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2016

OMB No 1545-0052

Return of Private Foundation

Department of the Treasury Internal Revenue Service

Form 990-PF

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.

Open to Public Inspection

For	caler	ndar year 2016, or tax year beginning 01-01-20)16 , aı	nd ending 12-31-	2016	
		Indation I FAMILY FOUNDATION		A Employer id	entification numbe	r
RC	GER TH	HOMAS & WILLIAM LOWELL TRUSTEES		22-2677966		
		d street (or P O box number if mail is not delivered to street address) CONGRESS ST 12FL) Room/suite	B Telephone nu	mber (see instructio	ns)
City	or town	n, state or province, country, and ZIP or foreign postal code		(617) 523-6531		
		A 02110		C If exemption	application is pendin	g, check here
G Ch	neck al	ll that apply 🔲 Initial return 🔲 Initial return of a	former public charity	D 1. Foreign or	ganizations, check h	ere . \square
		\square Final return \square Amended return			ganizations meeting	
		\square Address change $\ \square$ Name change			k here and attach co	· —
H C	neck ty	$ \sqrt{pe} $ of organization $ \sqrt{Section} $ Section 501(c)(3) exempt private	foundation		undation status was t n 507(b)(1)(A), chec	
<u> </u>	Section	n 4947(a)(1) nonexempt charitable trust				
of	year <i>(f</i>	ket value of all assets at end from Part II, col (c),	Cash Accru		ation is in a 60-mont n 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and			(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach				(,,
	2	schedule) Check If the foundation is not required to attach				
	_	Sch B				
ө	3 4	Interest on savings and temporary cash investments Dividends and interest from securities	256 51,206			
	5a	Gross rents	31,200	31,343		
	ь	Net rental income or (loss)				
	6a	Net gain or (loss) from sale of assets not on line 10	224,663			
Revenue	b	Gross sales price for all assets on line 6a				
Re	7	765,606 Capital gain net income (from Part IV, line 2)	2	224,663		
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	ь	Less Cost of goods sold]			
	C	Gross profit or (loss) (attach schedule)	66.1			
	11	Other income (attach schedule)	334	0		
	12	Total. Add lines 1 through 11	276,459	, i		4 220
	13 14	Compensation of officers, directors, trustees, etc Other employee salaries and wages	13,014	8,676		4,338
s	15	Pension plans, employee benefits				
Expenses	16a	Legal fees (attach schedule)				
<u>8</u>	ь	Accounting fees (attach schedule)	2,672	2,672		0
Š	С	Other professional fees (attach schedule)	12,343	10,643		1,700
tive	17	Interest				
stra	18	Taxes (attach schedule) (see instructions)	4,284	906		0
and Administrative	19	Depreciation (attach schedule) and depletion				
Ę	20	Occupancy				
ΔÞ	21	Travel, conferences, and meetings				
a	22	Printing and publications	as 1			
<u>Bur</u>	23	Other expenses (attach schedule)	90	55		35
Operating	24	Total operating and administrative expenses.	22.402	22.052		6 073
ă	25	Add lines 13 through 23	32,403 450,200			6,073 450,200
	26	Total expenses and disbursements. Add lines 24 and	+30,200			430,200
	27	Subtract line 26 from line 12	482,603	22,952		456,273
	2, a	Excess of revenue over expenses and	-206,144			
	ь	disbursements Net investment income (If negative, enter -0-)	·	253,397		
	C	Adjusted net income(If negative, enter -0-)		255,537		
For		work Reduction Act Notice, see instructions.	1	 Cat No 11289>	I For	m 990-PF (2016)

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 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

Investments—land, buildings, and equipment basis ▶

Investments—other (attach schedule)

Less accumulated depreciation (attach schedule)

Less accumulated depreciation (attach schedule)

