

Form **990-PF**
 Department of the Treasury
 Internal Revenue Service

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

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

OMB No 1545-0052
2016
Open to Public Inspection

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

Name of foundation STARITCH FOUNDATION INC		A Employer identification number 14-1827670	
Number and street (or P O box number if mail is not delivered to street address) PO BOX 1356		Room/suite	
		B Telephone number (see instructions) (518) 891-9797	
City or town, state or province, country, and ZIP or foreign postal code SARANAC LAKE, NY 129837356			
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
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 <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 1,869,034		J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	
F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>			

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)	109,192			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	1,825	1,825		
	4 Dividends and interest from securities	21,693	21,693		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	-39,516			
	b Gross sales price for all assets on line 6a 412,162				
	7 Capital gain net income (from Part IV, line 2)		164,384		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)	12,757	0			
12 Total. Add lines 1 through 11	105,951	187,902			
Operating and Administrative Expenses	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)				
	b Accounting fees (attach schedule)	10,500	10,500		0
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	2,215	2,215		0
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	8,290	8,290		0
	24 Total operating and administrative expenses. Add lines 13 through 23	21,005	21,005		0
	25 Contributions, gifts, grants paid	313,900			313,900
26 Total expenses and disbursements. Add lines 24 and 25	334,905	21,005		313,900	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	-228,954				
b Net investment income (if negative, enter -0-)		166,897			
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	-32,819	-4,750	-4,750
	2 Savings and temporary cash investments	182,023	339,570	339,570
	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 ▶ _____	60,000	0	0
	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)	1,525,774 <input type="checkbox"/>	1,189,036	1,330,792
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	115,678 <input type="checkbox"/>	97,826	203,132
	14 Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)	<input type="checkbox"/> 270 <input type="checkbox"/>	<input type="checkbox"/> 290 <input type="checkbox"/>	<input type="checkbox"/> 290	
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	1,850,926	1,621,972	1,869,034	
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	0	0	
	28 Paid-in or capital surplus, or land, bldg, and equipment fund	0	0	
29 Retained earnings, accumulated income, endowment, or other funds	1,850,926	1,621,972		
30 Total net assets or fund balances (see instructions)	1,850,926	1,621,972		
31 Total liabilities and net assets/fund balances (see instructions) .	1,850,926	1,621,972		

Part III Analysis of Changes in Net Assets or Fund Balances		
1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	1,850,926
2 Enter amount from Part I, line 27a	2	-228,954
3 Other increases not included in line 2 (itemize) ▶ _____	3	0
4 Add lines 1, 2, and 3	4	1,621,972
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	1,621,972

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				
(i) F M V as of 12/31/69			(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any
(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))				
a 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				
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 }		2 164,384
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		{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		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	75,850	1,745,327	0.043459
2014	141,775	1,518,149	0.093387
2013	118,950	1,373,324	0.086615
2012	141,650	1,289,523	0.109847
2011	138,450	1,288,957	0.107412
2 Total of line 1, column (d)			2 0.440720
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 0.088144
4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5			4 1,822,026
5 Multiply line 4 by line 3			5 160,601
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 1,669
7 Add lines 5 and 6			7 162,270
8 Enter qualifying distributions from Part XII, line 4			8 313,900

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	1,669
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2	0
3	Add lines 1 and 2.	3	1,669
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5	1,669
6	Credits/Payments		
a	2016 estimated tax payments and 2015 overpayment credited to 2016	6a	2,447
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	2,447
8	Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached	8	2
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	776
11	Enter the amount of line 10 to be Credited to 2017 estimated tax ▶ 776 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)? <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 ▶ \$ _____ 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? <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	No
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) ▶ NY _____		
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	Yes

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-14 regarding controlled entities, donor advised funds, public inspection requirements, and books in care.

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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.

Table with 3 columns: Question, Yes, No. Row 16 regarding interest in foreign countries.

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.

Main table with 3 columns: Question, Yes, No. Rows 1a-4b regarding Form 4720 exceptions and requirements.

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.

