Form **990-PF**

Extended to November 15, 29
Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Dep	artmer	nt of the Treasury			social security numbers or					LUIU
Inter	nal Re	evenue Service		about For	m 990-PF and its separate		-	s.gov/form990	pt.	Open to Public Inspection
		ndar year 2016 or tax yea	r beginning		 .	, and e	nding	T		
Na	me o	f foundation						A Employer i	dentification	number
_		- 1 - 12								
_		Saab Family					r - -		<u> 392768</u>	
		and street (or P O box number			t address)		Room/suite	B Telephone i		
		<u> East Merrin</u>						<u> 603-6</u>	<u> 528-13</u>	<u>40</u>
		own, state or province, co		or foreign p	ostal code			C If exemption a	pplication is p	ending, check here
_ <u>I</u>	OW	<u>ell, MA 018</u>	<u>852 </u>					ļ		
G (Check	call that apply:	Initial return		Initial return of a fo	ormer public (charity	D 1 Foreign o	organizations	s, check here
			Final return		X Amended return	•		2 5		
			Address chan		Name change			check here	and attach co	eting the 85% test, mputation
H_(Check	type of organization:	X Section 5	601(c) <u>(3)</u> e	xempt private foundation			E If private for	undation stat	tus was terminated
	_ <u> Se</u>	ection 4947(a)(1) nonexem	npt charitable tr	ust 🔛	Other taxable private foundate	ation		under section	on 507(b)(1)	(A), check here
I Fa	air ma	arket value of all assets at (end of year J	Account	ing method: X Cash	Accr	ual	F If the found	ation is in a 6	60-month termination
(f	rom i	Part II, col (c), line 16)			ther (specify)			under section	on 507(b)(1)	(B), check here
	\$			Part I, colu	ımn (d) must be on cash	basis)				
Pa	art I	Analysis of Revenue an	nd Expenses	d) may not	(a) Revenue and		vestment	(c) Adjus		(d) Disbursements for charitable purposes
		(The total of amounts in colunecessarily equal the amoun	nts in column (a))		expenses per books	inco	ome	incor	ne	(cash basis only)
	1	Contributions, gifts, gran	its, etc., receive	ď	5,498,855.			N/A	4	
	2		on is not required to at	tach Sch B						
	3	Interest on savings and temporal cash investments	orary		` 18.		18.	}		Statement 1
	4	Dividends and interest fro	om securities		97,932.	8	5,453.			Statement 2
	5a	Gross rents								
	b	Net rental income or (loss)								
d)	6a	Net gain or (loss) from sale of	assets not on line	10	118,757.				RF	CEIVED
3	b	Gross sales price for all assets on line 6a	788,	<u>459.</u>						0
1 48~3019	7	Capital gain net income (from	Part IV, line 2)			11	8,757.		MO,	/ 1 5 2018 Q
7	8	Net short-term capital gai	ın						8 NO.	1 5 2018 G
m	9	Income modifications							L	
FEB	10a	Gross sales less returns and allowances							OG	DEN. UT
	b	Less Cost of goods sold								
SCANNED	C	Gross profit or (loss)								
Ž	11	Other income			766.		766.			Statement 3
₴	12	Total. Add lines 1 throug	<u>ıh 11</u>		5,716,328.	20	4,994.			
₹	13	Compensation of officers, dire	ectors, trustees, e	tc	0.		0.			. 0.
⋛	14	Other employee salaries a	and wages							
	15	Pension plans, employee	benefits					-		
Ses	16a	Legal fees	Stm	t 4	7,961.		0.			0.
Sen.	b	Accounting fees								
Ä	C	Other professional fees								
Operating and Administrative Expenses	17	Interest								
rati	18	Taxes	Stm	t 5	5,312.		0.			0.
ııst	19	Depreciation and depletio	on							
Ē	20	Occupancy								
¥	21	Travel, conferences, and	meetings							
ᇤ	22	Printing and publications								
Jg (23	Other expenses	Stm	t 6	33,204.		0.			0.
ā	24	Total operating and adm	ninistrative							
per		expenses Add lines 13 ti	hrough 23		46,477.		0.			0.
0	25	Contributions, gifts, grant	ts paid		212,030.					212,030.
	26	Total expenses and disb	ursements							
		Add lines 24 and 25			258,507.		0.			212,030.
	27	Subtract line 26 from line	12:							
	a	Excess of revenue over expen	ises and disburse	ments	5,457,821.					
	[Net investment income (20	4,994.			
	С	Adjusted net income (if ne	egative, enter -0-)					N/A		