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

Foundations that follow SFAS 117, check here ▶

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

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) ▶

Enter amount from Part I, line 27a

Other increases not included in line 2 (itemize) -

b C

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

28

29

31 Part III

Liabilities

Balances

Fund 26

ŏ

Assets 27

Net 30

2

1,682,897

1,714,885

2,137,482

-422,597

1,714,885

1,714,885

1,173,200

1,508,741

1.915.892

-407,151

1,508,741 1,508,741

2

3

4

5

6

1,714,885

-206,144

1,508,741

1,508,741 Form **990-PF** (2016)

2,566,291

2,901,832

Page **3**

	(a) the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)	
1 a PUBLICLY TRADED SECU	RITIES	Р			
b CAPITAL GAINS DIVIDEN	IDS		Р		
С					
d					
e					
	(f)		(g)	(h)
(e) Gross sales price	Depreciation allowed	Cost or	other basis	Gain	or (loss)
	(or allowable)	plus exp	ense of sale		f) minus (g)
a 76	5,605		540,9	43	224,662
b	1				1
С					
d					
e					
Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69		(I)
(i)	(j)		(k)	Gains (Col ((h) gain minus
(i) FMV as of 12/31/69	Adjusted basis		of col (ı)		less than -0-) or
	as of 12/31/69	over col	(j), if any	Losses (fr	om col (h))
a					224,662
b					1
с					
d					
e					
	or (net capital loss) gain or (loss) as defined in sections rt I, line 8, column (c) (see instructi	ons) If (loss), enter -0	Part I, line 7	} 2	224,663
Dart V Qualification I	Indox Section 4040(c) for D	aduced Tay on Not	Investment I	· · · · · · · · · · · · · · · · · · ·	
	Jnder Section 4940(e) for Re rivate foundations subject to the se				
	-	ecion is ro(a) tax on he	it investment me	sine y	
If section 4940(d)(2) applies, le	•			🗆 .	es 🗹 No
	e section 4942 tax on the distributa ot qualify under section 4940(e) Do		in the base perio	od? LJ Y	es 🛂 No
 Enter the appropriate am 	nount in each column for each year,	see instructions before	making any entr	ries	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	(d) Distribution rai (col (b) divided by	
2015	474,891		3,215,981		0 147666
2014	435,430	i	3,460,311		0 125836
2013	436,357		3,343,494		0 130509
2012	387,451		3,150,111		0 122996
2011	381,309		3,287,338		0 115993
2 Total of line 1, column (d	d)		2		0 643000
number of years the four	ofor the 5-year base period—divide idation has been in existence if less ncharitable-use assets for 2016 fror	than 5 years	, or by the		0 128600 2,843,779
5 Multiply line 4 by line 3			5	;	365,710
6 Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		2,534
7 Add lines 5 and 6			7	,	368,244
8 Enter qualifying distributi If line 8 is equal to or gre	ons from Part XII, line 4 , eater than line 7, check the box in P		8		456,273 ee the Part VI
Instructions					orm 000-BE (2016)

	If "Yes," attach the statement requir	ed b	y Regulations section 53	4945-5(d)					
6 a	Did the foundation, during the year,	rece	eive any funds, directly or	indirectly, to pay premiu	ims on				
	a personal benefit contract?				· 🗌 Yes 🗸				
b	Did the foundation, during the year,	pay	premiums, directly or ind	irectly, on a personal bei	nefit contract?	NO	6b		No
	If "Yes" to 6b, file Form 8870					Ī			
7a	At any time during the tax year, was	the	foundation a party to a p	rohibited tax shelter tran	nsaction? Yes				
b	If yes, did the foundation receive an				∟ Yes 💌	No	7b		
	Information About O		· · · · · · · · · · · · · · · · · · ·		nagers, Highly Paid Er	nplov	vees.		
Pa	and Contractors		,,		g, g ,		, ,		
1	List all officers, directors, trustee	s. f	oundation managers an	d their compensation	(see instructions).				
	List all officers, affectors, trastee	<i>5</i> ,			(d)				
	(a) Name and address		Title, and average hours per week	(c) Compensation (If not paid, enter	Contributions to employee			se acc	
	(a) mame and address	(b) devoted to position	-0-)	benefit plans and deferred		(e) other allowand		nces
	Addıtıonal Data Table		-	-	compensation	1			
see	Additional Data Table								
2	Compensation of five highest-pai	d er	nployees (other than th	ose included on line 1		ne, er	nter "I	NONE.	
	(a)		Title, and average		Contributions to				
Na	ame and address of each employee pa	ıd	hours per week	(c) Compensation	employee benefit plans and deferred			e acco allowar	
	more than \$50,000		(b) devoted to position		(d) compensation	(0)		anomai	1000
NON	E								
			1						
			1						
			1						
Tota	I number of other employees paid over	r ¢ E	50,000	1					
OLA	in number of other employees paid over	н фС		· · · · · · · · ·		Г	004)-PF (2016
						For	пээ	,-PF	/U15

