

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.lrs.gov/form990.

OMB No 1545-0047 2016 Open to Public Inspection

A	For the	e 2016 calendar year, or tax year beginning and e	ending		
В	Check if applicab	C Name of organization		D Employer identifi	cation number
Г	Addre	TEMPLE ISRAEL TRUST FUND			
	Name Chang			23-7	169054
	Initial return		Room/surte	E Telephone numbe	
Ē	Final	66 CALMON CORPERO		•	622-6171
_	termir ated			G Gross receipts \$	329,663.
	Amen			H(a) Is this a group re	
	Applic			for subordinates	
	pendi	SAME AS C ABOVE		H(b) Are all subordinates in	. — —
$\overline{1}$	Tax-ex	empt status X 501(c)(3)	r 527	1 ' '	list. (see instructions)
		te: ► N/A		H(c) Group exemptio	•
		organization: ☐ Corporation X Trust ☐ Association ☐ Other ►	L Year		A State of legal domicile: NH
	art I	Summary			
	1	Briefly describe the organization's mission or most significant activities: TO PR	ROVIDE	FUNDS FOR	RELIGIOUS
Activities & Governance		ACTIVITIES.			
Ē	2	Check this box if the organization discontinued its operations or disposit	ed of more	than 25% of its net as	ssets.
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	5
Ğ	1	Number of independent voting members of the governing body (Part VI, line 1b)	•• ••	4	5
8	5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)	•	5	0
Ě	6	Total number of volunteers (estimate if necessary)	• •	6	0
Ę	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
⋖		Net unrelated business taxable income from Form 990-T, line 34		7b	0.
		RECEIVED	111	Prior Year	Current Year
an an	8	Contributions and grants (Part VIII, line 1h)	ပ္ကု 🗀	0.	0.
ž	9	* 1001 I	8	0.	0.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u>v</u>	24,216.	24,880.
ď	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII column (A), line 12)		24,216.	24,880.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	23,033.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
G	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
per	h	Total fundraising expenses (Part IX, column (D), line 25)	0.		
Ä	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<u> </u>	144.	1,129.
	1	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	··· ├─	144.	24,162.
		Revenue less expenses. Subtract line 18 from line 12		24,072.	718.
50	.0	Tovertae 1999 Ordertaee. Gabataet line 19 Hoff line 12	Re	ginning of Current Year	End of Year
age	20	Total assets (Part X, line 16)	50	882,404.	883,122.
ASS	21	Total liabilities (Part X, line 26)		0.	0.
Net Assets or Fund Balances	22	Net assets or fund balances. Subtract line 21 from line 20	<u> </u>	882,404.	883,122.
	art II	Signature Block			005,122.
_		lties of perjury, I declare that I have examined this return, including accompanying schedules	and statem	ents, and to the best of m	v knowledge and belief, it is
		t, and complete. Declaration of preparer (other than officer) is based on all information of whi			,,,,,
		I WILLIAM TO THE STATE OF THE S		5-5-1	7
Sig	ın	Signature of officer		Date	
He		JOHN WEBER, TRUSTEE			
		Type or print name and title			
_		Print/Type preparer's name Pressater's signatural] [Date Check	PTIN
Pai	đ	MARIE C. MCKAY	· lo	4/13/17 self-employ	P00294931
	parer	Firm's name BIGELOW & COMPANY, CPA, PLLC		Firm's EIN	02-0394333
	Only	Firm's address 500 COMMERCIAL STREET			
	-	MANCHESTER, NH 03101		Phone no. 60	36277659
Ma	y the II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No
_	001 11-		ns.		Form 990 (2016)
					1

	t III Statement of Program Service Accomplishments							
- ai								
1	Check if Schedule O contains a response or note to any line in this Part III							
•	TO PROVIDE FUNDS FOR RELIGIOUS ACTIVITIES.							
	Did the organization undertake any significant program services during the year which were not listed on the							
2	prior Form 990 or 990-EZ?							
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No							
4	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and							
40	revenue, if any, for each program service reported. (Code) (Expenses \$24,162. including grants of \$23,033.) (Revenue \$)							
4a	(Code) (Expenses \$							
4b	(Code) (Expenses \$							
4c	(Code) (Expenses \$							
4d	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)							
40	24.162							

Form **990** (2016)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	_1_	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	İ		
	during the tax year? If "Yes," complete Schedule C, Part II	4_		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or]		}
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X_
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		_X_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8_		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for		}	
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9_		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	*	Š	D. i
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		<u>X</u>
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	<u> </u>
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		_X_
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			7.7
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40		v
L	Schedule D, Parts XI and XII	12a		X
Ø	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	105		v
40	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13		X
13 14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
14a b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	1-1-0		-
D	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	``		
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	`		_ _
. •	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
•	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		х
		_	000	

-			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
ь	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	2 0b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	i
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			İ
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		ĺ
ď	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete		i	į
	Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			ĺ
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	į 👑	.45	
	instructions for applicable filing thresholds, conditions, and exceptions):			i I
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			ļ
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	l .	'	ĺ
	Part V, line 1	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990	(2016)

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

Note. See the instructions for additional information the organization must report on Schedule O. **b** Enter the amount of reserves the organization is required to maintain by the states in which the

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year?

