> Final return</div> <div><input type="checkbox"/> Amended return</div> <div><input checked="" type="checkbox"/> Address change</div> <div><input type="checkbox"/> Name change</div>		D 1. Foreign organizations, check here 2. Foreign organizations meeting the 85% test, check here and attach computation	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		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) \$ 59,367,859		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here	
J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) (Part I, column (d) must be on cash basis)			

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(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 <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	1,478,352	1,478,352		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	1,000,810			
	b Gross sales price for all assets on line 6a	7,832,518			
	7 Capital gain net income (from Part IV, line 2)		1,000,810		
	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)	351,739	3,594		
	12 Total. Add lines 1 through 11	2,830,901	2,482,756		
	13 Compensation of officers, directors, trustees, etc	0	0		0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)	21,529	21,529		0
	b Accounting fees (attach schedule)				
	c Other professional fees (attach schedule)	204,360	149,379		54,981
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	29,397	21,897		0
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings	23,066	0		23,066
	22 Printing and publications				
	23 Other expenses (attach schedule)	197,202	0		197,202
	24 Total operating and administrative expenses. Add lines 13 through 23	475,554	192,805		275,249
	25 Contributions, gifts, grants paid	2,741,300			2,741,300
	26 Total expenses and disbursements. Add lines 24 and 25	3,216,854	192,805		3,016,549
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-385,953			
	b Net investment income (if negative, enter -0-)		2,289,951		
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	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing			
	2 Savings and temporary cash investments	2,712,796	1,057,980	1,057,980
	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)	43,974,896	43,882,732	43,882,732
	c Investments—corporate bonds (attach schedule)	2,803,218	2,934,141	2,934,141
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	9,659,845	11,093,006	11,093,006
	14 Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)	150,000	400,000	400,000	
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	59,300,755	59,367,859	59,367,859	
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 ▶ <input type="checkbox"/> 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 ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	59,300,755	59,300,755	
	28 Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29 Retained earnings, accumulated income, endowment, or other funds	0	67,104	
	30 Total net assets or fund balances (see instructions)	59,300,755	59,367,859	
31 Total liabilities and net assets/fund balances (see instructions) .	59,300,755	59,367,859		

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	59,300,755
2 Enter amount from Part I, line 27a	2	-385,953
3 Other increases not included in line 2 (itemize) ▶ _____	3	1,439,396
4 Add lines 1, 2, and 3	4	60,354,198
5 Decreases not included in line 2 (itemize) ▶ _____	5	986,339
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	59,367,859

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)
1 a PUBLICALLY TRADED SECURITIES			
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 7,832,518		6,831,708	1,000,810
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			1,000,810
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	<div style="display: flex; align-items: center;"> <div style="font-size: 2em; margin-right: 5px;">{</div> <div> If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 </div> <div style="font-size: 2em; margin-left: 5px;">}</div> </div>	2	1,000,810
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	<div style="display: flex; align-items: center;"> <div style="font-size: 2em; margin-right: 5px;">{</div> <div></div> <div style="font-size: 2em; margin-left: 5px;">}</div> </div>	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	2,995,208	61,131,794	0 048996
2014	2,807,969	62,041,873	0 045259
2013	2,640,653	57,319,731	0 046069
2012	2,648,672	53,084,393	0 049895
2011	2,482,248	53,250,132	0 046615
2 Total of line 1, column (d)			2 0 236834
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 047367
4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5			4 57,828,769
5 Multiply line 4 by line 3			5 2,739,175
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 22,900
7 Add lines 5 and 6			7 2,762,075
8 Enter qualifying distributions from Part XII, line 4			8 3,266,549

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

Part 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 <input type="checkbox"/> 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 <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	22,900
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	22,900
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	22,900
6	Credits/Payments		
a	2016 estimated tax payments and 2015 overpayment credited to 2016	6a	52,500
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	52,500
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> 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	29,600
11	Enter the amount of line 10 to be Credited to 2017 estimated tax <input type="checkbox"/> 29,600 Refunded <input type="checkbox"/>	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)? <i>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</i>	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 <input type="checkbox"/> \$ 0 (2) On foundation managers <input type="checkbox"/> \$ 0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ 0		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>	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? <i>If "Yes," attach a conformed copy of the changes</i>	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? <i>If "Yes," attach the statement required by General Instruction T</i>	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? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> MA		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i> .	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)? <i>If "Yes," complete Part XIV</i>	9	No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	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	Yes	
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 ▶ TMFGRANTS ORG/HOOD	13	Yes	
14	The books are in care of ▶ US TRUST FIDUCIARY TAX SERVICES Telephone no ▶ (617) 695-9439			