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Part VIII Information About Officers, Directors, Trustees, Foundation Managand Contractors (continued)	ers, Highly Paid Employees,
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 organizations and other beneficiaries served, conferences convened, research papers produced, etc	such as the number of Expenses
1 N/A	0
2	
3	<u> </u>
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	
1 N/A 2	0
-	
All other program-related investments See instructions 3	
<u> </u>	
Total. Add lines 1 through 3	▶ 0 Form 990-PF (2016)
	Form 990-PF (2016)

1a

1b

2

3a 3b

4

5

456,273

456.273

2.534

453.739

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Part XII

1

2

3

4

5

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the

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

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.

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

income Enter 1% of Part I. line 27b (see instructions).

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

(c)

2015

Page 9

139.655

139,655

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Form	990-PF	(2	016
Pa	rt XIII	•	ı

b Total for prior years

a From 2011. . . .

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

XII, line 4 > \$

d From 2014. . . .

e From 2015.

0-PF (2	016)
XIII	Un

P	art XIII	Undistributed Income (see instruc	ctions)
1	Distributab	le amount for 2016 from Part XI, line 7	
2	Undistribut	ed income, if any, as of the end of 2016	

a Enter amount for 2015 only.

Excess distributions carryover, if any, to 2016

f Total of lines 3a through e.

d Applied to 2016 distributable amount. e Remaining amount distributed out of corpus

same amount must be shown in column (a))

5 Excess distributions carryover applied to 2016 (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. .

d Excess from 2015. .

e Excess from 2016. . .

c Excess from 2014. . . .

6 Enter the net total of each column as

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

indicated below:

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). c Treated as distributions out of corpus (Election required—see instructions).

221,648 232,925

272.454 269,800

320,864

232.925 272,454

269.800

320.864

316,618

(a)

Corpus

1,317,691

316.618

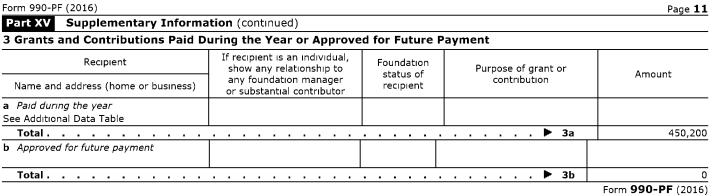
1,634,309

221.648

1,412,661

(b)