Section 501(c)(29) qualified nonprofit health insurance issuers.

organization is licensed to issue qualified health plans

a Is the organization licensed to issue qualified health plans in more than one state?

Form 990 (2016)

X

13a

14a

13b

13c

13

TEMPLE ISRAEL TRUST FUND 23-7169054 Form 990 (2016) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. \mathbf{x} Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 X officer, director, trustee, or key employee? 2 -- - -----Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 Did the organization have members or stockholders? 6 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? X 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: <u>8a</u> The governing body? Each committee with authority to act on behalf of the governing body? X 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a X b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. k 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done. 12c X Did the organization have a written whistleblower policy? 13 13 X 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official X 15a X Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed NONE 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: JOHN WEBER - 603-622-6171 SALMON STREET, MANCHESTER NH 03104

Form	$\alpha \alpha \alpha$	/2016)	

TEMPLE ISRAEL TRUST FUND

23-7169054

Page 7

Part, VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII	

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A)	(A) (B) (C) Name and Title Average							(D)	(E)	(F)
Name and Title	Average	(do	Position to not check more than one) than	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	is bot or/trus	h an	compensation	compensation	amount of
	week	5	<u> </u>		T	1	, 	from	from related	other
	hours for	drect				-		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	10 99	stee			nsate		(W-2/1099-MISC)	(11 2 1000 1100)	organization
	organizations	trust	Institutional trustee		èe d	Highest compensated employee		, ,		and related
	below	ydus	rtette	ĕ	E E	hesto	iệi.			organizations
	(list any hours for related organizations below line)	直	할	Officer	<u>\$</u>	운동	호			
(1) GARY SINGER	1.00					l				
TRUSTEE		X	_	<u> </u>	┞_	<u> </u>		0.	0.	0.
(2) JOHN WEBER	1.00									
TRUSTEE		X		<u> </u>	辶	<u> </u>	_	0.	0.	0.
(3) BRIAN GRODMAN	1.00					ł				1
TRUSTEE		X	<u> </u>	<u></u>	<u> </u>			0.	0.	0.
(4) STEPHEN SAULTEN	1.00			ļ	l				_	_
TRUSTEE	- 	X	<u> </u>	<u> </u>	<u> </u>	_		0.	0.	0.
(5) HARRY SHEPLER	1.00				1			_	_	_
TRUSTEE				_	↓_	ļ_		0.	0.	0.
					1					
				_	<u> </u>	ļ				
		-								
			<u> </u>	_	<u> </u>	↓			·	
		ł	1			1				
		-	 	 -	├-	├		<u> </u>		
		ł								t:
	- 	-	-	-	├	┢				
	<u> </u>	ł	Ì)	Ì	•				li .
		-	-	-	├-	┢		 		
	·	}		1	}	1				li
	- 	 -	 -	 —	+-	-	_			
		ĺ			l					
		┢╌	-	╁╌	\vdash	 -	-			
	 	1								
		┢	 		╁╴	 -	<u> </u>			
		1		ļ				ļ		
			\vdash	\vdash	†-	1				
		1		1	ļ					
		 	T	T	†	\vdash	-	<u> </u>		
		1	}	1	1	[
		1	T	T	1	1	\vdash			
		1		l						
					_					

TEMPLE ISRAEL TRUST FUND

23-7169054

Page 8

Form 990 (2016)

Form 990 (2016)

Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated (D) Revenue excluded from tax under Total revenue Related or exempt function business sections 512 - 514 revenue revenue tributions, Gifts, Grants Other Similar Amounts 1 a Federated campaigns **b** Membership dues 1b c Fundraising events 1c d Related organizations 1đ e Government grants (contributions) 1e f All other contributions, gifts, grants, and and Other similar amounts not included above g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f **Business Code** Program Service Revenue f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) 29,663. 29,663 Income from investment of tax-exempt bond proceeds (i) Real (ii) Personal 6 a Gross rents **b** Less: rental expenses . . . c Rental income or (loss) ... d Net rental income or (loss) 7 a Gross amount from sales of (i) Secunties (ii) Other assets other than inventory 300,000. b Less' cost or other basis and sales expenses 304,783. c Gain or (loss) . . <4,783.**d** Net gain or (loss) <**4**,783. <4,783. 8 a Gross income from fundraising events (not Other Revenue including \$ _ ___ of contributions reported on line 1c). See b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See **b** Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances **b** Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions. 24,880 29,663 <4,783.>

Form 990 (2016) TEMPLE ISRAEL Part IX Statement of Functional Expenses Section 501(c)(2) and 501(c)(4) proprietions must complete all columns. All other organizations must complete column (A)