Located at **▶** 225 FRANKLIN STREET BOSTON MA ZIP+4 **▶** 02110

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year ▶ 15		
16	At any time during calendar year 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? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," enter the name of the foreign country ▶	16	Yes No No

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

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

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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> 1b			No
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? <input type="checkbox"/> 1c			No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions) <input type="checkbox"/> 2b			
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 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). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 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))? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (3) Provide a grant to an individual for travel, study, or other similar purposes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. ▶ <input type="checkbox"/>	5b		No
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? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If "Yes," attach the statement required by Regulations section 53.4945–5(d) </i>			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If "Yes" to 6b, file Form 8870</i>	6b		No
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7b		

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

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table				
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(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
HEALTH RESOURCES IN ACTION 95 BERKELEY STREET NO 201 BOSTON, MA 02116	ADMINISTRATIVE FEES	149,756
US TRUST 225 FRANKLIN STREET BOSTON, MA 02110		
STATE STREET CORPORATION 1 LINCOLN STREET BOSTON, MA 02111	INVESTMENT CUSTODIAN FEES	109,192
	INVESTMENT FEES	98,698
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 NONINVASIX - GALVESTON, TX CONVERTIBLE PROMISSORY NOTE	150,000
2 ALDATU BIOSCIENCES - ALLSTON, MA CONVERTIBLE PROMISSORY NOTE	100,000
All other program-related investments. See instructions	
3	
Total. Add lines 1 through 3 ▶	250,000

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	56,493,049
b	Average of monthly cash balances.	1b	2,216,361
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	58,709,410
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	58,709,410
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	880,641
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	57,828,769
6	Minimum investment return. Enter 5% of line 5.	6	2,891,438

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	2,891,438
2a	Tax on investment income for 2016 from Part VI, line 5.	2a	22,900
b	Income tax for 2016 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	22,900
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	2,868,538
4	Recoveries of amounts treated as qualifying distributions.	4	329,441
5	Add lines 3 and 4.	5	3,197,979
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	3,197,979

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	3,016,549
b	Program-related investments—total from Part IX-B.	1b	250,000
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	3,266,549
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	5	22,900
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	3,243,649

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				3,197,979
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only.			2,998,345	
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>3,266,549</u>				
a Applied to 2015, but not more than line 2a			2,998,345	
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.				268,204
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			0	
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017				2,929,775
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. ▶

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

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

	Tax year	Prior 3 years			(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
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

ROBERT SEGE EXECUTIVE DIRECTOR
95 BERKELEY STREET NO 202
BOSTON, MA 02110
(617) 695-9439
GLOCKWOOD@HRIA.ORG

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

APPLICATION FORMS AVAILABLE AT WWW.TMFGRANTS.ORG/HOOD

c Any submission deadlines

ANNUALLY MARCH AND OCTOBER

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

RESTRICTED TO PEDIATRIC RESEARCH

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	2,741,300
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)

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

Form **990-PF** (2016)

Part XVII

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

[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 |
| | | |
| | | |
| | | |
| | | |

**Sign
Here**

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

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

**Paid
Preparer
Use Only**


Print/Type preparer's name CARLA M MCCALL CPA	Preparer's Signature	Date 2017-10-17	Check if self-employed <input type="checkbox"/>	PTIN P00535908
Firm's name ► ALEXANDER ARONSON FINNING & CO PC				Firm's EIN ► 04-2571780
Firm's address ► 50 WASHINGTON STREET WESTBOROUGH, MA 01581				Phone no (508) 366-9100

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
NEIL SMILEY	PRESIDENT AND TREASURER 1 00	0	0	0
95 BERKELEY STREET NO 202 BOSTON, MA 02116				
JOHN O PARKER JR	VICE PRESIDENT AND CLERK 1 00	0	0	0
95 BERKELEY STREET NO 202 BOSTON, MA 02116				
JEFFREY BOUTWELL PHD	TRUSTEE 1 00	0	0	0
95 BERKELEY STREET NO 202 BOSTON, MA 02116				
ROBERT C BOUTWELL	TRUSTEE 1 00	0	0	0
95 BERKELEY STREET NO 202 BOSTON, MA 02116				
BARBARA BULA	TRUSTEE 1 00	0	0	0
95 BERKELEY STREET NO 202 BOSTON, MA 02116				
BRENDON BULA	TRUSTEE 1 00	0	0	0
95 BERKELEY STREET NO 202 BOSTON, MA 02116				
CHARLES H HOOD II	PRESIDENT EMERITUS 1 00	0	0	0
95 BERKELEY STREET NO 202 BOSTON, MA 02116				
JOHN O PARKER	PAST PRESIDENT 1 00	0	0	0
95 BERKELEY STREET NO 202 BOSTON, MA 02116				