Years prior to 2015



Q1055	amounts unless otherwise indicated	Unrelated bus	siness income	Excluded by section	512, 513, or 514	(e) Related or exem
	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions
-	Service revenue	Business code	Amount	Exclusion code	Allioune	
	nd contracts from government agencies					
	ship dues and assessments					
	t on savings and temporary cash			14	256	
	ls and interest from securities			14	51,206	
	al income or (loss) from real estate					
	ht financed property					
	bt-financed property					
	vestment income			+		
	(loss) from sales of assets other than			+		
invento	ory			18	224,663	
	me or (loss) from special events					
Gross pi Other re	rofit or (loss) from sales of inventory					
	NYMENT APPLIED TO 2016			01	334	
				01	331	
Subtota	Add columns (b), (d), and (e)		(276,459	
^	44 log 12 columns (b) (d) cod (c)					
'otal. A worksh	Add columns (b), (d), and (e)	ns)		13		276,4
worksh	add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculatio Relationship of Activities to th	ns)				276,4
worksh	eet in line 13 instructions to verify calculatio B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish i income is reporte	ment of Exem	pt Purposes f Part XVI-A contribut	ed importantly to	276,4
worksh t XVI: No.	eet in line 13 instructions to verify calculatio B Relationship of Activities to th Explain below how each activity for which	ns) e Accomplish i income is reporte	ment of Exem	pt Purposes f Part XVI-A contribut	ed importantly to	276,4
worksh t XVI: No.	eet in line 13 instructions to verify calculatio B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish i income is reporte	ment of Exem	pt Purposes f Part XVI-A contribut	ed importantly to	276,4
worksh XVI No.	eet in line 13 instructions to verify calculatio B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish i income is reporte	ment of Exem	pt Purposes f Part XVI-A contribut	ed importantly to	276,4
worksh XVI No.	eet in line 13 instructions to verify calculatio B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish i income is reporte	ment of Exem	pt Purposes f Part XVI-A contribut	ed importantly to	276,4
vorksh : XVI : No.	eet in line 13 instructions to verify calculatio B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish i income is reporte	ment of Exem	pt Purposes f Part XVI-A contribut	ed importantly to	276,4
vorksh : XVI : No.	eet in line 13 instructions to verify calculatio B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish i income is reporte	ment of Exem	pt Purposes f Part XVI-A contribut	ed importantly to	276,4
vorksh : XVI : No.	eet in line 13 instructions to verify calculatio B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish i income is reporte	ment of Exem	pt Purposes f Part XVI-A contribut	ed importantly to	276,4
vorksh : XVI No.	eet in line 13 instructions to verify calculatio B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish i income is reporte	ment of Exem	pt Purposes f Part XVI-A contribut	ed importantly to	276,
worksh t XVI: No.	eet in line 13 instructions to verify calculatio B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish i income is reporte	ment of Exem	pt Purposes f Part XVI-A contribut	ed importantly to	276,
worksh t XVI- No.	eet in line 13 instructions to verify calculatio B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish i income is reporte	ment of Exem	pt Purposes f Part XVI-A contribut	ed importantly to	276,

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

Part XVII	Exempt Organia	zations				<u> </u>			
	ganization directly or in Code (other than sectio					on described in section ! organizations?	501	Yes	No
a Transfers f	rom the reporting foun	dation to a noi	ncharitable ex	empt organization	of				
(1) Cash.							1a(1)		No
(2) Other	assets						1a(2)		No
b Other tran	sactions								
	of assets to a nonchari	•	_				1b(1)		No
	ases of assets from a n						. 1b(2)		No
` '	nl of facilities, equipmer	•					. 1b(3)		No
	oursement arrangemen						1b(4)		No
	or loan guarantees.						1b(5)		No No
` '	mance of services or ma facilities, equipment, n		_				1b(6)		No
-			•			lways show the fair mar			NO
						ed less than fair market			
ın any trar	saction or sharing arra	ngement, show	w ın column (c	d) the value of the	goods, other ass	ets, or services received			
(a) Line No	(b) Amount involved	(c) Name of n	oncharitable eve	mpt organization	(d) Description of	f transfers, transactions, and	t charing arra	naemen	tc
(a) Line No	(b) Amount involved	(C) Name of the	onenantable exe	IIIpe organizacion	(a) Description o	r cransiers, cransaccions, and	a snaring arra	ngemen	
	idation directly or indire	•	•	•					
	in section 501(c) of the	•	han section 50	01(c)(3)) or in sect	ion 527?		∐ Yes	✓ N	0
b If "Yes," co	omplete the following so		1 4	I N T (1	(-) D			
	(a) Name of organization	on	(1	b) Type of organizatio	on	(c) Description of r	elationship		
						ing schedules and state			
			rect, and com	plete Declaration o	of preparer (other	than taxpayer) is based	d on all infoi	mation	n of
Jigii	h preparer has any kno *****	wiedge		1 204 7 24 27		May	the IRS discu	e this r	oturn
Here				2017-04-27			the preparer		
 9	Signature of officer or ti	rustee		Date	Title	(see	ınstr)? 🗹 🛚	es 🗆 N	lo
I	Descript/Towns and a		Duamarra et a Co		<u>.</u>		\1		
	Print/Type preparer's	name I	Preparer's Sigr	iacure	Date	Check if self-			
						employed ▶ □	P00133	3963	
Paid	MARY JEAN MOUGI	HAN							
Preparer	Firm's name > 1007	NG WOLCOTT	8. COOL TDC5	TDUCTUC					
Use Only	Firm's name ► LORI	ING WOLCOIT	a COULIDGE	INUST LLC		Firn	n's EIN ▶27	-33965	808
	Firm's address ▶ 23	0 CONGRESS	STREET						
	B.C.	OCTON MA OT	01102427			Pho	ne no (617) 523-6	5531
	BOSTON, MA 021102437						,		