<u> </u>	Check if Schedule O contains a respons			ompiete column (79.	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	23,033.	23,033.	J	
2	Grants and other assistance to domestic	20,000.	237033.		. 4
-	Individuals. See Part IV, line 22	Ì			, , *.
3	Grants and other assistance to foreign			•	
Ŭ	organizations, foreign governments, and foreign				-3
	individuals. See Part IV, lines 15 and 16			·	6
4	Benefits paid to or for members				<u> </u>
5	Compensation of current officers, directors,				· · · · · · · · · · · · · · · · · · ·
•	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
•	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Decimalitations				
11	Fees for services (non-employees):				
''a	Management				
ь	Land				
	Accounting				
d	Labbuma.				
<u>.</u>	Professional fundraising services. See Part IV, line 17		¥ 8,4 V 4		
f	Investment management fees		3x 9W7 4X 1		
g	Other. (If line 11g amount exceeds 10% of line 25,				· · · · · · · · · · · · · · · · · · ·
9	column (A) amount, list line 11g expenses on Sch O.)	1,129.	1,129.		
12	Advertising and promotion		-/		
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а				ļ	
b					
C				<u> </u>	
d					
	All other expenses			<u> </u>	
25	Total functional expenses. Add lines 1 through 24e	24,162.	24,162.	0.	0.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				}
	Check here if following SOP 98-2 (ASC 958-720)			<u></u>	<u> </u>

Part X | Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 4,385 3,256. Cash - non-interest-bearing 1 1 44,212. 38,634. 2 Savings and temporary cash investments 2 Pledges and grants receivable, net 3 3 Accounts receivable, net 4 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L ... 6 Notes and loans receivable, net 7 7 8 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 9 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10a b Less: accumulated depreciation 10b 10c Investments - publicly traded securities ... 11 11 833,807. 841,232. Investments - other securities. See Part IV, line 11 ... 12 12 Investments - program-related. See Part IV, line 11 13 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 882,404 16 883,122 16 Total assets. Add lines 1 through 15 (must equal line 34) Accounts payable and accrued expenses 17 17 18 Grants payable 18 Deferred revenue 19 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 Total liabilities. Add lines 17 through 25 26 0. Organizations that follow SFAS 117 (ASC 958), check here > X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances <u>560,730.</u> 560,689. 27 Unrestricted net assets ... 27 321,715. 322,392. Temporanly restricted net assets 28 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 32 882,404. 883,122. 33 Total net assets or fund balances 33 883,122. Total liabilities and net assets/fund balances

Form 990 (2016)

Form	990 (2016) TEMPLE ISRAEL TRUST FUND	23-71	69054	Page 12
Pa	rt XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	24	,880.
2	Total expenses (must equal Part IX, column (A), line 25)	2	24	,162.
3	Revenue less expenses. Subtract line 2 from line 1	3		718.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	882	,404.
5	Net unrealized gains (losses) on investments	5		
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,			
	column (B))	10	883	,122.
Pa	t XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>		<u></u>
			\	es No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other		. 4.1	31 6
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.	<u> </u>	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	••••	2a	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	f on a		
	separate basis, consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?		2b	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,		
	consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,		i kā
	review, or compilation of its financial statements and selection of an independent accountant?	••	. 2c	* · · · · · · · · · · · · · · · · · · ·
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sii	ngle Audit	[
	Act and OMB Circular A-133?		3a	X_
þ	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired audit	}	
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u>-</u>	3b	
			Form 9	90 (2016)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

➤ Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.lrs.gov/form990.

OMB No 1545-0047

2016

Open to Public Inspection

Employer identification number

Schedule A (Form 990 or 990-EZ) 2016

TEMPLE ISRAEL TRUST FUND 23-7169054 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 X An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3), Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. J Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations . . . Provide the following information about the supported organization(s). (iv) is the organization listed in your governing document? (iii) Type of organization (v) Amount of monetary (i) Name of supported (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) Yes Nο above (see instructions)) 02-6008822 TEMPLE ISRAEL X 23,033 033 0