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>				
YALE SCHOOL OF MEDICINE 333 CEDAR STREET NEW HAVEN, CT 06510		SCIENTIFIC RESEARCH	CHILD HEALTH RESEARCH AWARD - HYPOTHALAMIC CIRCUITS UNDERLYING BRAIN DEVELOPMENT DURING CHILDHOOD	75,000
BETH ISRAEL DEACONESS MEDICAL CENTER 330 BROOKLINE AVENUE BOSTON, MA 02215		SCIENTIFIC RESEARCH	CHILD HEALTH RESEARCH AWARD - TARGETING FBW7 FOR THE TREATMENT OF PEDIATRIC T-CELL ACUTE LYMPHOBLASTIC LEUKEMIA (T-ALL)	75,000
BOSTON CHILDREN'S HOSPITAL 300 LONGWOOD AVENUE BOSTON, MA 02115		SCIENTIFIC RESEARCH	CHILD HEALTH RESEARCH AWARD - HOST AND BACTERIAL FACTORS IN STAPHYLOCOCCUS AUREUS SKIN INFECTIONS IN AUTOSOMAL DOMINANT-HYPER IGE SYNDROME	75,000
BOSTON CHILDREN'S HOSPITAL 300 LONGWOOD AVENUE BOSTON, MA 02115		SCIENTIFIC RESEARCH	CHILD HEALTH RESEARCH AWARD - RESPONSIVENESS OF THE PEDIATRIC EVALUATION OF DISABILITY INVENTORY COMPUTER ADAPTIVE TEST IN CHILDREN WITH CEREBRAL PALSY	75,000
BOSTON UNIVERSITY 881 COMMONWEALTH AVENUE BOSTON, MA 02215		SCIENTIFIC RESEARCH	CHILD HEALTH RESEARCH AWARD - IMPROVING CHILD-CAREGIVER INTERACTIONS FOR YOUNG CHILDREN WITH AUTISM	75,000
Total ► 3a				2,741,300


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>				
UNIVERSITY OF MASSACHUSETTS MEDICAL SCHOOL 55 LAKE AVENUE NORTH WORCESTER, MA 01655		SCIENTIFIC RESEARCH	"CHILD HEALTH RESEARCH AWARD - HOMEOSTATIC REGULATION OF INNATE IMMUNE ACTIVATION IN INTESTINAL	75,000
UCONN HEALTH 263 FARMINGTON AVENUE FARMINGTON, CT 06030		SCIENTIFIC RESEARCH	CHILD HEALTH RESEARCH AWARD - INFLAMMATORY MECHANISMS IN ENTERIC BACTERIAL DISEASE	75,000
MGH CENTER FOR REGENERATIVE MEDICINE 55 FRUIT STREET BOSTON, MA 02114		SCIENTIFIC RESEARCH	CHILD HEALTH RESEARCH AWARD - THE ROLE OF A NOVEL PATHWAY IN VERTEBRATE TENDON DEVELOPMENT	75,000
YALE SCHOOL OF MEDICINE 333 CEDAR STREET NEW HAVEN, CT 06510		SCIENTIFIC RESEARCH	CHILD HEALTH RESEARCH AWARD - RESPONSIVENESS OF THE PEDIATRIC EVALUATION OF DISABILITY INVENTORY COMPUTER ADAPTIVE TEST IN CHILDREN WITH CEREBRAL PALSY	75,000
DANA-FARBER CANCER INSTITUTE 450 BROOKLINE AVENUE BOSTON, MA 02215		SCIENTIFIC RESEARCH	CHILD HEALTH RESEARCH AWARD - MECHANISM OF STING SIGNALING AND AUTO-ACTIVATION DURING PEDIATRIC INFLAMMATORY DISEASE	75,000
Total 3a				2,741,300