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation STEPHEN A MOORE DOD 72816 TRUSTEE 5,136 3 00 3 DENNETT ROAD WINCHESTER, MA 01890 ROGER M THOMAS TRUSTEE 6,861 3.00 10 LONGWOOD DRIVE APT 228 WESTWOOD, MA 02090 JOHN E HOFFMAN JR TRUSTEE 3 00 279 BOWLDER RD SULLIVAN, NH 03445 ESTATE OF STEPHEN A MOORE TRUSTEE 545 0 3 00 3 DENNETT ROAD WINCHESTER, MA 01890 WILLIAM A LOWELLSUCCESSOR TRUSTEE TRUSTEE 472 0 3 00 CHOATE HALL STEWART LLP 2 INTERNATI

NAL PLACE BOSTON, MA 02110

Form 990PF Part XV Line 3 - Grant	s and Contributions Paid	During the `	Year or Approved for Future F	Payment
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
AMERICAN RED CROSS 2 MAITLAND ST CONCORD, NH 03301	NONE	PC	GENERAL	1,000
ANTIOCH UNIVERSITY NEWENGLAND 40 AVON STREET KEENE, NH 03431	NONE	PC	GENERAL	20,000
APPLE HILL CENTER FOR CHAMBER MUSIC APPLE HILL ROAD PO BOX 217 SULLIVAN, NH 03445	NONE	PC	OPERATING SUPPORT	10,000
ARTS ALIVE INC 39 CENTRAL SQUARE SUITE 203 KEENE, NH 03431	NONE	PC	OPERATING SUPPORT	15,000
CEDARCREST INC 91 MAPLE AVENUE KEENE, NH 03431	NONE	PC	GENERAL	1,000
CHESHIRE HEALTH FOUNDATION 580 COURT STREET KEENE, NH 03431	NONE	PC	GENERAL	65,000
COLONIAL THEATER GROUP 95 MAIN STREET KEENE, NH 03431	NONE	PC	GENERAL	4,000
COMMUNITY CONNECTIONS FOR AFTERSCHOOL NETWORKING 25 ROXBURY STREET SUITE B KEENE, NH 03431	NONE	PC	OPERATING SUPPORT	10,000
ERIC CARLE MUSEUM OF PICTURE BOOK ART 125 WEST BAY ROAD AMHERST, MA 01002	NONE	PC	GENERAL	1,000
FIRST CHURCH IN WEYMOUTH 17 CHURCH ST WEYMOUTH, MA 02189	NONE	PC	GENERAL	3,000
FIRST CONGREGATIONAL CHURCH OF SOUTH HADLEY MA ONE CHURCH STREET SOUTH HADLEY, MA 01075	NONE	PC	OUTREACH PROGRAM	3,000
FRIENDS OF THE HOMELESS OF THE SOUTH SHORE 8 DRIFTWAY RD WEYMOUTH, MA 02191	NONE	PC	GENERAL	1,000
GIRLS INCORPORATED OF HOLYOKE 6 OPEN SQUARE WAY HOLYOKE, MA 01040	NONE	PC	GENERAL	1,000
GRANITE STATE CHILDRENS ALLIANCE 2 WELLMAN AVENUE SUITE 140 NASHUA, NH 03064	NONE	PC	GENERAL	1,000
GRANITE STATE MONARCHS PO BOX 258 KEENE, NH 03431	NONE	PC	GENERAL	1,000
Total				450,200