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 632021 09-21-16

Schedule A (Form 990 or 990-EZ) 2016 TEMPLE ISRAEL TRUST FUND 23-7169054 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support					<u> </u>	 -
Cale	endar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and				(4) 20.0	(6) 2010	(i) Total
	membership fees received. (Do not						
	include any "unusual grants.")		Ì				
2	Tax revenues levied for the organ-						· · ·
	ızatıon's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to				ı		
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions		,u *		٤٠,	, ,	
	by each person (other than a		· · · · ·		N.		
	governmental unit or publicly	· 's "	₹ % - Ĵ	~ ,			
	supported organization) included				, i si si		
	on line 1 that exceeds 2% of the				- 1. Sy &	· 洛 [] []	
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4				3 384 18	2 2 2	
Sec	tion B. Total Support		<u> </u>	T 7 383			
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Amounts from line 4		<u> </u>	(0, 20 1 1	(0) 2010	(e) 2010	(i) Total
8	Gross income from interest,			-			
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the	1					
	business is regularly carried on						
	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI)	, 1			1		
11	Total support. Add lines 7 through 10	4.					
	Gross receipts from related activities,	etc. (see instruction	ons)		1	40	
	First five years. If the Form 990 is for			 d fourth or fifth tax	. L Vear as a section	501(a)(3)	
	organization, check this box and stop	here		s, rourar, or mar ta	year as a section	301(0)(3)	▶ □
Sec	tion C. Computation of Publi	c Support Per	centage	·	<u></u>	· · · · ·	<u> </u>
14	Public support percentage for 2016 (li	ne 6, column (f) div	vided by line 11, c	olumn (fi)		14	
	Public support percentage from 2015				<i>"</i>	15	<u>%</u> %
	33 1/3% support test - 2016. If the o			 In line 13, and line 14	4 is 33 1/3% or me	ore check this box	
	stop here. The organization qualifies a	as a publicly suppo	orted organization			oro, oricox triis box	and L
	33 1/3% support test - 2015. If the or				ne 15 is 33 1/3%	 or more, check this	boy
	and stop here. The organization qualif	fies as a publicly s	upported organiza	ition		or more, encon tries	▶ □
17a	10% -facts-and-circumstances test	- 2016. If the orga	inization did not c	heck a box on line	 13. 16a or 16b ar		more
	and if the organization meets the "fact	s-and-circumstanc	es" test, check th	is box and stop he	re. Explain in Part	VI how the organize	ation
	meets the "facts-and-circumstances" t	test. The organizat	ion qualifies as a	publicly supported	organization	THOW the organiza	10011
b	10% -facts-and-circumstances test	- 2015, If the orga	inization did not c	heck a box on line	13 16a 16h or 11		. ▶∟
	more, and if the organization meets the	e "facts-and-circun	nstances" test of	eck this box and el	on here Evoluing	a, and mit 10 is 10 n Dort VI how the	70 UI
	organization meets the "facts-and-circ	umstances* test. T	The organization of	ualifies as a nublici	v supported areas	irrait viiiOW (IIO	▶ []
8	Private foundation. If the organization	did not check a h	ox on line 13 16	. 16b 17a or 17b	, supported organ	d see instructions	···· [-
-				., . 		ule A (Form 900 or	

Schedule A (Form 990 or 990-EZ) 2016 TEMPLE ISRAEL TRUST FUND Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to

qualify under the tests listed bel	ow, please comp	olete Part II.)				
Section A. Public Support		, , , , , , , , , , , , , , , , , , , 		, 	,	
Calendar year (or fiscal year beginning in) ► 📙	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and				}		
membership fees received. (Do not		i				
include any "unusual grants.")						
2 Gross receipts from admissions,	ļ				ļ į	
merchandise sold or services per- formed, or facilities furnished in						
any activity that is related to the						
organization's tax-exempt purpose						
3 Gross receipts from activities that				1		
are not an unrelated trade or bus-				[
iness under section 513						
4 Tax revenues levied for the organ-				1		
ization's benefit and either paid to	İ					
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to]		
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and	-					
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received]		_ _
from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year						
c Add lines 7a and 7b						
	"" "" "" "		Fig. Wes		第二款 第二	
Section B. Total Support						
calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 Amounts from line 6						
10a Gross income from interest,			 			
dividends, payments received on						
securities loans, rents, royalties and income from similar sources		_		}		
b Unrelated business taxable income						
(less section 511 taxes) from businesses]		
acquired after June 30, 1975				1		
c Add lines 10a and 10b						
11 Net income from unrelated business						· _ · _ · _ · _ · _ · _ · _ · _ · _ · _
activities not included in line 10b,				1		
whether or not the business is regularly carned on						
12 Other income. Do not include gain		· · · · · · · · · · · · · · · · · · ·				
or loss from the sale of capital	Ì			1		
assets (Explain in Part VI.)						
14 First five years. If the Form 990 is for the	he organization's	s first second thin	d fourth or fifth to	ax vear as a sectio	n 501(c)(3) organiz	ation
check this box and stop here	organization s	oc, second, triil	e, reality of mult	, our as a scotto	Jo i (o)(o) organiza	▶ □
Section C. Computation of Public	Support Pe	rcentage	·	·_·		·· · · · · · · · · · · · · · · · · · ·
15 Public support percentage for 2016 (lin			column (f))		15	%
16 Public support percentage from 2015 S		· ·			16	<u>%</u>
Section D. Computation of Invest				· - · - · -		
17 Investment income percentage for 201			ne 13 column (fi)		17	%
18 Investment income percentage for 20 in					18	
19a 33 1/3% support tests - 2016. If the o						
more than 33 1/3%, check this box and	=					, 13 1101
		-				L
b 33 1/3% support tests - 2015. If the o						
line 18 is not more than 33 1/3%, check			•		-	····· [H
20 Private foundation. If the organization	uiu not check a	DOX OH III10_14, 19	a, or 190, check to	IIIS DOX AND SEE INS	structions	

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes." explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1	×	
- <		
کند شدا		
2	ļ	X
	<u> </u>	* , , ["]
3a		A
· · ·	• .	
3b		L
عقر المنا	<u></u>	× ' ' ' ' '
<u>3c</u>	84	
4a		X
25 */	3	
	-11	Ĭ
4b	7.35	, j
	14	
4c	~	•
		À.
	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
5 a	<u> </u>	X
	·	· 4
5b_ _5c_	 	
		*
*		,
		* *
6	ļ	X
7	 	X
8		X
9a	 	X
9b	<u> </u>	X
9c	}	X
10a	- ~	X
iva		-
10b	Ι	