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

If "Yes," attach the statement required by Regulations section 53.4945–5(d)

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

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

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
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
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 N/A	0
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	1,584,347
b	Average of monthly cash balances.	1b	265,426
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	1,849,773
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	1,849,773
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	27,747
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,822,026
6	Minimum investment return. Enter 5% of line 5.	6	91,101

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	91,101
2a	Tax on investment income for 2016 from Part VI, line 5.	2a	1,669
b	Income tax for 2016 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	1,669
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	89,432
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	89,432
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	89,432

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	313,900
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	313,900
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	5	1,669
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	312,231

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				89,432
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only.			0	
b Total for prior years 20___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2016				
a From 2011.	74,194			
b From 2012.	78,810			
c From 2013.	52,860			
d From 2014.	68,558			
e From 2015.				
f Total of lines 3a through e.	274,422			
4 Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ <u>313,900</u>				
a Applied to 2015, but not more than line 2a			0	
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.				89,432
e Remaining amount distributed out of corpus	224,468			
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	498,890			
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				0
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).	74,194			
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	424,696			
10 Analysis of line 9				
a Excess from 2012.	78,810			
b Excess from 2013.	52,860			
c Excess from 2014.	68,558			
d Excess from 2015.				
e Excess from 2016.	224,468			

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))
See Additional Data Table

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 email address of the person to whom applications should be addressed

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

c Any submission deadlines

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

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

Recipient	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				313,900
b <i>Approved for future payment</i>				
Total ▶ 3b				0

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)
500 SH AIR PRODUCTS & CHEMICALS	D		2016-06-07
70 SH EXXON MOBIL CORP	D	2011-10-20	2016-06-07
100M GOLDMAN SACHS TR	P	2016-03-31	2016-08-30
100 SH INTUITIVE SURGICAL INC	D		2016-06-07
3991 SH MFC BANCORP LTD	D	2015-05-19	2016-06-07
9200 SH MFC BANCORP LTD	D		2016-06-07
265 UTS PLAINS ALL AMERICAN PIPELINE	P	2012-10-02	2016-06-07
750 SH TELEFLEX, INC	D		2016-06-07
35000 SH TIGERLOGIC CORP	P		2016-06-07
35000 SH TIGERLOGIC CORP	D	2015-05-19	2016-06-07

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)
72,812		218	72,594
6,360		23	6,337
100,000		100,000	0
63,460		2,176	61,284
7,383		2,382	5,001
17,461		31,940	-14,479
7,020		4,622	2,398
127,159		2,478	124,681
5,253		93,089	-87,836
5,254		10,850	-5,596

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	
			72,594
			6,337
			0
			61,284
			5,001
			-14,479
			2,398
			124,681
			-87,836
			-5,596

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
SALLY B RITCHIE P O BOX 1356 SARANAC LAKE, NY 129837356	SECRETARY/TREASURER 0 00	0	0	0
JAMES M RITCHIE P O BOX 1356 SARANAC LAKE, NY 129837356	PRESIDENT/DIRECTOR 0 00	0	0	0
DOROTHY R VALHOULI P O BOX 1356 SARANAC LAKE, NY 129837356	DIRECTOR 0 00	0	0	0
STEPHEN M RITCHIE P O BOX 1356 SARANAC LAKE, NY 129837356	DIRECTOR 0 00	0	0	0
SOLVEIG A HOLUM LYFORD P O BOX 1356 SARANAC LAKE, NY 129837356	DIRECTOR 0 00	0	0	0
CAROLYN R DONATELLO P O BOX 1356 SARANAC LAKE, NY 129837356	DIRECTOR 0 00	0	0	0
JAMES R VALHOULI P O BOX 1356 SARANAC LAKE, NY 129837356	DIRECTOR 0 00	0	0	0
ALEXANDER R VALHOULI P O BOX 1356 SARANAC LAKE, NY 129837356	DIRECTOR 0 00	0	0	0

Form 990PF Part XV Line 1a - 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).

SALLY B RITCHIE

JAMES M RITCHIE

DOROTHY R VALHOULI

ALEXANDER R VALHOULI

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>				
ADIRONDACK FOUNDATION PO BOX 288 LAKE PLACID, NY 12946	N/A	PUBLIC CHARITY	DEATH WITH DIGNITY EDUCATION	11,250
ADIRONDACK MEDICAL CENTER P O BOX 471 SARANAC LAKE, NY 12983	N/A	PUBLIC CHARITY	SUPPORT THE COMMUNITY HOSPITAL	1,500
ADIRONDACK NATURE CONSERVANCYLAND TRUST P O BOX 65 KEENE VALLEY, NY 12943	N/A	PUBLIC CHARITY	PRESERVATION AND PROTECTION OF ADIRONDACK PARK	500
AMERICAN RED CROSS 13 GUY WAY PLATTSBURGH, NY 12901	N/A	PUBLIC CHARITY	SUPPORT REGIONAL RELIEF EFFORTS FOR NEEDY FAMILIES	4,000
BOWDOIN COLLEGE 255 MAIN STREET BRUNSWICK, ME 04011	N/A	PRIVATE EDUCATION IN	SUPPORT FOR EDUCATION	1,500
Total ▶ 3a				313,900