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	Foundation status of	Purpose of grant or contribution	Amount			
Name and address (home or business)	any foundation manager or substantial contributor	recipient		<u> </u>			
a Paid during the year							
HGM DEVELOPMENT INC 42 MAIN ST KEENE, NH 03431	NONE	PC	GENERAL OPERATING SUPPORT	1,000			
HISTORICAL SOCIETY OF CHESIRE COUNTY 246 MAIN STREET KEENE, NH 03431	NONE	PC	OPERATING SUPPORT	1,000			
HOME HEALTHCARE HOSPICE AND COMMUNITY SERVICES PO BOX 564 KEENE, NH 03431	NONE	PC	OPERATING SUPPORT	5,000			
HUNDRED NIGHTS INC PO BOX 833 17 LAMSON STREET KEENE, NH 03431	NONE	PC	OPERATING SUPPORT	5,000			
KEENE ELM CITY ROTARY CLUB 835 COURT ST KEENE, NH 03431	NONE	PC	GENERAL	17,000			
KEENE FAMILY YMCA 38 ROXBURY ST KEENE, NH 03431	NONE	PC	GENERAL	1,000			
KEENE ICE CENTER ENTERPRISES INC P O BOX 1178 KEENE, NH 03431	NONE	PC	GENERAL	10,000			
KEENE SENIOR CITIZENS INC 70 COURT ST KEENE, NH 03431	NONE	PC	GENERAL	6,200			
KEENE STATE COLLEGE 229 MAIN STREET KEENE, NH 03431	NONE	PC	GENERAL	9,500			
LEUKEMIA AND LYMPHOMA SOCIETY 9 ERIE DRIVE NATICK, MA 01760	NONE	PC	GENERAL	5,000			
MAPS COUNSELING SERVICES 19 FEDERAL STREET KEENE, NH 03431	NONE	PC	GENERAL	5,000			
MIRACLES IN MOTION 118 WYMAN ROAD KEENE, NH 03431	NONE	PC	GENERAL	3,000			
MONADNOCK CENTER FOR VIOLENCE PREVENTION 12 COURT ST KEENE, NH 03431	NONE	PC	GENERAL	5,000			
MONADNOCK CONSERVANCY PO BOX 337 KEENE, NH 03431	NONE	PC	GENERAL	3,000			
MONADNOCK FAMILY SERVICES 17 93RD STREET KEENE, NH 03431	NONE	РС	GENERAL OPERATING SUPPORT	35,000			
Total				450,200			