Sche	edule A (Form 990 or 990-EZ) 2016 TEMPLE ISRAEL TRUST FUND 23	-716905	4 Pa	age 5
	rt IV Supporting Organizations (continued)	, = 0 5		-3-0
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	İ		
	below, the governing body of a supported organization?	11a		X
b	A family member of a person described in (a) above?	11b		X
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		X
	ction B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		` /	
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	, .	,	41
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	Ì	/ (t	-
	controlled the organization's activities. If the organization had more than one supported organization,	. `	/· '	30/20
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported		*	
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	X	ļ
2	Did the organization operate for the benefit of any supported organization other than the supported	1.4	17,	ंदेहर
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	2. 1	57	× , 2
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,		, 3 /	, *> ,
	supervised, or controlled the supporting organization.	2		Х
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	1	erri g	£ .
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed		4	
	the supported organization(s).	1	PRRESAL'S	36me - 1223
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	3	1	1
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	1% 10	: 🍇	
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		200	
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported		No.	
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	34/_		
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a	\$,20	,	, %
_	significant voice in the organization's investment policies and in directing the use of the organization's		(1
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's		1	15
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the integral Part Test during the yea(see instruct	ions).		
а		•		
b				
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (s	ee instructions,).	
2	Activities Test. Answer (a) and (b) below.	Ì	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI Identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			i
	how the organization was responsive to those supported organizations, and how the organization determined			ļ
	that these activities constituted substantially all of its activities.	2a		
b				
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	i		:
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
a				
_	trustees of each of the supported organizations? Provide details in Part VI.	3a		
ь				
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b_	1	

	edule A (Form 990 or 990-EZ) 2016 TEMPLE ISRAEL TRUST FUN			23-7169054 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting			
1	Check here if the organization satisfied the Integral Part Test as a qualifying	trust o	on Nov. 20, 1970 (explain i	n Part VI.) See instructions. Al
	other Type III non-functionally integrated supporting organizations must co	mplete	Sections A through E.	
Sect	tion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or	1		1
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see	12 36	THE WATER OF	
-	instructions for short tax year or assets held for part of year):			
	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other	1		
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,		T	
	see instructions)	4	L	<u> </u>
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7_	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2	,,,	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	_3	,.	
4	Enter greater of line 2 or line 3	4		
5_	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6	,	
7	Check here if the current year is the organization's first as a non-functionally	y integr	rated Type III supporting o	rganization (see
	instructions).			·

Schedule A (Form 990 or 990-EZ) 2016

Schedule A (Form 990 or 990-EZ) 2016

а

b Excess from 2013c Excess from 2014d Excess from 2015e Excess from 2016

Schedule A	(Form 990 or 990-EZ) 2016	TEMPLE	ISRAEL	TRUST	FUND		<u> </u>	Page 8
Part VI	Part IV, Section A, lines 1	, 2, 3b, 3c, 4b, lines 2 and 3; F	4c, 5a, 6, 9a, 9 Part IV, Sectior	9b, 9c, 11a, n E. lines 1c.	11b, and 11c; Pa 2a, 2b, 3a, and 3	art IV, Section B, II 3b: Part V. line 1: I	7a or 17b; Part III, line 12; ines 1 and 2; Part IV, Sectic Part V, Section B, line 1e; P dditional information	on C, art V,
	·							
								
								· ·
	···							
								
								
	· , ,							

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.
Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 6 Inspection

Name of the organization

Employer identification number

	TEMPLE ISRAEL TRUST FUND	23-7169054
Pai	t I Organizations Maintaining Donor Advised Funds or Other Similar Funds or	Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised fu	ınde
5	are the organization's property, subject to the organization's exclusive legal control?	Yes No
	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used	
6		-
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose confumpermissible private benefit?	
Dai	t II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part I	Yes No
	······································	v, iii e 7.
1	Purpose(s) of conservation easements held by the organization (check all that apply).	II :
	Preservation of land for public use (e.g., recreation or education)	•
	Protection of natural habitat	nistone structure
_	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a contribution in the contribution in the form of a contribution in the form of a contribution in the contribution in the contribution in the contribution in the contribution in the contribution in the contribution in the contribution in the contribution in the contribution in the contribution in the contribution in the contribution in the contribution in the contribution in the contribution in the contribution in the contribution in the contribution in the contrib	^&
	day of the tax year.	Held at the End of the Tax Year
a	Total number of conservation easements	2a
þ	Total acreage restricted by conservation easements	2b
C	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure	
	listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization	anization during the tax
	year -	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	——————————————————————————————————————
	violations, and enforcement of the conservation easements it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conserva	tion easements during the year
_	<u> </u>	
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation	easements during the year
_		
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)	
_	and section 170(h)(4)(B)(ii)?	Yes L No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense state	•
	include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's financial statements that describes the organization or the	organization's accounting for
Dai	conservation easements. t III Organizations Maintaining Collections of Art, Historical Treasures, or Other	r Similar Assets
- 01	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	olima Assec.
	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement	and halanas shoot warks of art
18		
	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of the text of the footnote to its financial statements that describes these items.	or public service, provide, in Part Alli,
_	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and	halance cheet works of ort. historiaal
D		
	treasures, or other similar assets held for public exhibition, education, or research in furtherance of public s	service, provide the following amounts
	relating to these items:	▶ ¢
	(i) Revenue included on Form 990, Part VIII, line 1	🍑
_	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain	ι, ριονίαθ
_	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	▶ ¢
a	Revenue included on Form 990, Part VIII, line 1	
T.	Assets included in Form 990. Part X	— 3