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>				
BU SCHOOL OF SOCIAL WORK 264 BAY STATE ROAD BOSTON, MA 02215	N/A	PRIVATE EDUCATION IN	EDUCATIONAL ASSISTANCE TO A QUALIFIED STUDENT IN A SOCIAL WORK PROGRAM	1,000
BURKE MOUNTAIN ACADEMY P O BOX 78 E BURKE, VT 05832	N/A	PRIVATE EDUCATION IN	SUPPORT EDUCATIONAL PROGRAMS	700
CROW 3883 SANIBEL CROAD SANIBEL ISLAND, FL 33957	N/A	PUBLIC CHARITY	SAVING WILDLIFE THROUGH CARE, EDUCATION, AND COLLABORATION	1,000
CAMP MERIDIAN 789 CENTRAL AVENUE DOVER, NH 038200654	N/A	PUBLIC CHARITY	SUMMER CAMP FOR HEART DISEASE PATIENTS	1,250
CHILDREN'S MUSEUM OF NH P O BOX 654 DOVER, NH 038200654	N/A	PUBLIC CHARITY	MUSEUM TO APPEAL TO CHILDREN	3,000
Total ▶ 3a				313,900

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>				
CHURCH OF THE ASCENSION P O BOX 271 LAKE CLEAR, NY 12945	N/A	CHURCH	MINISTRY	4,500
CW HENRY PTA 601 CARPENTER LANE PHILADELPHIA, PA 19119	N/A	PUBLIC EDUCATION INS	PUBLIC SCHOOL PLAYGROUND FUND	1,500
DANA-FARBER CANCER INSTITUTE P O BOX 849168 BOSTON, MA 022849168	N/A	PUBLIC CHARITY	CANCER RESEARCH AND TREATMENT	1,000
DOCTORS WITHOUT BORDERS USA BOX 2247 NEW YORK, NY 101162247	N/A	PUBLIC CHARITY	MEDICINE FRONTIERS	1,500
FOOTPRINTS FOOD PANTRY 37 OLD POST ROAD KITTERY, ME 03904	N/A	PUBLIC CHARITY	FOOD FOR THE NEEDY	500
Total ▶ 3a				313,900

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>				
FRACTURED ATLAS INC 248 W 35TH STREET 10TH FLOOR NEW YORK, NY 10001	N/A	PUBLIC CHARITY	SUPPORT OF THE ARTS	15,250
GARRISON FOREST SCHOOL 300 GARRISON FOREST ROAD OWINGS MILLS, MD 21117	N/A	PRIVATE EDUCATION IN	SUPPORT OF EDUCATION	1,500
HIGH PEAKS HOSPICE P O BOX 840 SARANAC LAKE, NY 12983	N/A	PUBLIC CHARITY	HIGH LEVEL END-OF-LIFE CARE	1,000
INLAND LAKES EDUCATIONAL FOUNDATION 1325 S HAMILTON DRIVE BURT LAKE, MI 49717	N/A	PUBLIC CHARITY	ENVIRONMENTAL WATER ISSUES	2,000
KREMPLES FOUNDATION 100 CAMPUS DRIVE PORTSMOUTH, NH 80301	N/A	PUBLIC CHARITY	IMPROVING THE LIVES OF PEOPLE LIVING WITH BRAIN INJURY	4,000
Total ▶				313,900
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>				
LUTHERAN VOLUNTEER CORPS 1226 VERMONT AVE NW WASHINGTON, DC 200053615	N/A	PUBLIC CHARITY	SPIRITUALITY WHILE WORKING FOR SOCIAL JUSTICE	5,000
MARYLAND ENSEMBLE THEATRE 31 WEST PATRICK STREET FREDERICK, MD 21701	N/A	PUBLIC CHARITY	ARTS IN EDUCATION	1,000
N STREET VILLAGE INC 1333 N STREET NW WASHINGTON, DC 20005	N/A	PUBLIC CHARITY	SUPPORT SERVICES FOR THE HOMELESS	5,000
NATIONAL PATIENT SAFETY FOUNDATION 280 SUMMER STREET 9TH FLOOR BOSTON, MA 02210	N/A	PUBLIC CHARITY	PATIENT AND HEALTH CARE WORKERS SAFETY	2,000
NICOLE CANUSO DANCE COMPANY 913 FEDERAL STREET PHILADELPHIA, PA 19147	N/A	PUBLIC CHARITY	ARTS IN EDUCATION	5,500
Total 3a				313,900