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Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount			
a Paid during the year	010000000000000000000000000000000000000		+				
MONADNOCK UNITED WAY 23 CENTER STREET KEENE, NH 03431	NONE	PC	GENERAL	30,000			
MOVING COMPANY DANCE CENTER 76 RAILROAD STREET KEENE, NH 03431	NONE	PC	OPERATING SUPPORT	55,000			
NEW HAMPSHIRE CENTER FOR NONPROFITS 10 FERRY STREET SUITE 315 CONCORD, NH 03301	NONE	PC	GENERAL	20,000			
NEW HAMPSHIRE CENTER FOR PUBLIC POLICY 1 EAGLE SQUARE 510 CONCORD, NH 03301	NONE	PC	GENERAL	1,000			
NEW HAMPSHIRE CHARITABLE FOUNDATION 37 PLEASANT STREET CONCORD, NH 03301	NONE	PC	GENERAL	46,000			
NEW HAMPSHIRE COMMUNITY LOAN FUND 7 WALL STREET CONCORD, NH 03301	NONE	PC	GENERAL OPERATING SUPPORT	1,000			
NEW HAMPSHIRE FISCAL POLICY 64 NORTH MAIN ST 3RD FL CONCORD, NH 03301	NONE	PC	GENERAL OPERATING SUPPORT	1,000			
NEW HAMPSHIRE PUBLIC RADIO INC 207 NORTH MAIN STREET CONCORD, NH 03301	NONE	PC	GENERAL	10,000			
PETERBOROUGH PLAYERS 55 STEARNS FARM ROAD PETERBOROUGH, NH 03458	NONE	PC	GENERAL	1,000			
PRINCETON UNIVERSITY 330 ALEXANDEWR ST PRINCETON, NJ 08540	NONE	PC	GENERAL	1,000			
RIVERBEND COMMUNITY MENTAL HEALTH PO BOX 212 CONCORD, NH 03302	NONE	PC	GENERAL	10,000			
SOCIETY FOR THE PROTECTION OF NH FORESTS 54 PORTSMOUTH STREET CONCORD, NH 03301	NONE	PC	GENERAL	5,000			
STONEWALL FARM 242 CHESTERFIELD RD KEENE, NH 03431	NONE	PC	GENERAL	1,000			
THE COMMUNITY KITCHEN 35-37 MECHANIC STREET KEENE, NH 03431	NONE	PC	GENERAL	1,000			
UNITED CONGREGATIONAL CHURCH OF SULLIVAN PO BOX 73 SULLIVAN, NH 03445	NONE	PC	OPERATING SUPPORT	17,500			
Total	· · · · · · · · · · · · · · · · · · ·			450,200			

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

a Paid during the year				
WEYMOUTH FOOD 1189 COMMERCIAL ST	NONE	PC	GENERAL	1,000

1189 COMMERCIAL ST WEYMOUTH, MA 02189		
Total	 	 450,200

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TY 2016 Accounting Fees Schedule						
Name: HOFFMAN FAMILY FOUNDATION						
ROGER THOMAS & WILLIAM LOWELL TRUSTEES						
EIN: 22-2677966						
Category	Amo	ount N	et Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	

2,672

2,672

LORING, WOLCOTT & COOLIDGE TRUST LLC

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TY 2016 General Explanation Attachment

Name: HOFFMAN FAMILY FOUNDATION

ROGER THOMAS & WILLIAM LOWELL TRUSTEES

EIN: 22-2677966

Congral Explanation Attachment

General E	хріанаціон	Attaciillei	IL .
Identifier	Return Reference	Explanation	
1		PART VIII LINE 1(B)	990PF STATEMENTPART VIII OFFICERS, DIRECTORS, TRUSTEES, FOUNDATION MANAGERSAND THEIR COMPENSATION AND HOURS SPENT PER WEEK HOURS SPENT THE TIME SPENT BY THE TRUSTEE/S MANAGING THE AFFAIRS OF THEFOUNDATION VARIES FROM WEEK TO WEEK AND YEAR TO YEAR FOR990PF REPORTING PURPOSES, AN ESTIMATE OF 1 TO 3 HOURS PERWEEK HAS BEEN INDICATED THE TRUSTEE/S ARE PROFESSIONALFIDUCIARIES WHO MANAGE A NUMBER OF TRUST/FOUNDATIONRELATIONSHIPS AND WHO EMPLOY ACCOUNTING, SUPPORT AND TAXCOMPLIANCE STAFF TO ASSIST WITH THE ADMINISTRATION OF SAIDRELATIONSHIPS THE 1 TO 3 HOUR TIME NOTED REFLECTS ANESTIMATE OF THE TIME SPENT BY THE NAMED TRUSTEE/S AS WELL ASTHEIR AGENTS OR EMPLOYS THE ACTUAL TIME SPENT MAY DIFFERFROM THE ESTIMATE IN ANY GIVEN WEEK/YEAR THE TRUSTEES FEES NOTED ALSO INCLUDES AN INVESTMENT ADVISORY COMPONENT WHICH IS BASED IN PART ON THE FOUNDATION INVESTMENTASSETS AND WHICH VARIES FROM QUARTER TO QUARTER BASED ONFAIR MARKET VALUE