		ISRAEL TRU					<u>716905</u>	
Par	t III Organizations Maintaining C	Collections of A	rt, Historical 1	Treasures, or C	Other S	<u>Similar As</u>	sets(contil	nued)
3	Using the organization's acquisition, access	on, and other record	is, check any of th	ne following that are	a signi	ficant use of	rts collection	n items
	(check all that apply):							
а	Public exhibition	d	Loan or ex	xchange programs				
b	Scholarly research	e						
c	Preservation for future generations	_						
4	Provide a description of the organization's c	ollections and explai	n how they further	r the organization's	exempt	nuroose in	Part XIII	
5	During the year, did the organization solicit of	-	•	-				
3	to be sold to raise funds rather than to be m					3013	Yes	☐ No
Dar	t IV Escrow and Custodial Arran					m 000 Port		
1 41	reported an amount on Form 990, Pa		ete ii tile Organiza	lion answered Tes	OII FO	IIII 930, Fait	. 17, 11116 3, 01	
та	Is the organization an agent, trustee, custod		-	ons or other assets	not inc	luaea	- 1,,	<u></u>
		· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·			Yes	L No
ь	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing table:		1			
					ļ		Amoun	<u>t</u>
	Beginning balance					1c		
d	Additions during the year					1d		
е	Distributions during the year]	1e		
f	Ending balance				. 1	_1f		
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for escrow or	custodial account	liability?	••	Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	. Check here if the ex	xplanation has bee	en provided on Part	XIII		<u> </u>	
Par	t V Endowment Funds. Complete	f the organization ar	swered "Yes" on	Form 990, Part IV,	ine 10			
		(a) Current year	(b) Prior year	(c) Two years ba	ck (d)	Three years b	ack (e) Four	years back
1a	Beginning of year balance				_ -			
b	Contributions							
-	Net investment earnings, gains, and losses							
	Grants or scholarships			 				
	Other expenditures for facilities							
•	•							
	and programs			-}	-+-			
	Administrative expenses				_+-			
9	End of year balance	L	L					
2	Provide the estimated percentage of the cur	•	ce (line 1g, column	(a)) held as:				
	Board designated or quasi-endowment		%					
	Permanent endowment	%						
C	Temporarily restricted endowment ▶	%						
	The percentages on lines 2a, 2b, and 2c sho	•						
3a	Are there endowment funds not in the posse	ession of the organiz	ation that are held	and administered	for the c	organization	-	
	by:							Yes No
	(i) unrelated organizations						3a(i)	
	(ii) related organizations						3a(ii)	
b	If "Yes" on line 3a(ii), are the related organization			3?			3b	
4_	Describe in Part XIII the intended uses of the	e organization's endo	owment funds.					
Par	t VI⊳ Land, Buildings, and Equipn	nent.						
	Complete if the organization answere	d "Yes" on Form 99	0, Part IV, line 11a	. See Form 990, Pa	ırt X, lıne	10.		
	Description of property	(a) Cost or o				mulated	(d) Bool	k value
		basis (investi	, , ,	is (other)	depred		(2) 230	
12	Land			````	`.4.1.5° • •			
		· · 						
	Buildings	· 					 	
	Leasehold improvements	"					 	
	Equipment	··					 	
	Other						 	
<u>Total</u>	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, column (B), line	9 TUC.)			L	0.

Schedule D (Form 990) 2016

Complete of the appropriate appropriate Version	Com- 000 Dod N/ II	11h C F 000	Dark V. line 40	
Complete if the organization answered "Yes" of (a) Description of security or category (including name of security)	(b) Book value			d-of-year market value
(1) Financial derivatives		1		
(2) Closely-held equity interests				
(3) Other				
(A) INVESTMENTS IN PUBLICLY				
(B) TRADED SECURITIES GREATER				
(C) THAN 5% OF TOTAL ASSETS	841,23	2. COST		
(D)				
<u>(E)</u>				
(F)				
(G)				-
(H) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	841,23	,	7 . 3	
Part VIII Investments - Program Related.		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
Complete if the organization answered "Yes" of	on Form 990, Part IV, I	ne 11c. See Form 990.	Part X, line 13.	
(a) Description of investment	(b) Book value			d-of-year market value
(1)		I		
(2)				
(3)	<u></u>			
		<u> </u>		
(5)				
(6)				
(7)				
(8)				
(9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets.		173.5 38.8 38.4 2.5 2.5	*****	
Complete if the organization answered "Yes" of	on Form 990, Part IV, I	ne 11d. See Form 990	, Part X, line 15.	
	Description			(b) Book value
(1)				
(2)				
(3)				<u></u>
(4)				
(5)				
<u>(6)</u>				
				