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>				
NORTH COUNTRY LIFE FLIGHT P O BOX 994 SARANAC LAKE, NY 12983	N/A	PUBLIC CHARITY	EMERGENCY MEDIVAC SERVICES	1,500
NORTHERN ADIRONDACK PLANNED PARENTHOOD 66 BRINKERHOFF STREET PLATTSBURGH, NY 12901	N/A	PUBLIC CHARITY	SAFE MOTHERHOOD AND FAMILY PLANNING CONCERNS	1,000
NORTHWOOD SCHOOL P O BOX 1070 LAKE PLACID, NY 12946	N/A	PRIVATE EDUCATION IN	EDUCATIONAL INSTITUTION	111,500
PARTNERS IN HEALTH P O BOX 845578 BOSTON, MA 02284	N/A	PUBLIC CHARITY	MEDICAL CARE FOR THE UNDER PRIVILEGED	2,000
PENDRAGON THEATRE 148 RIVER STREET SARANAC LAKE, NY 12983	N/A	PUBLIC CHARITY	PROMOTE AND SUPPORT COMMUNITY THEATRE	400
Total ▶				313,900
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>				
PHILLIPS EXETER ACADEMY 20 MAIN STREET EXETER, NH 038332460	N/A	PRIVATE EDUCATION IN	SUPPORT EDUCATIONAL PROGRAMS	1,900
PIG IRON THEATRE COMPANY P O BOX 17275 PHILADELPHIA, PA 19105	N/A	PUBLIC CHARITY	ARTS IN EDUCATION	15,500
PORTSMOUTH MUSIC & ARTS CENTER 973 ISLINGTON STREET PORTSMOUTH, NH 03801	N/A	PUBLIC CHARITY	PROMOTION OF THE ARTS	500
REGIONAL FOOD BANK OF NORTHEASTERN NY 965 ALBANY-SHAKER ROAD LATHAM, NY 121101409	N/A	PUBLIC CHARITY	FEED THE HUNGRY AND HOMELESS	2,500
SAN-CAP CONSERVATION FOUNDATION P O BOX 839 SANIBEL, FL 339570839	N/A	PUBLIC CHARITY	PRESERVE THE QUALITY OF THE WATER WAY	7,000
Total 3a				313,900

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>				
SARANAC LAKE CENTRAL SCHOOL 79 CANARAS AVE SARANAC LAKE, NY 12983	N/A	PUBLIC EDUCATION INS	EDUCATION SCHOLARSHIP	500
SARANAC LAKE CIVIC CENTER INC P O BOX 1040 SARANAC LAKE, NY 12983	N/A	PUBLIC CHARITY	COMMUNITY RECREATIONAL FACILITY	62,000
SARANAC LAKE FREE LIBRARY 109 MAIN STREET SARANAC LAKE, NY 12983	N/A	PUBLIC CHARITY	SUPPORT PUBLIC LIBRARY	750
SARANAC LAKE VOLUNTEER FIRE COMPANY INC P O BOX 509 SARANAC LAKE, NY 12983	N/A	PUBLIC CHARITY	LOCAL FIRE SERVICES	1,500
SARANAC LAKE VOLUNTEER RESCUE SQUAD INC PO BOX 431 SARANAC LAKE, NY 12983	N/A	PUBLIC CHARITY	LOCAL RESCUE AND EMT SERVICES	1,000
Total ▶ 3a				313,900

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>				
SEACOAST SCIENCE CENTER 570 OCEAN BLVD RYE, NH 03870	N/A	PUBLIC CHARITY	OCEAN EDUCATION	1,000
SOUTHEAST LAND TRUST OF NH 12 CENTER STREET 2ND FLOOR EXETER, NH 03833	N/A	PUBLIC CHARITY	STEWARDSHIP AND PROTECTION OF LAND	400
ST MICHAEL AND ALL ANGELS EPISCOPAL CHURCH 2304 PERIWINKLE WAY SANIBEL, FL 33957	N/A	CHURCH	MINISTRY	2,000
ST PAUL'S SCHOOL 325 PLEASANT STREET CONCORD, NH 033019966	N/A	PRIVATE EDUCATION IN	SUPPORT FOR EDUCATION	500
THE CO-OP SCHOOL 87 IRVING PLACE BROOKLYN, NY 11238	N/A	PRIVATE EDUCATION IN	SUPPORT FOR EDUCATION	500
Total ▶ 3a				313,900

