











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

Name of foundation BURROWS FOUNDATION		A Employer identification number 22-3059155	
Number and street (or P O box number if mail is not delivered to street address) PO BOX 1042		Room/suite	B Telephone number (see instructions) (315) 717-2280
City or town, state or province, country, and ZIP or foreign postal code LITTLE FALLS, NY 13365		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <div><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 checked="" type="checkbox"/> Address change<input type="checkbox"/> Name change</div>		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) \$ 4,011,452	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)	222,000			
	2 Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
	3 Interest on savings and temporary cash investments	15	15		
	4 Dividends and interest from securities . . .	62,107	62,107		
	5a Gross rents . . . . .				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	-6,662			
	b Gross sales price for all assets on line 6a 160,103				
	7 Capital gain net income (from Part IV, line 2) . . .		0		
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold . . . . .				
	c Gross profit or (loss) (attach schedule) . . . . .				
	11 Other income (attach schedule) . . . . .	-570	0		
	12 Total. Add lines 1 through 11 . . . . .	276,890	62,122		
	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) . . . . .	26	0		26
	b Accounting fees (attach schedule) . . . . .	2,850	2,138		712
	c Other professional fees (attach schedule) . . . . .				
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions) . . .	1,550	606		250
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .				
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule) . . . . .	24,792	24,722		70
	24 Total operating and administrative expenses. Add lines 13 through 23 . . . . .	29,218	27,466		1,058
	25 Contributions, gifts, grants paid . . . . .	135,894			135,894
	26 Total expenses and disbursements. Add lines 24 and 25	165,112	27,466		136,952
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	111,778			
	b Net investment income (if negative, enter -0-)		34,656		
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 . . . . .	70,312	152,121	152,121
	2 Savings and temporary cash investments . . . . .	88,225	106,608	106,608
	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)	29,630 	29,347	29,347
	b Investments—corporate stock (attach schedule) . . . . .	1,006,185 	1,074,537	1,074,537
	c Investments—corporate bonds (attach schedule) . . . . .	296,566 	295,600	295,600
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans . . . . .			
	13 Investments—other (attach schedule) . . . . .	2,116,429 	2,350,720	2,350,720
	14 Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)	 1,827 	 2,519 	 2,519	
16 <b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	3,609,174	4,011,452	4,011,452	
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 <b>Total liabilities</b> (add lines 17 through 22) . . . . .	0	0	
Net Assets or Fund Balances	<b>Foundations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
	24 Unrestricted . . . . .	3,609,174	4,011,452	
	25 Temporarily restricted . . . . .			
	26 Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 27 through 31.</b>			
	27 Capital stock, trust principal, or current funds . . . . .			
	28 Paid-in or capital surplus, or land, bldg , and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
	30 <b>Total net assets or fund balances</b> (see instructions) . . . . .	3,609,174	4,011,452	
	31 <b>Total liabilities and net assets/fund balances</b> (see instructions) .	3,609,174	4,011,452	

**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	3,609,174
2 Enter amount from Part I, line 27a . . . . .	2	111,778
3 Other increases not included in line 2 (itemize) ▶ _____ 	3	290,500
4 Add lines 1, 2, and 3 . . . . .	4	4,011,452
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	4,011,452

**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 )
<b>1a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

(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)
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

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	
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss)	<div> <div>If gain, also enter in Part I, line 7</div> <div>If (loss), enter -0- in Part I, line 7</div> </div>	<b>2</b>	-6,662
<b>3</b> 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		<b>3</b>	

**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	181,065	3,233,349	0 055999
2014	225,214	3,141,015	0 071701
2013	273,307	3,425,535	0 079785
2012	251,866	4,059,950	0 062037
2011	150,354	3,246,099	0 046318
<b>2</b> Total of line 1, column (d)			<b>2</b> 0 315840
<b>3</b> 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			<b>3</b> 0 063168
<b>4</b> Enter the net value of noncharitable-use assets for 2016 from Part X, line 5			<b>4</b> 3,873,372
<b>5</b> Multiply line 4 by line 3			<b>5</b> 244,673
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)			<b>6</b> 347
<b>7</b> Add lines 5 and 6			<b>7</b> 245,020
<b>8</b> Enter qualifying distributions from Part XII, line 4			<b>8</b> 136,952

