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

Name of foundation IDA BALLOU LITTLEFIELD MEMORIAL TRUST		A Employer identification number 22-2994936	
Number and street (or P O box number if mail is not delivered to street address) 50 KENNEDY PLAZA SUITE 1500		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code PROVIDENCE, RI 02903		B Telephone number (see instructions) (401) 274-2000	
G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change		D 1. Foreign organizations, check here 2. Foreign organizations meeting the 85% test, check here and attach computation	
H Check type of organization ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 561,531	J Accounting method ☒ Cash ☐ Accrual ☐ 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	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)				
	2 Check ☒ if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	21,429	6,668		
	4 Dividends and interest from securities	129,539	129,539		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	-36,008			
	b Gross sales price for all assets on line 6a 2,237,458				
	7 Capital gain net income (from Part IV, line 2)		0		
	8 Net short-term capital gain				
	9 Income modifications			10,000	
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	23	23		
	12 Total. Add lines 1 through 11	114,983	136,230	10,000	
	13 Compensation of officers, directors, trustees, etc	114,740	114,740		0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)				
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	11,111	11,111		0
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	60	60		0
	24 Total operating and administrative expenses. Add lines 13 through 23	125,911	125,911		0
	25 Contributions, gifts, grants paid	329,000			329,000
	26 Total expenses and disbursements. Add lines 24 and 25	454,911	125,911		329,000
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-339,928			
	b Net investment income (if negative, enter -0-)		10,319		
	c Adjusted net income(if negative, enter -0-)			10,000	

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value			
Assets	1	Cash—non-interest-bearing					
	2	Savings and temporary cash investments	54,999	561,531	561,531		
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____					
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)					
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____					
	8	Inventories for sale or use					
	9	Prepaid expenses and deferred charges					
	10a	Investments—U S and state government obligations (attach schedule)					
	b	Investments—corporate stock (attach schedule)	2,972,075	3,131,808	0		
	c	Investments—corporate bonds (attach schedule)	2,196,506	1,201,419	0		
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____					
	12	Investments—mortgage loans					
	13	Investments—other (attach schedule)					
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____					
15	Other assets (describe ▶ _____)						
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	5,223,580	4,894,758	561,531			
Liabilities	17	Accounts payable and accrued expenses					
	18	Grants payable					
	19	Deferred revenue					
	20	Loans from officers, directors, trustees, and other disqualified persons					
	21	Mortgages and other notes payable (attach schedule)					
	22	Other liabilities (describe ▶ _____)					
	23	Total liabilities (add lines 17 through 22)	0	0			
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ☐ and complete lines 24 through 26 and lines 30 and 31.						
	24	Unrestricted					
	25	Temporarily restricted					
	26	Permanently restricted					
	Foundations that do not follow SFAS 117, check here ☒ and complete lines 27 through 31.						
	27	Capital stock, trust principal, or current funds	5,223,580	4,894,758			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0			
	29	Retained earnings, accumulated income, endowment, or other funds	0	0			
30	Total net assets or fund balances (see instructions)	5,223,580	4,894,758				
31	Total liabilities and net assets/fund balances (see instructions) .	5,223,580	4,894,758				

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	5,223,580
2	Enter amount from Part I, line 27a	2	-339,928
3	Other increases not included in line 2 (itemize) ▶ _____	3	11,106
4	Add lines 1, 2, and 3	4	4,894,758
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	4,894,758

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a CITIZENS SHORT TERM	P	2015-12-24	2016-12-21
b CITIZENS LONG TERM	P	2014-12-17	2016-12-21
c CITIZENS CAPITAL GAIN DISTRIB	P		
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 181,172		212,048	-30,876
b 2,055,853		2,061,418	-5,565
c 433		433	0
d			
e			

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

(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			-30,876
b			-5,565
c			0
d			
e			