				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15.)			
Part X Other Liabilities.			·	
Complete if the organization answered "Yes" of	on Form 990, Part IV, I	ne 11e or 11f. See For	m 990, Part X, line 25	j.
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes			_	
(2)			_	
(3)			4	
(4)			-	
<u>(5)</u>			1	
(6)			1	
<u>(7)</u>			-	
(8)			1	
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25.)		1	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Sche	dule D (Form 990) 2016 TEMPLE ISRAEL TRUST FUND		23-7169054 Page 4
Par	XI Reconciliation of Revenue per Audited Financial Statemer	ts With Revenue per F	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	-	
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
	Net unrealized gains (losses) on investments	2a	
a	Described annual and the officialities		-
b	Donated services and use of facilities	2b	1 1
С	Recoveries of prior year grants	2c	- '
d	Other (Describe in Part XIII.)		d
е	Add lines 2a through 2d ,		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1	\^-
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	_ \$^_{}
b	Other (Describe in Part XIII)	4b	
C	Add lines 4a and 4b ,		4c
_5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5
Par	t XII Reconciliation of Expenses per Audited Financial Stateme	nts With Expenses per	Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	,	
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
	Other leases	2c	1.3
0			1 3 1
đ	Other (Describe in Part XIII.)	2d	7
_	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	4. (1)
b	Other (Describe in Part XIII.)		
C	Add lines 4a and 4b		4c
5			5
Par	t XIII Supplemental Information.		
Provi	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV	/, lines 1b and 2b; Part V, line	4; Part X, line 2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additi	onal information.	
			
			
			
			

% × **Employer identification number** 23-7169054 Open to Public OMB No 1545-0047 Inspection RELIGIOUS ACTIVITIES, (h) Purpose of grant or assistance TO PROVIDE FUNDS FOR ____ Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of noncash assistance ▶ Information about Schedule I (Form 990) and its instructions is at www.lrs.gov/form990. (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ▶ Attach to Form 990. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 23,033 (d) Amount of cash grant (c) IRC section (if applicable) TRUST FUND 501(C)3 02-6008822 General Information on Grants and Assistance (b) EIN TEMPLE ISRAEL critena used to award the grants or assistance? 1 (a) Name and address of organization or government MANCHESTER, NH 03104 Name of the organization 66 SALMON STREET Department of the Treasury Internal Revenue Service TEMPLE ISRAEL SCHEDULEI (Form 990) Parl Part !

Schedule I (Form 990) (2016) Enter total number of section 501(c)(3) and government organizations listed in the line 1 table LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table

Page 2 Schedule I (Form 990) (2016) (f) Description of noncash assistance 23-7169054 (e) Method of valuation (book, FMV, appraisal, other) Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. (d) Amount of non-cash assistance (c) Amount of cash grant TEMPLE ISRAEL TRUST FUND (b) Number of recipients (a) Type of grant or assistance Schedule I (Form 990) (2016)

Part III | Grants and Other 632102 11-01-16

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

OMB No 1545-0047 2016 Open to Public

Internal Revenue Service Name of the ergenization Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.lrs.gov/form990.

Inspection Employer identification number

	TEMPLE ISRAEL	TRUST FUND	23-7169054
FORM 990, PART	VI, SECTION A,	LINE 8A:	
THE ORGANIZATI	ON DID NOT HOLD	ANY REGULARLY SCHEDULED MEE	TINGS.
FORM 990, PART	VI, SECTION A,	LINE 8B:	
		THE ORGANIZATION.	
FORM 990, PART	VI, SECTION B,	LINE 11B:	
THE RETURN IS	SENT TO THE TRU	STEES FOR REVIEW BEFORE BEIN	IG FILED.
FORM 990, PART	VI, SECTION C,	LINE 19:	
THE BOOKS AND	RECORDS OF THE	TEMPLE ISRAEL TRUST FUND ALC	NG WITH ITS
GOVERNING DOCU	MENTS AND CONFL	ICT OF INTEREST POLICY ARE A	VAILABLE FOR
PUBLIC INSPECT	ION AT THE OFFI	CE OF TEMPLE ISRAEL, 66 SALM	ION ST.,
MANCHESTER, NH	•		
FORM 990, PART	VII CONTACT AD	DRESSES FOR OFFICERS, DIRECT	ORS, ETC:
GARY SINGER -	151 LEDGEWOOD R	OAD, MANCHESTER, NH 03104	
JOHN WEBER - 1	5 KENNEDY DRIVE	, BEDFORD, NH 03110	
BRIAN GRODMAN	- 2929 NORTH EL	M STREET, MANCHESTER, NH 031	.04
STEPHEN SAULTE	N - 31 CHAMBERL	AIN ROAD, ALTON, NH 03809	
			······
			·
	 		

SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at www.lrs.gov/form990.