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)**

<b>1a</b>	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>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	693
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	0
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	693
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	0
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	693
<b>6</b>	Credits/Payments		
<b>a</b>	2016 estimated tax payments and 2015 overpayment credited to 2016	<b>6a</b>	1,221
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	1,221
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	<b>8</b>	1
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .	<b>9</b>	
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .	<b>10</b>	527
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2017 estimated tax</b> <input type="checkbox"/> 527 <b>Refunded</b> <input type="checkbox"/>	<b>11</b>	0

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> 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? . . . . .	<b>1a</b>	No
<b>b</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 <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	<b>1b</b>	No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	<b>1c</b>	No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ 0 (2) On foundation managers <input type="checkbox"/> \$ 0		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ 0		
<b>2</b> 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	<b>2</b>	No
<b>3</b> 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 . . . . .	<b>3</b>	No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>4a</b>	No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>4b</b>	
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . If "Yes," attach the statement required by General Instruction T	<b>5</b>	No
<b>6</b> 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? . . . . .	<b>6</b>	Yes
<b>7</b> 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 . . . . .	<b>7</b>	Yes
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> NY		
<b>b</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 .	<b>8b</b>	Yes
<b>9</b> 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 . . . . .	<b>9</b>	No
<b>10</b> Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses . . . . .	<b>10</b>	No

**Part VII-A Statements Regarding Activities** (continued)

<b>11</b>	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).	<b>11</b>		<b>No</b>
<b>12</b>	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)	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>►</b> N/A	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of <b>►</b> CAROLYN ZAKLUKIEWICZ Telephone no <b>►</b> (315) 717-2280			

Located at **►** PO BOX 1042 LITTLE FALLS NYZIP+4 **►** 13365

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

**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.**

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

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

<b>5a</b> During the year did the foundation pay or incur any amount to <b>(1)</b> Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>(2)</b> Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>(3)</b> Provide a grant to an individual for travel, study, or other similar purposes? <span style="float:right;"><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</span> <b>(4)</b> Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>(5)</b> Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>			
<b>b</b> If any answer is "Yes" to 5a(1)–(5), did <b>any</b> 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)? <span style="float:right;"><input type="checkbox"/></span> Organizations relying on a current notice regarding disaster assistance check here. <span style="float:right;">▶ <input type="checkbox"/></span>	<b>5b</b>		<b>No</b>
<b>c</b> 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? <span style="float:right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span> <i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>			
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <i>If "Yes" to 6b, file Form 8870</i>	<b>6b</b>		<b>No</b>
<b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>b</b> If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>	<b>7b</b>		

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

<b>1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).</b>				
(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
JI TING WANG PO BOX 1042 LITTLE FALLS, NY 13365	TRUSTEE 2 00	0	0	0
CAROLYN ZAKLUKIEWICZ PO BOX 1042 LITTLE FALLS, NY 13365	TRUSTEE 2 00	0	0	0
<b>2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."</b>				
(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				
<b>Total number of other employees paid over \$50,000.</b> <span style="float:right;">▶</span>				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		
<b>Total</b> number of others receiving over \$50,000 for professional services. . . . . ►		0

**Part IX-A Summary of Direct Charitable Activities**

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

	Expenses
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**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
<b>1</b>	
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b>	
<b>Total.</b> Add lines 1 through 3 . . . . . ►	0

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	1,366,352
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	212,766
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	2,353,239
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	3,932,357
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	3,932,357
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	58,985
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	3,873,372
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	193,669

**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.)

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	193,669
<b>2a</b>	Tax on investment income for 2016 from Part VI, line 5.	<b>2a</b>	693
<b>b</b>	Income tax for 2016 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	693
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	192,976
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	0
<b>5</b>	Add lines 3 and 4.	<b>5</b>	192,976
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	192,976

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	136,952
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	136,952
<b>5</b>	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).	<b>5</b>	0
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	136,952