TY 2016 Investments Corporate Stock Schedule

Name: HOFFMAN FAMILY FOUNDATION

ROGER THOMAS & WILLIAM LOWELL TRUSTEES

EIN: 22-2677966

Name of Stock	End of Year Book Value	End of Year Fair Market Value
2075 ABBOTT LABORATORIES	16,384	79,701
1000 AUTOMATIC DATA PROCESSING	6,476	102,780
1550 COLGATE PALMOLIVE CO	36,520	101,432
1100 JOHNSON & JOHNSON	15,702	126,731
2250 MICROSOFT CORP	14,063	139,815
1125 NESTLE SA SPONS ADR FOR REG	33,012	80,859
875 PEPSICO INC	12,139	91,551
1150 STRYKER CORP	11,095	137,782
1075 EXXON MOBIL CORP	99,817	97,030
1400 HEINEKEN HOLDING NV	75,734	97,666
900 ACCENTURE PLC	30,361	105,417
1660 CANADIAN NATIONAL RAILWAY	47,179	111,884
1200 TJX COMPANIES	25,737	90,156
1575 MASTERCARD INC	32,486	162,619
1200 FISERV INC	35,287	127,536
1075 JARDINE MATHESON HOLDING LTD	49,891	59,394
630 APPLE INC	51,515	72,967
1850 CHURCH & DWIGHT CO	49,771	81,752
1150 EOG RESOURCES	66,596	116,265
825 INTUIT	49,417	94,553
1075 DANAHER CORP SHS BEN INT	56,203	83,678
600 PRAXAIR INC	70,774	70,314
560 WALT DISNEY PRODUCTIONS	50,316	58,363
475 ECOLAB INC	49,990	55,680
2040 STARBUCKS CORP	75,356	113,261
525 AMERICAN TOWER CORP	49,793	55,482
295 GILEAD SCIENCES	30,339	21,125
600 NIKE INC CLASSB	31,247	30,498

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TY 2016 Other Expenses Schedule						
Name:	HOFFMAN FAMI	ILY FOUNDATION				
	ROGER THOMAS	ROGER THOMAS & WILLIAM LOWELL TRUSTEES				
EIN: 22-2677966						
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
COMM OF MA FORM PC ANNUAL REPORT FILING FEE	35	0		35		
INVESTMENT EXPENSE	55	55		0		

Name: HOFFMAN FAMILY FOUNDATION

ROGER THOMAS & WILLIAM LOWELL TRUSTEES

DLN: 93491129004347

EIN: 22-2677966

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Other Income Schedule			
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
OVERPAYMENT APPLIED TO 2016	334		334

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TY 2016 Other Professional Fees Schedule						
Name: HOFFMAN FAMILY FOUNDATION						
	ROGER THOMAS & WILLIAM LOWELL TRUSTEES					
EIN: 22-2677966						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
LWC FIDUCIARY ADVISORS FEE	10,643	10,643		0		
LORING WOLCOTT & COOLIDGE TRUST LLC - TAX PREPARATION FEE	1,700	0		1,700		

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TY 2016 Taxes Schedule					
Name:	HOFFMAN F/	AMILY FOUNDATIO	N		
	ROGER THO	ROGER THOMAS & WILLIAM LOWELL TRUSTEES			
EIN:	22-2677966				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
2015 OVERPAYMENT APPLIED TO 2016	334	0		0	
2016 ESTIMATED FEDERAL EXCISE TAX	3,066	0		0	
FOREIGN TAX PAID	884	906		0	