2 Capital gain net income or (net capital loss)	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	-36,441
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2015	407,335	6,968,333	0 058455
2014	441,959	7,258,540	0 060888
2013	393,997	6,985,018	0 056406
2012	410,766	6,577,305	0 062452
2011	399,652	6,673,031	0 059891

2 Total of line 1, column (d)	2	0 298092
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 059618
4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5	4	6,695,687
5 Multiply line 4 by line 3	5	399,183
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	103
7 Add lines 5 and 6	7	399,286
8 Enter qualifying distributions from Part XII, line 4	8	329,000

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

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☐ and enter 1% of Part I, line 27b	1	206
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	206
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	206
6	Credits/Payments		
a	2016 estimated tax payments and 2015 overpayment credited to 2016	6a	10,000
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	10,000
8	Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid . . . ▶	10	9,794
11	Enter the amount of line 10 to be Credited to 2017 estimated tax ▶ 9,794 Refunded ▶	11	0

Part VII-A Statements Regarding Activities

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

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	13	Yes	
14	The books are in care of ► JOACHIM A WEISSFELD Telephone no ► (401) 274-2000			

Located at ► 50 KENNEDY PLAZA SUITE 1500 PROVIDENCE RI ZIP+4 ► 02903

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here	☐		
	and enter the amount of tax-exempt interest received or accrued during the year	► 15		
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," enter the name of the foreign country ►			

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

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

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☒ Yes ☐ No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☒ No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). ☐ Yes ☒ No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		No
	Organizations relying on a current notice regarding disaster assistance check here.			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016?		☐ Yes ☒ No	
	If "Yes," list the years ► 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions)	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?		☐ Yes ☒ No	
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2016).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		No

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

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

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

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
JOACHIM A WEISSFELD 50 KENNEDY PLAZA SUITE 1500 PROVIDENCE, RI 02903	TRUSTEE 4 00	49,099	0	0
CITIZENS BANK OF RI ONE CITIZENS PLAZA PROVIDENCE, RI 02903	TRUSTEE 3 00	65,641	0	0
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred compensation (d)	Expense account, (e) other allowances
NONE				
Total number of other employees paid over \$50,000.				0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services.		0

Part IX-A Summary of Direct Charitable Activities

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

	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	0

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	6,630,542
b	Average of monthly cash balances.	1b	167,110
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	6,797,652
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	6,797,652
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	101,965
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	6,695,687
6	Minimum investment return. Enter 5% of line 5.	6	334,784

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	334,784
2a	Tax on investment income for 2016 from Part VI, line 5.	2a	206
b	Income tax for 2016 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	206
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	334,578
4	Recoveries of amounts treated as qualifying distributions.	4	10,000
5	Add lines 3 and 4.	5	344,578
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	344,578

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	329,000
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	329,000
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	329,000

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				344,578
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.	68,125			
b From 2012.	85,115			
c From 2013.	51,086			
d From 2014.	88,375			
e From 2015.	68,812			
f Total of lines 3a through e.	361,513			
4 Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ 329,000				
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.				329,000
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	15,578			15,578
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	345,935			
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).	52,547			
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	293,388			
10 Analysis of line 9				
a Excess from 2012.	85,115			
b Excess from 2013.	51,086			
c Excess from 2014.	88,375			
d Excess from 2015.	68,812			
e Excess from 2016.				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling. ▶					
b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)					
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year	Prior 3 years			(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .					
c "Support" alternative test—enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . .					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:	
a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))	
b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest	
2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:	
Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.	
a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed JOACHIM A WEISSFELD 50 KENNEDY PLAZA SUITE 1500 PROVIDENCE, RI 02903 (401) 274-2000	
b The form in which applications should be submitted and information and materials they should include LETTER	
c Any submission deadlines NONE	
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors NONE	

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	329,000
b <i>Approved for future payment</i>				
Total			3b	0