**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
<b>1</b> Distributable amount for 2016 from Part XI, line 7				192,976
<b>2</b> Undistributed income, if any, as of the end of 2016				
<b>a</b> Enter amount for 2015 only. . . . .			0	
<b>b</b> Total for prior years 20____, 20____, 20____		0		
<b>3</b> Excess distributions carryover, if any, to 2016				
<b>a</b> From 2011. . . . .				
<b>b</b> From 2012. . . . .				49,774
<b>c</b> From 2013. . . . .				102,652
<b>d</b> From 2014. . . . .				68,939
<b>e</b> From 2015. . . . .				20,272
<b>f</b> <b>Total</b> of lines 3a through e. . . . .	241,637			
<b>4</b> Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ 136,952				
<b>a</b> Applied to 2015, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2016 distributable amount. . . . .				136,952
<b>e</b> Remaining amount distributed out of corpus	0			
<b>5</b> Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a) )	56,024			56,024
<b>6</b> <b>Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	185,613			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .		0		
<b>c</b> 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		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017 . . . . .				0
<b>7</b> 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			
<b>8</b> Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions). . . . .	0			
<b>9</b> <b>Excess distributions carryover to 2017.</b> Subtract lines 7 and 8 from line 6a . . . . .	185,613			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2012. . . . .				
<b>b</b> Excess from 2013. . . . .				96,402
<b>c</b> Excess from 2014. . . . .				68,939
<b>d</b> Excess from 2015. . . . .				20,272
<b>e</b> Excess from 2016. . . . .				

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

<b>1a</b> 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>b</b> Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)					
<b>2a</b> 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>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> 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.)**

<b>1 Information Regarding Foundation Managers:</b>	
<b>a</b> 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>b</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	
<b>2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:</b>	
Check here <input type="checkbox"/> 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.	
<b>a</b> The name, address, and telephone number or e-mail address of the person to whom applications should be addressed CAROLYN ZAKLUKIEWICZ PO BOX 1042 LITTLE FALLS, NY 13365 (315) 717-2280	
<b>b</b> The form in which applications should be submitted and information and materials they should include REASONABLE MANNER & LEGIBLE	
<b>c</b> Any submission deadlines NO DEADLINES	
<b>d</b> Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors NO RESTRICTIONS	

**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)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total</b> . . . . .			<b>3a</b>	135,894
<b>b</b> <i>Approved for future payment</i>				
<b>Total</b> . . . . .			<b>3b</b>	0

Enter gross amounts unless otherwise indicated

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

Form **990-PF** (2016)

## Part XVII

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

[illegible]

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

- | b If "Yes," complete the following schedule |                          |                                 |
|---|--------------------------|---------------------------------|
| (a) Name of organization                    | (b) Type of organization | (c) Description of relationship |
|   |                          |                                 |
|   |                          |                                 |
|   |                          |                                 |
|   |                          |                                 |

**Sign  
Here**

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

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

**Paid  
Preparer  
Use Only**

Print/Type preparer's name  JOSEPH A HARDICK CPA	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN  P00435581
Firm's name ► DANNIBLE & MCKEE LLP				Firm's EIN ► 33-0996661
Firm's address ► 221 SOUTH WARREN ST  SYRACUSE, NY 13202				Phone no (315) 472-9127

**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 )
FROM K-1 POWERSHARES DB COMMUNITY INDEX TRACKING FUND	P	2016-01-01	2016-12-31
FROM K-1 POWERSHARES DB COMMUNITY INDEX TRACKING FUND	P	2016-01-01	2016-12-31
FROM K-1 TWIN LAKE TOTAL RETURN PARTNERS	P	2016-01-01	2016-12-31
FROM K-1 TWIN LAKE TOTAL RETURN PARTNERS	P	2016-01-01	2016-12-31
CHARLES SCHWAB & CO , INC - PUBLICLY TRADED SECURITIES	P	2016-01-01	2016-12-31
CAPITAL GAINS DIVIDENDS	P		

**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)
			-276
			-27
			50,630
			-54,265
159,902		162,827	-2,925
201			201

