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2016

OMB No 1545-0052

## **Return of Private Foundation**

Form 990-PF

Department of the Treasury

Internal Revenue Service

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

Do not enter social security numbers on this form as it may be made public.
 Information about Form 990-PF and its instructions is at <a href="www.irs.gov/form990pf">www.irs.gov/form990pf</a>.

Open to Public Inspection

		ndar year 2016, or tax year beginning 01-01-20	)16 , aı	nd ending 12-31			
		indation COHEN STANZLER CHARITABLE TRUST		04-6955868	lentification numbe	er	
Mirron	har ana	street (or P.O. box number if mail is not delivered to street address)	Room/suite	04-6933868			
		MONWEALTH AVENUE UNIT 1	Room/suite	'	ımber (see ınstructio	ns)	
City	or town	, state or province, country, and ZIP or foreign postal code	(617) 731-122	(617) 731-1222			
		Á 02116		C If exemption	application is pendin	ng, check here	
G Ch	neck al	l that apply 🔲 Initial return 🔲 Initial return of a	former public charity	<b>D 1.</b> Foreign oi	rganızatıons, check h	ere 🕨 🔲	
		Final return Amended return			rganizations meeting		
		☐ Address change ☐ Name change			undation status was	· —	
		pe of organization ✓ Section 501(c)(3) exempt private t			on 507(b)(1)(A), chec		
		4947(a)(1) nonexempt charitable trust Other taxable  (et value of all assets at end J Accounting method	☑ Cash ☐ Accru	F If the found	ation is in a 60-mont	h termination 🖂	
of '	year <i>(f</i>	from Part II, col (c), \$ 5,685,806			on 507(b)(1)(B), chec		
D-2	rt I			<u> </u>	T	(d) Dishiman anta	
Га		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)	
	1	Contributions, gifts, grants, etc , received (attach	70				
	,	schedule)  Check   If the foundation is <b>not</b> required to attach					
	2	Sch B					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	109,434	109,434			
	5a b	Net rental income or (loss)			<del> </del>		
<u>e</u>	6a	Net gain or (loss) from sale of assets not on line 10	62,396	5			
Revenue	ь	Gross sales price for all assets on line 6a 361,116		62.206			
ă	7 8	Capital gain net income (from Part IV, line 2)		62,396			
	9	Income modifications			<u> </u>		
	10a	Gross sales less returns and allowances					
	ь	Less Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)	171 000	171.020			
	12	Total. Add lines 1 through 11	171,900				
	13 14	Other employee salaries and wages	0		<del> </del>		
Š	15	Pension plans, employee benefits			<u> </u>		
nse	16a	Legal fees (attach schedule)					
<del>x</del>	ь	Accounting fees (attach schedule)	2,320	1,160	,	1,160	
Operating and Administrative Expenses	С	Other professional fees (attach schedule)					
a [[	17	Interest	1				
<u></u>	18	Taxes (attach schedule) (see instructions)	1,813	1,743	-	70	
<u>=</u>	19	Depreciation (attach schedule) and depletion			-		
Ad	20 21	Occupancy			<del> </del>		
פתכ	22	Printing and publications					
<u>5</u> .	23	Other expenses (attach schedule)	38,860	38,792		68	
rat.	24	Total operating and administrative expenses.					
<u>8</u>		Add lines 13 through 23	42,993			1,298	
_	25	Contributions, gifts, grants paid	291,000	1	-	291,000	
	26	<b>Total expenses and disbursements.</b> Add lines 24 and 25	333,993	41,695	<u> </u>	292,298	
	27	Subtract line 26 from line 12					
	a	Excess of revenue over expenses and disbursements	-162,093	3			
	ь	Net investment income (If negative, enter -0-)		130,135	·		
	С	Adjusted net income(If negative, enter -0-)					
or	Daner	work Reduction Act Notice, see instructions.		Cat No. 11289	Y = ===	rm <b>990-PF</b> (2016)	

8,243

2,230,265

1,726,373

29,082

4,072,604

4.072.604

4,072,604

4,072,604

6,896

2,230,007

1,523,975

22,073

3,910,511

3,910,511

3,910,511 3,910,511

1

2

3

4

5

6

4,072,604

-162,093

3,910,511

3,910,511

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0

7,741

3,938,638

1,546,971

64,896

5,685,806

Prepaid expenses and deferred charges . . . . . . .