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1	Program service revenue					
a	_____					
b	_____					
c	_____					
d	_____					
e	_____					
f	_____					
g	Fees and contracts from government agencies					
2	Membership dues and assessments. . . .					
3	Interest on savings and temporary cash investments			14	21,429	
4	Dividends and interest from securities. . . .			14	129,539	
5	Net rental income or (loss) from real estate					
a	Debt-financed property.					
b	Not debt-financed property.					
6	Net rental income or (loss) from personal property					
7	Other investment income.			14	23	
8	Gain or (loss) from sales of assets other than inventory			18	-36,008	
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue a _____					
b	_____					
c	_____					
d	_____					
e	_____					
12	Subtotal Add columns (b), (d), and (e). .		0		114,983	0
13	Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations)			13		114,983

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

Part XVII

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

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

- b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

**Sign
Here**

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

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

**Paid
Preparer
Use Only**

Print/Type preparer's name JOACHIM A WEISSFELD	Preparer's Signature	Date	Check if self-employed ☐	PTIN P01394610
Firm's name ► HINCKLEY ALLEN & SNYDER LLP				Firm's EIN ► 05-0262309
Firm's address ► 100 WESTMINSTER STREET SUITE 1500 PROVIDENCE, RI 02903				Phone no (401) 274-2000

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>				
ART CONNECTION OF RHODE ISLAND 172 EXCHANGE ST PAWTUCKET, RI 02860	NONE	PUBLIC	PROGRAM SUPPORT	5,000
AUDUBON SOCIETY OF RHODE ISLAND 12 SANDERSON RD SMITHFIELD, RI 02917	NONE	PUBLIC	PROGRAM SUPPORT	2,500
BARRINGTON SENIOR CENTER 281 COUNTY ROAD BARRINGTON, RI 02806	NONE	PUBLIC	PROGRAM SUPPORT	2,000
BARTON CENTER 30 ENNIS RD NORTH OXFORD, MA 01537	NONE	PUBLIC	PROGRAM SUPPORT	3,000
BOY SCOUTS NARRAGANSETT COUNSEL OF PO BOX 14777 EAST PROVIDENCE, RI 02914	NONE	PUBLIC	PROGRAM SUPPORT	2,000
Total ▶ 3a				329,000

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>				
BOYS & GIRLS CLUB WOONSOCKET PO BOX 579 WOONSOCKET, RI 02895	NONE	PUBLIC	PROGRAM SUPPORT	5,000
BOYS AND GIRLS CLUBS OF PROVIDENCE 550 WICKENDEN STREET PROVIDENCE, RI 02903	NONE	PUBLIC	PROGRAM SUPPORT	10,000
BRADLEY HOSPITAL 1011 VETERANS MEMORIAL PKWY EAST PROVIDENCE, RI 02915	NONE	PUBLIC	PROGRAM SUPPORT	15,000
CAMP RUGGLES 133 STONE DAM ROAD NORTH SCITUATE, RI 02857	NONE	PUBLIC	CAMPER-SHIPS FOR LOW INCOME FAMILIES AND GROUP HOMES	2,500
CHILDREN'S FRIEND AND SERVICE 153 SUMMER STREET PROVIDENCE, RI 02903	NONE	PUBLIC	HEAD START PROGRAM	2,500
Total 				329,000
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>				
CHRISTIAN POWER HOUSE MINISTRY 87 ALTHEA STREET PROVIDENCE, RI 02907	NONE	PUBLIC	PROGRAM SUPPORT	1,000
CLARKE SCHOOL FOR THE DEAF ROUND HILL ROAD NORTHAMPTON, MA 01060	NONE	PUBLIC	PROGRAM SUPPORT	10,000
COMMUNITY PREPARATORY SCHOOL 126 SOMERSET STREET PROVIDENCE, RI 029071041	NONE	PUBLIC	SCHOLARSHIPS	5,000
CROSSROADS RI 160 BROAD STREET PROVIDENCE, RI 02903	NONE	PUBLIC	PROGRAM SUPPORT	10,000
DORCAS INTERNATIONAL INSTITUTE 220 ELMWOOD AVENUE PROVIDENCE, RI 02907	NONE	PUBLIC	PROGRAM SUPPORT	10,000
Total ▶ 3a				329,000