**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	
			-276
			-27
			50,630
			-54,265
			-2,925
			201

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)				
<b>a</b> <i>Paid during the year</i>				
413 STRONG PO BOX 101425 NASHVILLE, TN 37224	N/A	PC	2016 DONATION	100
ABRAHAM HOUSE 1203 KEMBLE STREET UTICA, NY 13501	N/A	PC	2016 DONATION	250
AMAZING GRACIE GIFT FOUNDATION PO BOX 134 MOHAWK, NY 13407	N/A	PC	2016 DONATION	500
AMERICAN CANCER SOCIETY PO BOX 1480 SYRACUSE, NY 132011480	N/A	PC	HERKIMER COUNTY RELAY FOR LIFE	250
AMERICAN LEGION POST NO 31 100 WEST MAIN STREET LITTLE FALLS, NY 13365	N/A	PC	BOYS STATE FUND	350
<b>Total . . . . .</b> ▶ <b>3a</b>				135,894

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)				
<b>a</b> <i>Paid during the year</i>				
BERKSHIRE SCHOOL 245 NORTH UNDERMOUNTAIN ROAD SHEFFIELD, MA 01257	N/A	PC	TUITION SCHOLARSHIP	10,276
CATHOLIC CHARITIES OF HERKIMER COUNTY 61 WEST STREET ILION, NY 13357	N/A	PC	MEMORIAL DONATION	50
CHRISTMAS FOR CHILDREN PROGRAM 41 NORTH MAIN STREET DOLGEVILLE, NY 13329	N/A	NC	2016 DONATION	250
CHRISTMAS ON MAIN STREET 536 EAST MAIN STREET LITTLE FALLS, NY 13365	N/A	NC	2016 DONATION	250
CINCINNATI ASSOC BLIND & VISUALLY IMPAIRED 2045 GILBERT AVENUE CINCINNATI, OH 45202	N/A	PC	2016 DONATION	500
<b>Total . . . . .</b> ▶ <b>3a</b>				135,894



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)				
<b>a</b> <i>Paid during the year</i>				
CNY VETERAN'S OUTREACH CENTER 726 WASHINGTON STREET UTICA, NY 13502	N/A	PC	MEMORIAL DONATION	100
COMMUNITY CHEST 15 JACKSON ST LITTLE FALLS, NY 13365	N/A	PC	2016 CONTRIBUTION	2,000
DARTMOUTH-HITCHCOCK HEALTH NCCC ONE MEDICAL CENTER DRIVE HB 7070 LEBANON, NH 037560001	N/A	PC	TEAM 500-X	10,000
ESF COLLEGE FOUNDATION 1 FORESTRY SYRACUSE, NY 132102778	N/A	PC	2016 CONTRIBUTION	1,000
FRIENDS OF BASSETT 1 ATWELL ROAD COOPERSTOWN, NY 133269980	N/A	PC	CAPITAL CAMPAIGN PLEDGE	10,000
<b>Total . . . . .</b> <b>3a</b>				135,894

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)				
<b>a</b> <i>Paid during the year</i>				
FRIENDS OF LEWIS COUNTY HOSPICE PO BOX 266 LOWVILLE, NY 13367	N/A	PC	2016 DONATION	100
GTO SPORTS PROMOTIONS PO BOX 323 ALEXANDRIA BAY, NY 13607	N/A	NC	2016 DONATION	225
HEIFER PROJECT INTERNATIONAL PO BOX 8058 LITTLE ROCK, AR 72203	N/A	PC	2016 CONTRIBUTION	1,000
HERKIMER COUNTY COLLEGE FOUNDATION 100 RESERVOIR ROAD HERKIMER, NY 13350	N/A	PC	CHILDRENS CENTER SPONSORSHIP	1,000
HERKIMER COUNTY DAY AT THE FARM PO BOX 122 795 SNELLS BUSH ROAD LITTLE FALLS, NY 13365	N/A	PC	2016 DONATION	500
<b>Total . . . . .</b> ► <b>3a</b>				135,894