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>				
YALE UNIVERSITY 149 ELM STREET NEW HAVEN, CT 06511		SCIENTIFIC RESEARCH	CHILD HEALTH RESEARCH AWARD - TARGETING BACTERIAL INFECTIONS IN CYSTIC FIBROSIS BY IMAGING ELECTRICAL INTERACTIONS BETWEEN HOST SURFACE AND A PATHOGEN	75,000
BOSTON CHILDREN'S HOSPITAL 300 LONGWOOD AVENUE BOSTON, MA 02115		SCIENTIFIC RESEARCH	CHILD HEALTH RESEARCH AWARD - ANTIBIOTIC-FREE TREATMENT AND PROPHYLAXIS OF OTITIS MEDIA	75,000
BRANDEIS UNIVERSITY 415 SOUTH STREET WALTHAM, MA 02453		SCIENTIFIC RESEARCH	CHILD HEALTH RESEARCH AWARD - REGULATION OF MRNA TRANSLATION INITIATION IN DEVELOPMENT	75,000
BRIGHAM AND WOMEN'S HOSPITAL 75 FRANCIS STREET BOSTON, MA 02115		SCIENTIFIC RESEARCH	CHILD HEALTH RESEARCH AWARD - USING MOBILE HEALTH TECHNOLOGY TO IMPROVE THE CONTINUUM OF NEONATAL CARE IN RURAL GUATEMALA	75,000
BOSTON CHILDREN'S HOSPITAL 300 LONGWOOD AVENUE BOSTON, MA 02115		SCIENTIFIC RESEARCH	CHILD HEALTH RESEARCH AWARD - ZEBRAFISH MODELS OF PCDH19-RELATED PEDIATRIC EPILEPSY	75,000
Total 				2,741,300
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>				
YALE SCHOOL OF MEDICINE 333 CEDAR STREET NEW HAVEN, CT 06510		SCIENTIFIC RESEARCH	CHILD HEALTH RESEARCH AWARD - BRAIN MECHANISMS UNDERLYING COGNITIVE DEVELOPMENT DURING CHILDHOOD	75,000
UNIVERSITY OF VERMONT COLLEGE OF MEDICINE 89 BEAUMONT AVENUE BURLINGTON, VT 05405		SCIENTIFIC RESEARCH	CHILD HEALTH RESEARCH AWARD - THE EFFECTS OF INCREASED INOCULUM ON ORAL ROTAVIRUS VACCINE TAKE AND IMMUNOGENICITY	75,000
UNIVERSITY OF MASSACHUSETTS MEDICAL SCHOOL 55 LAKE AVENUE NORTH WORCESTER, MA 01655		SCIENTIFIC RESEARCH	CHILD HEALTH RESEARCH AWARD - THE FUNCTION OF IMMUNE CELLS AND SENSORY EXPERIENCE ON BRAIN CIRCUIT DEVELOPMENT	75,000
MASSACHUSETTS GENERAL HOSPITAL 55 FRUIT STREET BOSTON, MA 02114		SCIENTIFIC RESEARCH	CHILD HEALTH RESEARCH AWARD - REMOTE DIAGNOSIS OF PEDIATRIC EPILEPSY THROUGH A SMARTPHONE-BASED EEG	75,000
BOSTON CHILDREN'S HOSPITAL 300 LONGWOOD AVENUE BOSTON, MA 02115		SCIENTIFIC RESEARCH	CHILD HEALTH RESEARCH AWARD - IDENTIFYING MECHANISMS OF CARTILAGE HOMEOSTASIS AND DEGENERATION THROUGH THE USE OF PATIENT SPECIFIC IPSCS	75,000
Total ► 3a				2,741,300