Investments—land, buildings, and equipment basis ▶

Less accumulated depreciation (attach schedule) ▶ \_\_\_\_\_

Total assets (to be completed by all filers—see the

Less accumulated depreciation (attach schedule) ▶ Investments—mortgage loans . . . . . . . . . . . .

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe -

Other liabilities (describe ▶\_

Unrestricted

Temporarily restricted

Permanently restricted . . . .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize) ▶ \_\_\_\_

Investments—U S and state government obligations (attach schedule)

Investments—corporate bonds (attach schedule) . . . . . . .

Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule). . . . . .

**Total liabilities**(add lines 17 through 22) . . . . . . . . . . .

Foundations that follow SFAS 117, check here

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here ▶

Paid-in or capital surplus, or land, bldg, and equipment fund

Capital stock, trust principal, or current funds . . . . . . . . . .

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions) . . . . .

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Analysis of Changes in Net Assets or Fund Balances

	5
	6
	7
2	8
Assets	9
As	10a

c

11

12

13

14

15

16

17 18

19 20

21

22 23

24

25

28

29

31

Part III

2

3

Liabilities

Balances

Fund 26

5

Assets 27

Net 30 (or allowable)

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

(j)

Gross sales price

FMV as of 12/31/69

in Part I, line 8

(a) Base period years Calendar

year (or tax year beginning in) 2015

2014

2013

2012

2011

2 Total of line 1, column (d)

5 Multiply line 4 by line 3

instructions

**7** Add lines 5 and 6 . . .

а b C d e

b C d e

Part V

361,116

Capital gain net income or (net capital loss)

e, )	How acquired P—Purchase D—Donation	<b>(c)</b> Date acquired (mo , day, yr )	<b>(d)</b> Date sold (mo , day, yr )
	Р		
	(g)		1)
Cost or	other basis	Gain o	r (loss)
plus expe	ense of sale	(e) plus (f)	mınus (g)
	298,720		62,396

Adjusted basis Excess of col (1) as of 12/31/69 over col (j), if any col (k), but not less than -0-) or

Losses (from col (h))

**(I)** Gains (Col (h) gain minus

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

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

Adjusted qualifying distributions

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

4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5

6 Enter 1% of net investment income (1% of Part I, line 27b)

8 Enter qualifying distributions from Part XII, line 4

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

298,295

350,945

253,583

250,000

286,500

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-

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 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

Net value of noncharitable-use assets

If gain, also enter in Part I, line 7

If (loss), enter -0- in Part I, line 7

(k)

5,886,060

5,733,300

5,272,279

4,855,159

4,815,566

2

4

5

6

7

2

3

(d)

Distribution ratio

(col (b) divided by col (c))

Page 3

62,396

62,396

0 050678

0 061212

0 048097

0 051492

0 059495

0 270974

0 054195

5,678,868

307,766

309,067

292,298

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1,301

a personal benefit contract?			⊔ Yes 💟	No
<b>b</b> Did the foundation, during the year,	pay premiums, directly or inc	lirectly, on a personal be	nefit contract?	6b No
If "Yes" to 6b, file Form 8870				
<b>7a</b> At any time during the tax year, was	s the foundation a party to a p	prohibited tax shelter trai	nsaction? Yes	No
<b>b</b> If yes, did the foundation receive an	ly proceeds or have any net ir	come attributable to the	transaction?	7b
and Contractors	Officers, Directors, Trus			nployees,
1 List all officers, directors, trustee	es, foundation managers a	nd 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
MARJORIE COHEN STANZLER	TRUSTEE	0	О	0
245 COMMONWEALTH AVENUE UNIT 1 BOSTON, MA 02116	1 00			
PAUL STANZLER	TRUSTEE	0	0	0
245 COMMONWEALTH AVENUE UNIT 1 BOSTON, MA 02116	1 00			
2 Compensation of five highest-pair	id employees (other than t	hose included on line 1	.—see instructions). If no	ne, enter "NONE."
(a) Name and address of each employee pa more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
NONE				
				_
Total number of other employees paid over	er \$50,000	<u> </u>		0
				Form <b>990-PF</b> (2016)