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)				
<b>a</b> <i>Paid during the year</i>				
HERKIMER COUNTY HISTORICAL SOCIETY 400 NORTH MAIN STREET HERKIMER, NY 13350	N/A	PC	2016 MEMBERSHIP	100
HERKIMER COUNTY HUMANE SOCIETY PO BOX 73 MOHAWK, NY 13407	N/A	PC	2016 DONATION	100
HERKIMER COUNTY SOIL & CONSERVATION DISTRICT 5653 STATE ROUTE 5 HERKIMER, NY 13350	N/A	PC	2016 ENVIROTHON	250
HERKIMER HIGH SCHOOL FOOTLIGHTERS 172 MAIN ROAD HERKIMER, NY 13350	N/A	PC	2016 DONATION	40
HOLY FAMILY PARISH 763 EAST MAIN STREET LITTLE FALLS, NY 13365	N/A	PC	MEMORIAL CONTRIBUTION	100
<b>Total . . . . . ▶</b> <b>3a</b>				135,894

**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)				
<b>a</b> <i>Paid during the year</i>				
HOSPICE & PALLIATIVE CARE INC 4277 MIDDLE SETTLEMENT ROAD NEW HARTFORD, NY 13413	N/A	PC	2016 CONTRIBUTIONS	20,000
ILION ANGELS POP WARNER 104 ELM STREET ILION, NY 13357	N/A	NC	2016 DONATION	200
INDIAN CASTLE CHURCH R&P SOCIETY PO BOX 172 LITTLE FALLS, NY 11365	N/A	PC	2016 DONATION	50
JARROW MONTESSORI SCHOOL 3900 ORANGE COURT BOULDER, CO 80304	N/A	PC	TUITION SCHOLARSHIP	15,405
LEWIS COUNTY HISTORICAL SOCIETY 7552 S STATE STREET PO BOX 446 LOWVILLE, NY 13367	N/A	PC	2016 CONTRIBUTION	100
<b>Total . . . . . ▶</b> <b>3a</b>				135,894

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)				
<b>a</b> <i>Paid during the year</i>				
LITTLE FALLS BEAUTIFICATION COMMITTEE 18 NORTH ANN STREET LITTLE FALLS, NY 13365	N/A	NC	2016 CONTRIBUTION	100
LITTLE FALLS CANAL DAYS CELEBRATION 15 JACKSON STREET LITTLE FALLS, NY 13365	N/A	NC	2016 DONATION	200
LITTLE FALLS COMMUNITY OUTREACH INC 16 JACKSON STREET LITTLE FALLS, NY 13365	N/A	PC	2016 CONTRIBUTION	5,000
LITTLE FALLS ELKS LODGE #42 579 BURT ROAD LITTLE FALLS, NY 13365	N/A	PC	HOLE SPONSORSHIP	100
LITTLE FALLS HISTORICAL SOCIETY 319 S ANN STREET LITTLE FALLS, NY 13365	N/A	PC	2016 MEMBERSHIP	200
<b>Total . . . . .</b> <b>3a</b>				135,894

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)				
<b>a</b> <i>Paid during the year</i>				
LITTLE FALLS HOSPITAL 140 BURWELL STREET LITTLE FALLS, NY 13365	N/A	PC	2016 DEVELOPMENT FUND DRIVE	10,000
LITTLE FALLS JRSR HIGH SCHOOL YEARBOOK ONE HIGH SCHOOL ROAD LITTLE FALLS, NY 13365	N/A	PC	2016 DONATION	280
LITTLE FALLS LITTLE LEAGUE PO BOX 992 LITTLE FALLS, NY 13365	N/A	PC	2016 DONATION	100
LITTLE FALLS POLICE BENEVOLENT ASSOCIATION 649 E MAIN STREET LITTLE FALLS, NY 13365	N/A	PC	SPONSORSHIP	700
LITTLE FALLS ROTARY CLUB PO BOX 181 LITTLE FALLS, NY 13362	N/A	PC	2016 CONTRIBUTION	200
<b>Total . . . . .</b> ► <b>3a</b>				135,894