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>				
WHITEHEAD INSTITUTE FOR BIOMEDICAL RESEARCH 9 CAMBRIDGE CENTER CAMBRIDGE, MA 02142		SCIENTIFIC RESEARCH	PEDIATRIC FELLOWSHIP - DISSECTING MOLECULAR MECHANISMS UNDERLYING ERYTHROID PROGENITOR BFU-E SELF-RENEWAL	52,000
UNIVERSITY OF MASSACHUSETTS MEDICAL SCHOOL 55 LAKE AVENUE NORTH WORCESTER, MA 01655		SCIENTIFIC RESEARCH	PEDIATRIC FELLOWSHIP - EPIGENETIC INHERITANCE OF PATERNAL ENVIRONMENTAL CONDITIONS"	53,675
BOSTON CHILDRENS HOSPITAL 300 LONGWOOD AVENUE BOSTON, MA 02115		SCIENTIFIC RESEARCH	PEDIATRIC FELLOWSHIP - MODELING AND DISRUPTING NON-CODING REGULATORY DNA SEQUENCES TO INFORM SICKLE CELL DISEASE THERAPY	55,625
YALE UNIVERSITY 149 ELM STREET NEW HAVEN, CT 06511		SCIENTIFIC RESEARCH	MAJOR GRANT - DISCOVERING GENE REGULATORY NETWORKS IN EARLY HUMAN BRAIN DEVELOPMENT THAT CONTRIBUTE TO AUTISM SPECTRUM DISORDERS	180,000
UMASS MEDICAL SCHOOL 55 LAKE AVENUE NORTH WORCESTER, MA 01655		SCIENTIFIC RESEARCH	MAJOR GRANT - PROTECTION OF NEONATES FROM RESPIRATORY SYNCYTIAL VIRUS INFECTION	180,000
Total ► 3a				2,741,300

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 Paid during the year				
TUFTS MEDICAL CENTER 800 WASHINGTON STREET BOSTON, MA 02111		SCIENTIFIC RESEARCH	MAJOR GRANT - ESTABLISHING RISK IN NEONATAL ABSTINENCE SYNDROME	360,000
BOSTON CHILDRENS HOSPITAL 300 LONGWOOD AVENUE BOSTON, MA 02115		SCIENTIFIC RESEARCH	MAJOR GRANT - PRETERM BIRTH LUNG COMPLICATIONS AND STEM CELLS	360,000
Total 				2,741,300
3a				

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

TY 2016 Expenditure Responsibility Statement

Name: CHARLES H HOOD FOUNDATION

EIN: 04-3507847

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
NONINVASIX INC	1700 THE STRAND SUITE 1200 GALVESTON, TX 77555	2015-12-30	150,000	TO SUPPORT THE USE AND DEVELOPMENT OF THE COMPANY'S PEDIATRIC BRAIN OXYGENATION MONITORING SYSTEM, WHICH HAS THE POTENTIAL TO MORE ACCURATELY ASSESS THE RISK OF BRAIN HYPOXIA IN FETUSES AND NEONATES, THEREBY SUPPORTING THE ADVANCEMENT OF SCIENCE AND LESSENING THE BURDEN OF THE GOVERNMENT	150,000	NONE, SEE BELOW	PRI REPORTS 3/31/16, 6/30/16, 9/30/16&12/3/16 FS 12/31/16, BD REPORT 12/16	2016-09-12	THE TRUSTEES MEET WITH NONIVASIX MANAGEMENT ON A REGULAR BASIS, ATTEND BOARD MEETINGS AS AN OBSERVER AND REVIEW THE PRI REPORTS AND FINANCIALS TO THE TRUSTEES KNOWLEDGE, THE GRANTEE HAS NOT DIVERTED ANY OF THE FUNDS FROM THE PURPOSE OF THE GRANT NO ADDITIONAL FOLLOW UP DEEMED NECESSARY
ALDATU BIOSCIENCES	C/O HARVARD LIFELAB 127 WESTERN AVE ALLSTON, MA 02134	2016-02-23	100,000	TO SUPPORT THE USE AND DEVELOPMENT OF A SIMPLE, RAPID, THERMOSTABLE KIT THAT IDENTIFIES CLINICALLY ACTIONABLE HIV MUTATIONS FOUND IN PATIENTS FAILING A FIRST-LINE DRUG REGIMEN, THEREBY SUPPORTING THE ADVANCEMENT OF SCIENCE AND RELIEF OF THE POOR, DISTRESSED AND UNDERPRIVILEGED	100,000	NONE SEE BELOW	DECEMBER 31	2016-12-31	THE TRUSTEES MEET WITH ALDATU BIOSCIENCE, INC. MANAGEMENT ON A REGULAR BASIS AND REVIEW THE PRI REPORTS AND FINANCIALS TO THE TRUSTEES KNOWLEDGE, THE GRANTEE HAS NOT DIVERTED ANY OF THE FUNDS FROM THE PURPOSE OF THE GRANT NO ADDITIONAL FOLLOW UP DEEMED NECESSARY
NONINVASIXINC	1700 THE STRAND SUITE 1200 GALVESTON, TX 77555	2016-07-26	150,000	TO SUPPORT THE USE AND DEVELOPMENT OF THE COMPANY'S PEDIATRIC BRAIN OXYGENATION MONITORING SYSTEM, WHICH HAS THE POTENTIAL TO MORE ACCURATELY ASSESS THE RISK OF BRAIN HYPOXIA IN FETUSES AND NEONATES, THEREBY SUPPORTING THE ADVANCEMENT OF SCIENCE AND LESSENING THE BURDEN OF THE GOVERNMENT	150,000	NONE SEE BELOW	PRI REPORTS 3/31/16, 6/30/16, 9/30/16&12/3/16 FS 12/31/16, BD REPORT 12/16	2016-09-12	THE TRUSTEES MEET WITH NONIVASIX MANAGEMENT ON A REGULAR BASIS, ATTEND BOARD MEETINGS AS AN OBSERVER AND REVIEW THE PRI REPORTS AND FINANCIALS TO THE TRUSTEES KNOWLEDGE, THE GRANTEE HAS NOT DIVERTED ANY OF THE FUNDS FROM THE PURPOSE OF THE GRANT NO ADDITIONAL FOLLOW UP DEEMED NECESSARY