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional service	ces (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		
<b>Total</b> 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 rel		r of Expenses
organizations and other beneficiaries served, conferences convened, research papers produ	ucea, etc	
1		
2		
2		
3		
4		
4		
Part IX-B Summary of Program-Related Investments (see	· · · · · · · · · · · · · · · · · · ·	
Describe the two largest program-related investments made by the foundation during t	ne tax year on lines 1 and 2	Amount
1		
2		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3		▶ 0
<u> </u>		Form <b>990-PF</b> (2016)

1a

1b

2

За 3b

4

5

292,298

292,298

292.298

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Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4. . . . . . . . . .

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . . . . . . . . .

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

1

2

3

4

5

b

2 Undistributed income, if any, a Enter amount for 2015 only. **b** Total for prior years

From 2011. . . .

**b** From 2012. . . . c From 2013. .

**d** From 2014. . . .

XII, line 4 > \$

indicated below:

e From 2015. . . . .

Part

Page 9

281.340

281.340

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•	,
XIII	Undistributed Income (see instructions)

Excess distributions carryover, if any, to 2016

f Total of lines 3a through e. . . . . . .

required—see instructions). . . . . . . . . .

same amount must be shown in column (a) )

(If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a . . . .

9 Excess distributions carryover to 2017.

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. .

**b** Prior years' undistributed income Subtract line 4b from line 2b . . . . . . . c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . . . d Subtract line 6c from line 6b Taxable amount —see instructions . . . . . . . . . . . . . e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions . . . . . . . f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017 . . . . . 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . . . . . . 8 Excess distributions carryover from 2011 not

4 Qualifying distributions for 2016 from Part

a Applied to 2015, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). . . . .

Distributable amount for 2016 from Part XI, line 7	
Undistributed income, if any, as of the end of 2016	
Forting and country of the 2015 and a	ı

47,971 31,780

144 67,590

9,565

31.780 144

67.590

9.565

10.958

(a)

Corpus

157,050

10.958

168.008

47.971

120,037

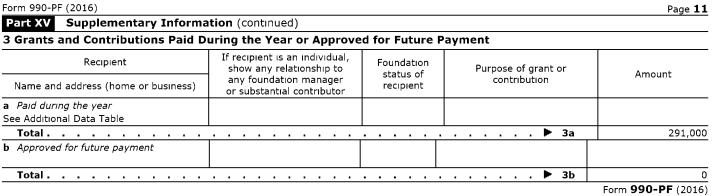
(b)

Years prior to 2015

(c)

2015

c Treated as distributions out of corpus (Election d Applied to 2016 distributable amount. . . . . e Remaining amount distributed out of corpus **5** Excess distributions carryover applied to 2016 6 Enter the net total of each column as