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)				
<b>a</b> <i>Paid during the year</i>				
LITTLE SISTERS OF THE POOR 964 MAIN STREET PAWTUCKET, RI 02860	N/A	PC	2016 DONATION	200
LYONS FALLS ALIVE PO BOX 702 LYONS FALLS, NY 13368	N/A	PC	2016 LYONS FALLS FESTIVAL	100
LYONS FALLS FIRE DEPARTMENT PO BOX 520 LYONS FALLS, NY 11368	N/A	PC	2016 DONATION	250
LYONS FALLS YOUTH BASEBALL 4260 STATE RTE 26 TURIN, NY 13473	N/A	PC	2016 DONATION	100
METROPOLITAN MUSEUM OF ART 1000 FIFTH AVENUE NEW YORK, NY 10028		PC	DONATION	250
<b>Total . . . . .</b> ▶ <b>3a</b>				135,894

**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)				
<b>a</b> <i>Paid during the year</i>				
MOHAWK VALLEY CENTER FOR ARTS 401 S ANN STREET LITTLE FALLS, NY 13365	N/A	PC	2016 CONTRIBUTION	500
MOHAWK VALLEY CHORAL SOCIETY PO BOX 46 LITTLE FALLS, NY 13365	N/A	PC	2016 CONTRIBUTION	1,000
NORTHEAST KIDNEY FOUNDATION 501 NEW KARNER ROAD SUITE 6 ALBANY, NY 12205	N/A	PC	10K FOR KIDNEY SPONSORSHIP	150
NORTHFIELD MOUNT HERMON SCHOOL 1 LAMPLIGHTER WAY MOUNT HERMON, MA 01354	N/A	PC	2016 CONTRIBUTION	1,000
NYS 4-H FOUNDATION 248 GRANT AVE SUITE II-A AUBURN, NY 13021	N/A	PC	2016 DONATION	500
<b>Total . . . . .</b> ► <b>3a</b>				135,894



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)				
<b>a</b> <i>Paid during the year</i>				
OESJ HAWK YEARBOOK 6486 STATE HGWY 29 ST JOHNSVILLE, NY 13452	N/A	PC	2015-2016 YEARBOOK DONATION	80
PORT LEYDEN VOLUNTEER FIRE DEPARTMENT 3387 DOUGLAS STREET PORT LEYDEN, NY 13433	N/A	PC	2016 DONATION	1,250
SOUTH LEWIS MERCHANTS BABE RUTH BASEBALL PO BOX 321 TURIN, NY 13473	N/A	NC	2016 DONATION	100
ST MARGARET MARY PARISH 610 DIVISION STREET NEENAH, WI 54956	N/A	PC	MEMORIAL DONATION	100
ST FRANCIS DE SALES CATHOLIC SCHOOL 220 HENRY STREET HERKIMER, NY 13350	N/A	PC	2016 DONATION	100
<b>Total . . . . . ▶</b> <b>3a</b>				135,894

**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)				
<b>a</b> <i>Paid during the year</i>				
STAGE TWO THEATRE COMPANY 14 MICHIGAN STREET MOHAWK, NY 13407	N/A	NC	2016 DONATION	100
SYRACUSE PULP & PAPER FOUNDATION SUNY COLLEGE OF ESF 1 FORESTRY SYRACUSE, NY 132102778	N/A	PC	DONATION	1,000
THE DWIGHT SCHOOL FOUNDATION 291 CENTRAL PARK WEST NEW YORK, NY 10024	N/A	PC	2016 DONATION	3,000
THE WOMEN'S FUND OF HERKIMER 2 WILLIAMS STREET CLINTON, NY 13323	N/A	PC	DONATION	250
UNIVERSITY OF BRITISH COLUMBIA 126 PARK AVE BRIDGEPORT, CT 06604	N/A	PC	TUITION SCHOLARSHIP	13,038
<b>Total . . . . . ▶</b> <b>3a</b>				135,894

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)				
<b>a</b> <i>Paid during the year</i>				
VALLEY HEALTH SERVICES INC 690 WEST GERMAN STREET HERKIMER, NY 13350	N/A	PC	2016 CONTRIBUTION	5,000
VIOLET FESTIVAL COMMITTEE PO BOX 83 DOLGEVILLE, NY 13329	N/A	NC	2016 DONATION	200
WARREN COUNTY FOP 103 1343 WEST STREET ROUTE 122 LEBANON, OH 45036	N/A	PC	2016 DONATION	450
YMCA 15 JACKSON STREET LITTLE FALLS, NY 13365	N/A	PC	2016 CONTRIBUTIONS AND GOLF HOLE SPONSORSHIP	15,250
<b>Total . . . . . ►</b> <b>3a</b>				135,894