Open to Public 2016

Inspection

OMB No 1545-0047

Employer identification number 23-7169054

TEMPLE ISRAEL TRUST FUND Name of the organization

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

Parl

Direct controlling entity Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. End-of-year assets <u>e</u> Total income Legal domicile (state or foreign country) Primary activity Name, address, and EIN (if applicable) of disregarded entity Part II

(g) Section 512(b)(13) £ × controlled entity? Yes Direct controlling entity status (if section Public charity 501(c)(3)) LINE 1 Exempt Code section 501(C)3 Legal domicile (state or foreign country) NEW HAMPSHIRE Primary activity RELIGIOUS Name, address, and EIN of related organization TEMPLE ISRAEL - 02-6008822 MANCHESTER, NH 03104 66 SALMON ST

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2016

23-7169054 Page 2

Schedule R (Form 990) 2016 TEMPLE ISRAEL TRUST FUND

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year. Part III

(i) (k) General or Percentage managing ownership partner? Yes No				nore related	Section Section (i) Section (ii) Section (iii)			Schedule R (Form 990) 2016	
General or managing partner? Yes No			-	one or n	(h) Percentage ownership				le R (Fo
(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)				l because it had	(g) Share of Pend-of-year cassets				Schedu
(h) Disproportionate allocations? Yes No				art IV, line 34					
(g) Share of end-of-year assets				om 990, Pa	(f) Share of total Income				
				Yes" on F	(e) Type of entity (C corp, S corp, or trust)		i	<u> </u>]
(f) Share of total income	:			answered "					
(e) Predominant income Si (related, unrelated, excluded from lax under sections 512-514)				on or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related	(d) Direct controlling entity				
Predomir (related, excluded fr sections				mplete if t	(c) Legal domicile (state or foreign country)				
(d) Direct controlling entity				ration or Trust. Co	(b) Primary activity				
(c) Legal domicile (state or foreign				as a Corpo	Prime				
(b) Primary activity				janizations Taxable apporation or trust dunr	2 c				
(a) Name, address, and EIN of related organization				Part IV Identification of Related Organizations Taxable as a Corporation organizations treated as a corporation or trust during the tax year	(a) Name, address, and EIN of related organization				632162 09-06-16

Schedule R (Form 990) 2016 TEMPLE ISRAEL TRUST FUND

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	ì
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ons with one or more re	elated organizations listed	I in Parts II-IV?			1 -
a Receipt of (i) interest, (ii) annurties, (iii) royalties, or (iv) rent from a controlled entity	ity		:	1a	×	1
b Gift, grant, or capital contribution to related organization(s)	:	:		4	×	
(S)				-	×	i
	•		:	7	>	١
	:		:	2	4 ;	1
e Loans or loan guarantees by related organization(s)				-	×	1
						,
f Dividends from related organization(s)			:	#	×	1
a Sale of assets to related organization(s)				1	×	1
	:			4	: >	1
	:			=	ا	ł
i Exchange of assets with related organization(s)	:		: : :	=	×	1
j Lease of facilities, equipment, or other assets to related organization(s)			•	; ·	×	1

k Lease of facilities, equipment, or other assets from related organization(s)	:	•		¥	×	
Performance of services or membership or fundraising solicitations for related organization(s)	nanization(s)			7	×	1
(a) Indicate the solution of a solution of the	anization(s)		:	£	: >	1
	danization(3)				4 >	1
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	ation(s)			Ę	×	1
 Sharing of paid employees with related organization(s) 				9	×	ľ
						-
p Reimbursement paid to related organization(s) for expenses				dt dt	X	1
q Reimbursement paid by related organization(s) for expenses			;	10	X	ì
			:	L		r~~
r Other transfer of cash or property to related organization(s)				; +	×	-
					×	i
J	is obeliance sound other	Secure and and and and	in a description of the second			1
Z II the answer to any or the above is 185, see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	wno must complete t	nis line, including covered	relationships and transaction threshold	s		1
(а) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	nount involved		
)
(0)						1
3						
						i
(3)						
						1
(4)						1
(5)	-					
						ı
(9)						1
R391R3 NB_NE.1A			3	Schedule B (Form 990) 2016	0001 2016	ď

23-7169054 Page 4

Schedule R (Form 990) 2016 TEMPLE ISRAEL TRUST FUND

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions reparding exclusion for certain investment partnerships

that was not a related organization. See instructions regarding exclusion for certain investment partnerships.	structions regarding exciu	Sion for certain inv	estment partnerships.						!	
(a) Name, address, and EIN	(b) Primary activity	(c) Legal domicile	(d) Predominant income	Are all partners sec	(f) Share of	(g) Share of	Olspropor-	(i) Code V-UBI	(j) General o	(k) Percentage
of entity			(related, unrelated, 5 excluded from tax under sections 512-514)	501(c)(3) orgs? Yes No	total · income	end-of-year assets	tonate allocations?	tonate amount in box 20 managing ownership of Schedule K-1 parner? Of Schedule K-1 (Form 1065) Yes No	managing partner? Yes No	ownership
			,		-					
				+			-			
							_			
			•							
							-			
				_					_	
				+			+			
					,					
			_							
									_	
				+			+		1	
					_		_			
				_						
				+			-			
					_					
				_						
							_		_	
									_	
				+						
					_				_	
				_					_	
					_		_			
				-				Cohodulo) (E	Schodillo D (Form 000) 2016
								0550100	5	11 3301 40 10