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>				
THE DAUGHTERS OF ST PAUL 50 ST PAULS AVE BOSTON, MA 02130	N/A	RELIGIOUS ORGANIZATI	RELIGIOUS EDUCATIONRELIGIOUS EDUCATIONRELIGIOUS EDUCATION	500
THE JOSHUA FUND 188 NEWMAN ROAD LAKE PLACID, NY 12946	N/A	PUBLIC CHARITY	SAVING LIVES OF DOGS IN HIGH KILL SHELTERS	250
THE MAYHEW PROGRAM P O BOX 120 BRISTOL, NH 03222	N/A	PUBLIC CHARITY	CHALLENGES AND HELPS AT-RISK NEW HAMPSHIRE BOYS TO BELIEVE IN THEMSELVES, WORK WELL WITH OTHERS AND FIND THEIR BEST	400
THE WILD CENTER 45 MUSEUM DRIVE TUPPER LAKE, NY 12986	N/A	PUBLIC CHARITY	PROMOTE THE ADIRONDACKS RESPONSIBLY	250
TRI-LAKES HUMANE SOCIETY P O BOX 1111 SARANAC LAKE, NY 12983	N/A	PUBLIC CHARITY	SUPPORT THE LOCAL ANIMAL SHELTER	1,500
Total 3a ▶				313,900

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>				
TUFTS UNIVERSITY 274 TREMONT STREET BOSTON, MA 02111	N/A	PRIVATE EDUCATION IN	SUPPORT OF EDUCATION	300
UPPER SARANAC LAKE FOUNDATION INC P O BOX 564 SARANAC LAKE, NY 12983	N/A	PUBLIC CHARITY	INSURE WATER QUALITY OF UPPER SARANAC LAKE	18,200
VARIOUS CHARITIES (250 OR LESS EACH) PO BOX 1356 SARANAC LAKE, NY 12983	N/A	PUBLIC CHARITY	MISCELLANEOUS ORGANIZED CHARITIES	1,350
WHITE PINE PROGRAMS 330 MOUNTAIN ROAD CAPE NEDDICK, ME 03902	N/A	PUBLIC CHARITY	EDUCATIONAL NATURE PROGRAMS	250
Total ▶ 3a				313,900

TY 2016 Accounting Fees Schedule**Name:** STARITCH FOUNDATION INC**EIN:** 14-1827670

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING AND TAX PREP	10,500	10,500		0

TY 2016 Investments Corporate Stock Schedule**Name:** STARITCH FOUNDATION INC**EIN:** 14-1827670

Name of Stock	End of Year Book Value	End of Year Fair Market Value
100 SH INTUITIVE SURGICAL	0	0
1000 SH FMC CORP	53,264	56,560
1000 SH GLAXOSMITHKLINE	42,771	38,510
1000 SH HOLOGIC INC	26,514	40,120
1000 SH POLYONE CORP	39,785	32,040
1000 SH EXXON MOBIL CORP	82,705	90,260
1230 SH CELGENE CORP	123,259	142,372
1200 SH DU PONT EI DE NEMOURS & CO	53,730	88,080
500 SH TELEFLEX INC	48,977	80,575
13191 SH MFC INDUSTRIAL LTD	0	0
15000 SH RITE AID CORP	92,131	123,600
2000 SH CISCO SYSTEMS INC	51,102	60,440
2500 SH CORNING INC	48,616	60,675
300 SH SCHLUMBERGER LTD	29,491	25,185
3300 SH I SHARES SILVER TRUST	58,492	49,863
400 SH QUALCOMM INC	30,451	26,080
400 SH SPDR GOLD TRUST	45,403	43,844
432 SH IBM	76,049	71,708
500 SH AMERICAN TOWER CORP	47,957	52,840
5000 SH SANGAMO BIOSCIENCES INC	47,000	15,250
5600 SH PROTALEX INC	43,564	5,600
700 SH APPLE INC	47,192	81,074
70000 SH TIGERLOGIC CORP	0	0
795 SH CERNER CORP	27,607	37,659
8000 SH PURECYCLE CORP	31,780	44,000
415 SH AIR PRODUCTS & CHEMICALS INC	38,515	59,685
170 SH VERSUM MATERIALS	2,681	4,772