**TY 2016 Accounting Fees Schedule****Name:** BURROWS FOUNDATION**EIN:** 22-3059155

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
ACCOUNTING FEES	2,850	2,138		712

**TY 2016 Investments Corporate Bonds Schedule****Name:** BURROWS FOUNDATION**EIN:** 22-3059155

<b>Name of Bond</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
OPPENHEIMER INTL BOND	15,644	15,644
AIR PROD & CHEMIC	25,219	25,219
ASTRAZENECA PLC	24,927	24,927
BANK OF MONTREAL	14,807	14,807
COSTCO WHOLESALE	24,956	24,956
CR BARD INCORP	24,909	24,909
EMC CORP MASS	24,375	24,375
GENERAL ELECTRIC	10,020	10,020
INTEL CORP	10,016	10,016
OCCIDENTAL PETR	25,571	25,571
PNC FUNDING CORP	15,407	15,407
QUALCOMM INC	24,964	24,964
STRYKER CORP	24,883	24,883
TJX COMPANIES	15,249	15,249
ORACLE CORPORATION 1.9%	14,653	14,653

**TY 2016 Investments Corporate Stock Schedule**

**Name:** BURROWS FOUNDATION  
**EIN:** 22-3059155

Name of Stock	End of Year Book Value	End of Year Fair Market Value
PATRIOT FEDERAL BANK	205,200	205,200
ANTHEM INC	11,502	11,502
APPLE INC	20,848	20,848
BANK OF NY MELLON CP	15,399	15,399
BAXTER INTERNATIONAL INC	11,750	11,750
BLACKROCK INC	15,222	15,222
BOEING CO	10,119	10,119
CHEVRON CORPORATION	12,947	12,947
COLGATE-PALMOLIVE CO	9,162	9,162
DEERE & CO	15,456	15,456
EXXON MOBIL CORPORATION	8,123	8,123
GENERAL ELECTRIC COMPANY	13,430	13,430
HONEYWELL INTERNATIONAL	11,585	11,585
HSBC HLDGS PLC ADR NEW	9,844	9,844
INTEL CORP	9,974	9,974
JPMORGAN CHASE & CO	19,847	19,847
M&T BANK CORPORATION	13,296	13,296
MEDTRONIC INC	12,821	12,821
MERK & CO INC NEW	12,068	12,068
MICROSOFT CORP	11,496	11,496
NEXTERA ENERGY INC	13,738	13,738
OCCIDENTAL PETE CORP	7,835	7,835
PEPSICO INCORPORATED	10,986	10,986
PFIZER INCORPORATED	13,154	13,154
PHILLIPS 66	7,777	7,777
SCHLUMBERGER LTD	13,432	13,432
SPECTRA ENERGY COPR	8,629	8,629
TIME WARNER INC NEW	15,927	15,927
TRAVELERS COMPANIES INC	11,630	11,630
VERIZON COMMUNICATIONS	10,943	10,943

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
WAL-MART STORES INC	7,603	7,603
WILLIAMS SONOMA	9,194	9,194
ISHARES TR MSCI EAFE	121,740	121,740
ISHARES TR RUSSELL 1000	97,032	97,032
ISHARES TR RUSSELL 2000	59,334	59,334
SPDR GOLD TRUST	30,691	30,691
VANGUARD REIT	24,759	24,759
VENTAS INC	9,065	9,065
BB&T CORPORATION	19,043	19,043
FASTENAL CO	8,222	8,222
W E C ENERGY GROUP	10,264	10,264
ISHARES CORE MSCI	61,128	61,128
ISHARES TIPS BOND ETF	16,975	16,975
ADVANSIX INC	89	89
CISCO SYSTEMS INC	6,497	6,497
CVS HEALTH CORP	16,176	16,176
US BANK CORP	12,585	12,585