er gross	amounts unless otherwise indicated	Unrelated bu	siness income	Excluded by section	512, 513, or 514	(e) Related or exemp
Program	service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	function income (See instructions
		-				
е						
	<del></del>					
_	and contracts from government agencies	-				
Interes	st on savings and temporary cash					
	ments			14	100 434	
	tal income or (loss) from real estate			14	109,434	
	inanced property					
	ebt-financed property					
	ntal income or (loss) from personal property					
	r (loss) from sales of assets other than					
	r (loss) from sales of assets other than			18	62,396	
Net inco	ome or (loss) from special events					
	rofit or (loss) from sales of inventory					
	evenue <b>a</b>					
· —						
d						
d						
d e Subtota Total. / e worksh	Add line 12, columns (b), (d), and (e)	ns )			171,830 B	
d e Subtota Total. / e worksh	Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  Beet in line 13 instructions to verify calculations.  Belationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's ex	ns ) <b>e Accomplish</b> Income Is reporte	ment of Exemped in column (e) of	ot Purposes Part XVI-A contribut	ted importantly to	
d Subtota Total. / worksh rt XVI	Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  Lineet in line 13 instructions to verify calculations.  Relationship of Activities to the Explain below how each activity for which its contents.	ns ) <b>e Accomplish</b> Income Is reporte	ment of Exemped in column (e) of	ot Purposes Part XVI-A contribut	ted importantly to	
de Subtota Total. / e worksh	Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  Beet in line 13 instructions to verify calculations.  Belationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's ex	ns ) <b>e Accomplish</b> Income Is reporte	ment of Exemped in column (e) of	ot Purposes Part XVI-A contribut	ted importantly to	
d e Subtota Total. / e worksh rt XVI	Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  Beet in line 13 instructions to verify calculations.  Belationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's ex	ns ) <b>e Accomplish</b> Income Is reporte	ment of Exemped in column (e) of	ot Purposes Part XVI-A contribut	ted importantly to	
d Subtota Total. / worksh rt XVI	Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  Beet in line 13 instructions to verify calculations.  Belationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's ex	ns ) <b>e Accomplish</b> Income Is reporte	ment of Exemped in column (e) of	ot Purposes Part XVI-A contribut	ted importantly to	
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d e Subtota Total. / e worksh rt XVI	Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  Beet in line 13 instructions to verify calculations.  Belationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's ex	ns ) <b>e Accomplish</b> Income Is reporte	ment of Exemped in column (e) of	ot Purposes Part XVI-A contribut	ted importantly to	
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d Subtota Total. / worksh rt XVI	Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  Beet in line 13 instructions to verify calculations.  Belationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's ex	ns ) <b>e Accomplish</b> Income Is reporte	ment of Exemped in column (e) of	ot Purposes Part XVI-A contribut	ted importantly to	
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de Subtota Total. / e worksh	Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  Beet in line 13 instructions to verify calculations.  Belationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's ex	ns ) <b>e Accomplish</b> Income Is reporte	ment of Exemped in column (e) of	ot Purposes Part XVI-A contribut	ted importantly to	
d e Subtota Total. / e worksh art XVI ne No.	Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  Beet in line 13 instructions to verify calculations.  Belationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's ex	ns ) <b>e Accomplish</b> Income Is reporte	ment of Exemped in column (e) of	ot Purposes Part XVI-A contribut	ted importantly to	171,83
d e Subtota Total. / e worksh art XVI ne No.	Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  Beet in line 13 instructions to verify calculations.  Belationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's ex	ns ) <b>e Accomplish</b> Income Is reporte	ment of Exemped in column (e) of	ot Purposes Part XVI-A contribut	ted importantly to	