TY 2016 Investments - Other Schedule**Name:** STARITCH FOUNDATION INC**EIN:** 14-1827670

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
2000 UTS COMPASS DIVERSIFIED HOLDINGS	AT COST	32,299	35,800
2000 UTS PLAINS ALL AMERICAN PIPELINE, L.P.	AT COST	34,129	64,580
3800 UTS ENTERPRISE PRODUCTS PARTNERS	AT COST	31,398	102,752

TY 2016 Other Assets Schedule**Name:** STARITCH FOUNDATION INC**EIN:** 14-1827670**Other Assets Schedule**

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
INTEREST AND DIVIDENDS RECEIVABLE	270	290	290

TY 2016 Other Expenses Schedule**Name:** STARITCH FOUNDATION INC**EIN:** 14-1827670**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
WELLS FARGO ADVISORY FEES	7,530	7,530		0
INVESTMENT EXPENSES	469	469		0
FILING FEE	250	250		0
OFFICE EXP	41	41		0

TY 2016 Other Income Schedule**Name:** STARITCH FOUNDATION INC**EIN:** 14-1827670**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
ENTERPRISE PRODUCTS PARTNERS L P	-1,094		-1,094
PLAINS ALL AMERICAN PIPELINE, L P	-5,193		-5,193
COMPASS DIVERSIFIED HLDGS	3,117		3,117
CLR, JR '05 TRUST	11,394		11,394
ORDINARY INCOME ON DISP OF PTP	4,533		4,533

**TY 2016 Substantial Contributors
Schedule****Name:** STARITCH FOUNDATION INC**EIN:** 14-1827670

Name	Address
CHARLES L RITCHIE JR - DECEASED	PO BOX 1356 SARANAC LAKE, NY 129837356
ANNE S RITCHIE HOLUM - DECEASED	PO BOX 1356 SARANAC LAKE, NY 129837356
DOROTHY N RITCHIE-VALHOULI	PO BOX 1356 SARANAC LAKE, NY 129837356
JAMES M RITCHIE	PO BOX 1356 SARANAC LAKE, NY 129837356
MARY ANNE RITCHIE - DECEASED	PO BOX 1356 SARANAC LAKE, NY 129837356
ROBERT M HOLUM	PO BOX 1356 SARANAC LAKE, NY 129837356
SALLY B RITCHIE	PO BOX 1356 SARANAC LAKE, NY 129837356
ROBERT W DEVORE	PO BOX 1356 SARANAC LAKE, NY 129837356
ALEXANDER R VALHOULI	PO BOX 1356 SARANAC LAKE, NY 129837356
JAMES R VALHOULI	PO BOX 1356 SARANAC LAKE, NY 129837356
SOLVEIG A HOLUM	PO BOX 1356 SARANAC LAKE, NY 129837356
RITCHIE CRUT UA 11242000	PO BOX 1356 SARANAC LAKE, NY 129837356
CHARLES L RITCHIE JR 2005 TR	PO BOX 1356 SARANAC LAKE, NY 129837356

TY 2016 Taxes Schedule**Name:** STARITCH FOUNDATION INC**EIN:** 14-1827670

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES	715	715		0
EXCISE TAX	1,500	1,500		0

Schedule B
(Form 990, 990-EZ,
or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors
▶ Attach to Form 990, 990-EZ, or 990-PF
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at
www.irs.gov/form990

OMB No 1545-0047
2016

Name of the organization
STARITCH FOUNDATION INC

Employer identification number
14-1827670

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹ 3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc , purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc , contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization STARITCH FOUNDATION INC	Employer identification number 14-1827670
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Part I **Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ROBERT M HOLUM <hr/> PO BOX 1356 <hr/> SARANAC LAKE, NY 129837356	\$ 19,871	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> <small>(Complete Part II for noncash contributions)</small>
2	CHARLES L RITCHIE JR 2005 TR <hr/> PO BOX 1356 <hr/> SARANAC LAKE, NY 129837356	\$ 89,321	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions)</small>
	<hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions)</small>
	<hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions)</small>
	<hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions)</small>
	<hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions)</small>

Name of organization STARITCH FOUNDATION INC	Employer identification number 14-1827670
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____
 Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift Transferee's name, address, and ZIP 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift Transferee's name, address, and ZIP 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift Transferee's name, address, and ZIP 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift Transferee's name, address, and ZIP 4	Relationship of transferor to transferee