**TY 2016 Investments Government Obligations Schedule****Name:** BURROWS FOUNDATION**EIN:** 22-3059155**US Government Securities - End  
of Year Book Value:**

29,347

**US Government Securities - End  
of Year Fair Market Value:**

29,347

**State & Local Government  
Securities - End of Year Book  
Value:**

0

**State & Local Government  
Securities - End of Year Fair  
Market Value:**

0



**TY 2016 Investments - Other Schedule****Name:** BURROWS FOUNDATION**EIN:** 22-3059155

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
GOLD EAGLE COINS	FMV	1,718,850	1,718,850
TWIN LAKE TOTAL RETURN PARTNERS, L.P.	FMV	631,870	631,870

**TY 2016 Legal Fees Schedule****Name:** BURROWS FOUNDATION**EIN:** 22-3059155

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	26	0		26

**TY 2016 Other Assets Schedule****Name:** BURROWS FOUNDATION**EIN:** 22-3059155**Other Assets Schedule**

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
PREPAID EXCISE TAX	121	527	527
ACCRUED DIVIDENDS RECEIVABLE	1,706	1,992	1,992

**TY 2016 Other Expenses Schedule****Name:** BURROWS FOUNDATION**EIN:** 22-3059155**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT EXPENSES	24,722	24,722		0
BANK CHARGES	70	0		70

**TY 2016 Other Income Schedule****Name:** BURROWS FOUNDATION**EIN:** 22-3059155**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
FROM K-1 POWERSHARES DB COMMODITY INDEX TRACKING FUND IRC SEC 1256 INCOME	-530		-530
FROM K-1 POWERSHARES DB COMMODITY INDEX TRACKING FUND IRC SEC 1256 INCOME	-40		-40

**TY 2016 Other Increases Schedule**

**Name:** BURROWS FOUNDATION  
**EIN:** 22-3059155

Description	Amount
UNREALIZED GAIN ON INVESTMENTS	290,500

**TY 2016 Taxes Schedule****Name:** BURROWS FOUNDATION**EIN:** 22-3059155

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FILING FEES	250	0		250
FOREIGN TAXES	606	606		0
EXCISE TAXES	694	0		0

<b>Schedule B</b> (Form 990, 990-EZ, or 990-PF) <small>Department of the Treasury Internal Revenue Service</small>	<b>Schedule of Contributors</b>  ▶ <b>Attach to Form 990, 990-EZ, or 990-PF</b> ▶ <b>Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <u>www.irs.gov/form990</u></b>	OMB No 1545-0047  <b>2016</b>
	<b>Name of the organization</b> BURROWS FOUNDATION	<b>Employer identification number</b> 22-3059155

Organization type (check one)

<b>Filers of:</b>	<b>Section:</b>
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)( ) (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 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 33<sup>1</sup>/<sub>3</sub>% 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).



<b>Name of organization</b> BURROWS FOUNDATION	<b>Employer identification number</b> 22-3059155
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<b>Part I</b> <b>Contributors</b> (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	BURROWS PAPER CORPORATION	\$ 222,000	Person <input checked="" type="checkbox"/>
	501 WEST MAIN STREET		Payroll <input type="checkbox"/>
	LITTLE FALLS, NY 13365		Noncash <input type="checkbox"/>
(Complete Part II for noncash contributions )			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
(Complete Part II for noncash contributions )			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
(Complete Part II for noncash contributions )			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
(Complete Part II for noncash contributions )			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
(Complete Part II for noncash contributions )			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
(Complete Part II for noncash contributions )			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
(Complete Part II for noncash contributions )			

Employer identification number

22-3059155

Part II	Noncash Property
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(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ _____	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ _____	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ _____	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ _____	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ _____	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ _____	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ _____	

<b>Name of organization</b> BURROWS FOUNDATION	<b>Employer identification number</b> 22-3059155
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<b>Part III</b>	<b>Exclusively</b> 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 <b>exclusively</b> religious, charitable, etc., contributions of <b>\$1,000 or less</b> for the year. (Enter this information once. See instructions.) ► \$ _____ Use duplicate copies of Part III if additional space is needed
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
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	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
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	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
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	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
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