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

Part XVII	Exempt Organiz	zations				•			
		directly engage				on described in section 50 organizations?	1	Yes	No
a Transfers f	from the reporting found	dation to a non	icharitable ex	empt organization	of				
<b>(1)</b> Cash.							1a(1)		No
<b>(2)</b> Other	assets						1a(2)		No
<b>b</b> Other tran	sactions								
(1) Sales	of assets to a nonchari	table exempt o	rganızatıon.				1b(1)	)	No
(2) Purch	ases of assets from a n	oncharitable ex	xempt organiz	zation			1b(2)		No
(3) Renta	al of facilities, equipmen	t, or other ass	ets				1b(3)		No
	bursement arrangement						1b(4)		No
	or loan guarantees.    .						1b(5)		No
` '	mance of services or me	•	_				1b(6)		No
_	facilities, equipment, m		•				1c		No
						lways show the fair marke ed less than fair market v			
						ets, or services received	aiue		
	-								
(a) Line No	(b) Amount involved	(c) Name of no	ncharitable exe	mpt organization	(d) Description o	f transfers, transactions, and s	haring arra	angemen	ts
				+					
2a Is the four	ndation directly or indire	ctly affiliated v	vith, or relate	d to, one or more	tax-exempt orgai	nizations			
	in section 501(c) of the	•		•			☐Yes	<b>✓</b> N	o
	omplete the following so								
,	(a) Name of organizatio	n	(1	<b>b)</b> Type of organization	on .	(c) Description of rel	ationship		
T			<u> </u>	1.11		1 11 11 11			
						ring schedules and statem r than taxpayer) is based (			
	h preparer has any kno		<b>,</b>		FF (				
	*****			2017-05-12	*****		e IRS discu		
	Signature of officer or tr			Date	— ) <del></del>		e preparer		
		ustee		Date	▼ Title	(see in	str)? 🗹	Yes ⊔ N	10
	Print/Type preparer's	name P	reparer's Sigi	nature	Date	PTIN			
						Check if self-	P0133	0378	
	THEODORE S SAME	ET CPA				employed ▶ ☐	10155	0370	
Paid									
Preparer		ET & COMPANY	PC		ı	F.,	ETN PO	1_20270	
Use Only						Firms	EIN ►04	-302/6	
	Firm's address ► 13	30 BOYLSTON	STREET						
	СН	ESTNUT HILL,	MA 0246721	11		Phone	no (617	7) 731-:	1222

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	Foundation status of recipient	Purpose of grant or contribution	Amount			
Name and address (home or business)	or substantial contributor	recipient					
a Paid during the year							
AMERICAN JEWISH COMMITTEES 126 HIGH STREET BOSTON, MA 02110	NONE	CHARITY	TO AID GENERAL OPERATIONS	10,000			
ANTI-DEFAMATION LEAGUE 605 THIRD AVENUE NEW YORK, NY 10158	NONE	CHARITY	TO AID GENERAL OPERATIONS	5,000			
BOTTOM LINE FOUNDATION 500 AMORY STREET BOSTON, MA 02110	NONE	CHARITY	TO AID GENERAL OPERATIONS	10,000			
THE SECOND STEP PO BOX 600213 NEWTONVILLE, MA 02460	NONE	CHARITY	TO AID OPERATIONS	10,000			
UNIVERSITY OF RHODE ISLAND 45 UPPER COLLEGE RD KINGSTON, RI 02881	NONE	CHARITY	TO AID GENERAL OPERATIONS	2,000			
CONGREGATION KEHILLA 1300 GRAND AVENUE PIEDMONT, CA 94610	NONE	CHARITY	RELIGIOUS	10,000			
DOCTORS WITHOUT BORDERS 333 7TH AVENUE 2ND FLOOR NEW YORK, NY 10001	NONE	CHARITY	TO AID GENERAL OPERATIONS	1,000			
FACING HISTORY 14 EAST 4TH STREET SUITE 3003 NEW YORK, NY 10012	NONE	CHARITY	TO AID GENERAL OPERATIONS	5,000			
GLOBAL CAMPS AFRICA 1606 WASHINGTON PLAZA RESTON, VA 20190	NONE	CHARITY	TO AID OPERATIONS	500			
HEBREW SENIOR LIFE 1200 CENTRE STREET ROSLINDALE, MA 02131	NONE	CHARITY	TO AID OPERATIONS	5,000			
HORIZONS FOR HOMELESS CHILDREN 1705 COLUMBUS AVENUE ROXBURY, MA 02119	NONE	CHARITY	TO AID GENERAL OPERATIONS	1,000			
FRIENDS FOREVER ONE MORGAN WAY DURHAM, NH 03824	NONE	CHARITY	TO AID GENERAL OPERATIONS	6,500			
AIDS ACTION COMMITTEE 75 AMORT STREET ROXBURY, MA 02119	NONE	CHARITY	TO AID GENERAL OPERATIONS	500			
MAKE A WISH FOUNDATION 1 BULFINCH PL 201 BOSTON, MA 02114	NONE	CHARITY	TO AID GENERAL OPERATIONS	3,000			
PARTNERS IN HEALTH 888 COMMONWEALTH AVE BOSTON, MA 02215	NONE	CHARITY	TO AID OPERATIONS	500			

291,000

Total .