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>				
FARM FRESH RHODE ISLAND 1005 MAIN ST 8130 PAWTUCKET, RI 02860	NONE	PUBLIC	PROGRAM SUPPORT	5,000
FIRSTWORKS 275 WESTMINSTER 501 PROVIDENCE, RI 02903	NONE	PUBLIC	PROGRAM SUPPORT	4,000
GIRL SCOUTS OF RHODE ISLAND 125 CHARLES STREET PROVIDENCE, RI 02904	NONE	PUBLIC	PROGRAM SUPPORT	2,000
HAMILTON HOUSE 276 ANGEL STREET PROVIDENCE, RI 02906	NONE	PUBLIC	PROGRAM SUPPORT	2,000
HASBRO CHILDRENS HOSPITAL 593 EDDY STREET PROVIDENCE, RI 02903	NONE	PUBLIC	PROGRAM SUPPORT	15,000
Total 3a				329,000

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>				
HAVEN OF GRACE MINISTRIES PO BOX 224 WOONSOCKET, RI 02895	NONE	PUBLIC	PROGRAM SUPPORT	3,000
HOPE ALZHEIMERS CENTER 25 BRAYTON AVENUE CRANSTON, RI 02920	NONE	PUBLIC	PROGRAM SUPPORT	5,000
IN-SIGHT 43 JEFFERSON BLVD SUITE 31 WARWICK, RI 02886400	NONE	PUBLIC	PROGRAM SUPPORT	5,000
KENT HOSPITAL 455 TOLL GATE RD WARWICK, RI 02886	NONE	PUBLIC	PROGRAM SUPPORT	5,000
MEALS ON WHEELS 70 BATH STREET PROVIDENCE, RI 02908	NONE	PUBLIC	PROGRAM SUPPORT	1,000
Total 3a				329,000

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>				
MIRIAM HOSPITAL PO BOX H PROVIDENCE, RI 02901	NONE	PUBLIC	PROGRAM SUPPORT	8,000
PERKINS SCHOOL FOR THE BLIND 175 NORTH BEACON STREET WATERTOWN, RI 02472	NONE	PUBLIC	PROGRAM SUPPORT	40,000
PROVIDENCE PUBLIC LIBRARY 150 EMPIRE STREET PROVIDENCE, RI 02903	NONE	PUBLIC	EARLY LITERACY LEARNING CENTER	5,000
RE-FOCUS 1228 WESTMINSTER STREET PROVIDENCE, RI 02909	NONE	PUBLIC	PROGRAM SUPPORT	3,500
REACH OUT AND READ PO BOX 603442 PROVIDENCE, RI 02906	NONE	PUBLIC	PROGRAM SUPPORT	5,000
Total 3a				329,000

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>				
RHODE ISLAND COMMUNITY FOOD BANK 200 NIAN TIC AVENUE PROVIDENCE, RI 02907	NONE	PUBLIC	PROGRAM SUPPORT	10,000
RHODE ISLAND FOUNDATION ONE UNION STATION PROVIDENCE, RI 02903	NONE	PUBLIC	PROGRAM SUPPORT	20,000
RHODE ISLAND FREE CLINIC 655 BROAD STREET PROVIDENCE, RI 02907	NONE	PUBLIC	PROGRAM SUPPORT	20,000
RISD MUSEUM 224 BENEFIT ST PROVIDENCE, RI 02903	NONE	PUBLIC	PROGRAM SUPPORT	20,000
SAVE THE BAY 100 SAVE THE BAY DRIVE PROVIDENCE, RI 02905	NONE	PUBLIC	PROGRAM SUPPORT	2,500
Total ► 3a				329,000