TY 2016 Investments Corporate Bonds Schedule

Name: CHARLES H HOOD FOUNDATION

EIN: 04-3507847

Name of Bond	End of Year Book Value	End of Year Fair Market Value
FIXED INCOME	2,934,141	2,934,141

TY 2016 Investments Corporate Stock Schedule**Name:** CHARLES H HOOD FOUNDATION**EIN:** 04-3507847

Name of Stock	End of Year Book Value	End of Year Fair Market Value
DOMESTIC EQUITIES	36,595,570	36,595,570
FOREIGN SECURITIES	7,287,162	7,287,162

TY 2016 Investments - Other Schedule**Name:** CHARLES H HOOD FOUNDATION**EIN:** 04-3507847

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
LOOMIS SAYLES MUTUAL FUND	FMV	7,706,460	7,706,460
HEDGE FUNDS	FMV	1,433,480	1,433,480
REAL ESTATE	FMV	1,480,647	1,480,647
COMMODITIES	FMV	472,419	472,419

TY 2016 Legal Fees Schedule**Name:** CHARLES H HOOD FOUNDATION**EIN:** 04-3507847

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL EXPENSES	21,529	21,529		0

TY 2016 Other Assets Schedule

Name: CHARLES H HOOD FOUNDATION

EIN: 04-3507847

Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
PROGRAM RELATED INVESTMENTS	150,000	400,000	400,000

TY 2016 Other Decreases Schedule

Name: CHARLES H HOOD FOUNDATION

EIN: 04-3507847

Description	Amount
OUTSTANDING CHECKS	986,339

TY 2016 Other Expenses Schedule**Name:** CHARLES H HOOD FOUNDATION**EIN:** 04-3507847**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MASS PC FILING FEE	500	0		500
MISCELLANEOUS EXPENSES	1,078	0		1,078
HRIA ADMINISTRATIVE COSTS	149,755	0		149,755
MEMBERSHIPS	6,900	0		6,900
PROGRAM RELATED INVESTMENT ADMINISTRATIVE COSTS	11,932	0		11,932
MARKETING	16,875	0		16,875
75TH ANNIVERSARY EVENT	10,162	0		10,162

TY 2016 Other Income Schedule

Name: CHARLES H HOOD FOUNDATION

EIN: 04-3507847

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
OTHER INVESTMENT INCOME	3,594	3,594	3,594
RETURNED GRANTS	329,442		329,442
SETTLEMENT PROCEEDS	1,001		1,001
PRIOR-YEAR TAX REFUND	14,981		14,981
NONDIVIDEND DISTRIBUTIONS	2,721		2,721

TY 2016 Other Increases Schedule

Name: CHARLES H HOOD FOUNDATION

EIN: 04-3507847

Description	Amount
UNREALIZED GAINS	1,439,396

TY 2016 Other Professional Fees Schedule**Name:** CHARLES H HOOD FOUNDATION**EIN:** 04-3507847

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT ADVISORY FEES - STATE STREET	94,783	94,783		0
INVESTMENT FEES - US TRUST	109,192	54,596		54,596
CONSULTING SERVICES	385	0		385

TY 2016 Taxes Schedule**Name:** CHARLES H HOOD FOUNDATION**EIN:** 04-3507847

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES	21,897	21,897		0
EXCISE TAX ESTIMATES	7,500	0		0