3а

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment							
If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount				
any foundation manager or substantial contributor	recipient						
NONE	CHARITY	TO AID GENERAL OPERATIONS	10,000				
NONE	CHARITY	TO AID GENERAL OPERATIONS	10,000				
NONE	CHARITY	TO AID GENERAL OPERATIONS	500				
NONE	CHARITY	TO AID OPERATIONS	1,000				
NONE	CHARITY	TO AID GENERAL OPERATIONS	1,000				
NONE	CHARITY	TO AID GENERAL OPERATIONS	25,000				
NONE	CHARITY	RELIGIOUS	10,000				
NONE	CHARITY	TO AID GENERAL OPERATIONS	1,000				
NONE	CHARITY	TO AID GENERAL OPERATIONS	50,000				
NONE	UNIVERSITY	EDUCATIONAL	102,500				
NONE	CHARITY	TO AID GENERAL OPERATIONS	10,000				
	If recipient is an individual, show any relationship to any foundation manager or substantial contributor  NONE  NONE	If recipient is an individual, show any relationship to any foundation manager or substantial contributor  NONE  CHARITY  NONE  UNIVERSITY	If recipient is an individual, show any relationship to any foundation manager or substantial contributor  NONE  CHARITY  TO AID GENERAL OPERATIONS  NONE  UNIVERSITY  EDUCATIONAL				

3а

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TY 2016 Accounting Fees Schedule								
Name: MARJORIE COHEN STANZLER CHARITABLE TRUST EIN: 04-6955868								
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes				
SAMET & COMPANY	2,320	1,160		1,160				

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491135032867
TY 2016 Investments Corporat	e Bonds Sche	dule

Name: MARJORIE COHEN STANZLER CHARITABLE TRUST ETN: 04-6055868

EIN. 04-0333000				
Name of Bond	End of Year Book Value	End of Year Fair Market Value		
CORPORATE BONDS	1,523,975	1,546,971		

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TY 2016 Investments Corporat	e Stock Sched	lule

Name: MARJORIE COHEN STANZLER CHARITABLE TRUST **EIN:** 04-6955868

Name of Stock	End of Year Book Value	End of Year Fair Market Value
MARKETARI E SECURITIES	2 230 007	3 938 638

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TY 2016 Investments Government Obligations Schedule					
Name:	MARJORIE CO	DHEN STANZLER CHARITABLE TRUST			
EIN:	04-6955868				
US Government Securities - End of Year Book Value:		6,896			
US Government Securities - End of Year Fair Market Value:		7,741			
State & Local Government Securities - End of Year Book Value:		0			
State & Local Government Securities - End of Year Fair Market Value:		0			

TY 2016 Investments - Other	Schedule
Name:	MARJORIE COHEN STANZLER CHARITABLE TRUST

DLN: 93491135032867

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<b>EIN:</b> 04-695.			
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
PUBLICLY TRADED PARTNERSHIP	FMV	22,073	64,896

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TY 2016 Other Expenses Schedule					
		EN STANZLER CH	IARITABLE TRUS	Т	
Cther Expenses Schedule	04-6955868				
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
INVESTMENT MANAGEMENT FEES	35.549	35,549		0	

3,206

37

68

3,206

OTHER INVESTMENT EXPENSES

ORDINARY LOSS FROM K-1

OFFICE EXPENSE

efile GRAPHIC print - DO NOT PRO	OCESS As Filed Data	-	DLI	N: 93491135032867	
TY 2016 Taxes Schedule					
N	<b>Name:</b> MARJORIE C	OHEN STANZLER	CHARITABLE TRU	ST	
<b>EIN:</b> 04-6955868					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
MA PC FILING FEE	70	0		70	
FOREIGN TAXES	635	635		0	
FEDERAL TAXES	1,108	1,108		0	