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>				
SCHOLARSHIP FOUNDATION OF EAST PROVIDENCE PO BOX 154438 EAST PROVIDENCE, RI 02915	NONE	PUBLIC	PROGRAM SUPPORT	2,000
SOJOURNER HOUSE 386 SMITH STREET PROVIDENCE, RI 02908	NONE	PUBLIC	PROGRAM SUPPORT	10,000
SOUTH COUNTY HOME HEALTH DBA VNS HOME CARE 14 WOODRUFF AVENUE STE 7 NARRAGANSETT, RI 02882	NONE	PUBLIC	PROGRAM SUPPORT	3,000
SOUTH RI VOLUNTEERS 25 ST DOMINIC ROAD WAKEFIELD, RI 02879	NONE	PUBLIC	PROGRAM SUPPORT	2,500
ST ANDREWS SCHOOL 63 FEDERAL ROAD BARRINGTON, RI 02806	NONE	PUBLIC	PROGRAM SUPPORT	10,000
Total 				329,000
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>				
ST MARY'S HOME 420 FRUIT HILL AVENUE NORTH PROVIDENCE, RI 02911	NONE	PUBLIC	PROGRAM SUPPORT	2,500
TOCKWOTTON HOME 75 EAST STREET PROVIDENCE, RI 02906	NONE	PUBLIC	ASSISTED LIVING SUBSIDIES	7,500
TRINITY REPERTORY COMPANY 201 WASHINGTON STREET PROVIDENCE, RI 02903	NONE	PUBLIC	PROGRAM SUPPORT	7,500
VISITING NURSE HEALTH SERVICES OF NEWPORT AND BRISTOL COUNTIES 1184 EAST MAIN ROAD PORTSMOUTH, RI 02871	NONE	PUBLIC	PROGRAM SUPPORT	2,500
WASHINGTON PARK CITIZENS' ASSOCIATION 42 JILLSON STREET PROVIDENCE, RI 02905	NONE	PUBLIC	PROGRAM SUPPORT	5,000
Total 				329,000
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>				
WOMEN AND INFANTS HOSPITAL 100 DUDLEY ST 2 PROVIDENCE, RI 02905	NONE	PUBLIC	PROGRAM SUPPORT	10,000
Total 				329,000
3a				

TY 2016 Investments Corporate Bonds Schedule**Name:** IDA BALLOU LITTLEFIELD MEMORIAL TRUST**EIN:** 22-2994936

Name of Bond	End of Year Book Value	End of Year Fair Market Value
CORPORATE BONDS-FIXED INCOME	1,201,419	0

TY 2016 Investments Corporate Stock Schedule

Name: IDA BALLOU LITTLEFIELD MEMORIAL TRUST

EIN: 22-2994936

Name of Stock	End of Year Book Value	End of Year Fair Market Value
CORPORATE STOCK/MUTUAL FUNDS-SEE ATTACHED	3,131,808	0

TY 2016 Other Expenses Schedule**Name:** IDA BALLOU LITTLEFIELD MEMORIAL TRUST**EIN:** 22-2994936**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ABB LTD SPON ADR FEE	20	20		0
CASH LIABILITY-ENDING BALANCE	40	40		0

TY 2016 Other Income Schedule

Name: IDA BALLOU LITTLEFIELD MEMORIAL TRUST

EIN: 22-2994936

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
BOA CORP CLASS ACTION LITG	23	23	23

TY 2016 Other Increases Schedule**Name:** IDA BALLOU LITTLEFIELD MEMORIAL TRUST**EIN:** 22-2994936

Description	Amount
NET ASSET ADJUSTMENT	1,106
PRIOR YR GRANT RECOVERED INCLUDED IN CURRENT YR DISTRIB AMNT PART XI LINE 4	10,000

TY 2016 Taxes Schedule**Name:** IDA BALLOU LITTLEFIELD MEMORIAL TRUST**EIN:** 22-2994936

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
UNITED STATES TREASURY-2015 BALANCE DUE	294	294		0
UNITED STATES TREASURY-2016 ESTIMATES	10,000	10,000		0
FOREIGN TAXES	817	817		0