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions

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88556-T2

[Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only		Beginning of year	End of year			
	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing	-161.	7.	<u> </u>		
	2	Savings and temporary cash investments	-58,105.	157,167.	157,167.		
	3	Accounts receivable >					
		Less. allowance for doubtful accounts					
	4	Pledges receivable >	- ,				
		Less: allowance for doubtful accounts					
	5	Grants receivable					
	1	Receivables due from officers, directors, trustees, and other					
	•	disqualified persons					
	7	Other notes and loans receivable			,		
	'	Less; allowance for doubtful accounts					
s	l g	Inventories for sale or use					
Assets	1	Prepaid expenses and deferred charges					
As	1	Investments - U.S and state government obligations Stmt 7	228,764.	268,368.	267,581.		
	1	Investments - corporate stock Stmt 8	2 7/3 759	3,647,860.	8,055,490.		
	1		2,743,758. 914,983.	897,448.	867,496.		
	1		914,903.	031,440.	007,430.		
	11	Investments - land, buildings, and equipment basis					
		Less accumulated depreciation					
		Investments - mortgage loans	212 272	260 744	204 170		
	13	Investments - other Stmt 10	312,272.	269,744.	284,179.		
	14	Land, buildings, and equipment: basis					
		Less accumulated depreciation					
	1	Other assets (describe)					
	16	Total assets (to be completed by all filers - see the					
_		instructions. Also, see page 1, item I)	4,141,511.	5,240,594.	9,631,920.		
	17	Accounts payable and accrued expenses					
	18	Grants payable					
S	19	Deferred revenue					
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons					
ap	21	Mortgages and other notes payable					
	22	Other liabilities (describe >)					
	23	Total liabilities (add lines 17 through 22)	0.	0.			
		Foundations that follow SFAS 117, check here					
		and complete lines 24 through 26 and lines 30 and 31					
Ses	24	Unrestricted					
Net Assets or Fund Balance	25	Temporarily restricted					
Bai	26	Permanently restricted					
5		Foundations that do not follow SFAS 117, check here					
F		and complete lines 27 through 31					
ò	27	Capital stock, trust principal, or current funds	4,000,000.	4,000,000.			
ets	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.			
155	29	Retained earnings, accumulated income, endowment, or other funds	141,511.	1,240,594.			
et/		Total net assets or fund balances	4,141,511.	5,240,594.			
Z	30	Total net assets of fullu balances	4,141,311.	3,240,334.			
	24	Total liabilities and not accept the ad belonged	4,141,511.	5,240,594.			
_	31	Total liabilities and net assets/fund balances		3,240,334.			
Р	art	III Analysis of Changes in Net Assets or Fund B	alances				
	T. 25. 1	and an about four Holomore at beginning of the Boat Holomore A. C. C.	20				
		net assets or fund balances at beginning of year - Part II, column (a), line	30		4 4 4 4 5 4 4		
		at agree with end-of-year figure reported on prior year's return)		1	4,141,511.		
		amount from Part I, line 27a		2	5,457,821.		
		r increases not included in line 2 (itemize)		3	0.		
		lines 1, 2, and 3		. 4	9,599,332.		
		eases not included in line 2 (itemize) $ ightharpoons$ Vention $-$ adj			4,358,738.		
<u>6</u>	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	5,240,594.		
					Form 990-PF (2016)		

Part IV Capital Gains and	Losses for Tax on Ir	nvestmen	t Income						
	e kınd(s) of property sold (e g se; or common stock, 200 sh			(b)	How acquired - Purchase - Donation	(c) Date a (mo., d	acquired ay, yr)	(d) Date sold (mo , day, yr.)
1a				ļ	****				
b See Attached St	atement			-					
<u>c</u>									
<u>d</u>	<u>.</u> ,			┼		-		_	
e	(f) Depreciation allowed	(a) Co	st or other basis				/h) G:	aın or (loss)	
(e) Gross sales price	(or allowable)		expense of sale					(f) minus (
<u>a</u> b									
C									
d	·		1						
e 788,459.			669,70	2.					118,757
Complete only for assets showing gair	in column (h) and owned by	the foundation				(1) (Sains (C	ol. (h) gaın	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	1 1	cess of col (i) col. (j), if any			col. (k), but n	ot less than (from col. (I	1 -0-) or
a									
b									
C								•	
d									
e									118,757
Capital gain net income or (net capital k	oss) { If gain, also enter of the loss of	r in Part I, line - in Part I, line	7 7	}	2				118,757.
3 Net short-term capital gain or (loss) as	•		•	7					
If gain, also enter in Part I, line 8, colum		iu (6).		1					
If (loss), enter -0- in Part I, line 8	(0).			 	3			N/A	
Part V Qualification Under	r Section 4940(e) for	Reduced	l Tax on Net	Inv	estment	Inco	me		
(For optional use by domestic private found	lations subject to the section (1940(a) tax on	net investment in	como	:.)				
If section 4940(d)(2) applies, leave this par	t hlank								
Was the foundation liable for the section 49			•	riod۶					Yes X No
If "Yes," the foundation does not qualify und 1 Enter the appropriate amount in each c	der section 4940(e). Do not co	unplete this pa	irt. fora matuna any a	ntuos					
(a)		istructions be	iore making any e		·		1		(d)
Base period years	(b) Adjusted qualifying dis	tributions	Net value of no	(c) ncbar	itable-use ass	sets	,	Distribi	ution ratio
Calendar year (or tax year beginning in) 2015		8,927.	100 70,00 07770		,314,7				ded by col. (c)) • 041468
2014		$\frac{3,927}{1,974}$, <u>314, 7</u> , 467, 9				.04148
2013		9,787.			, 407, <u>3</u> , 247, 7				.051741
2012		3,866.			,005,1				.048404
2011		1,676.			,891,5				.000431
2011		<u> </u>			,001,0	<u> </u>			.000431
2 Total of line 1, column (d)							2		.191725
3 Average distribution ratio for the 5-year	hase period - divide the total of	nn'line 2 hy 5	or by the number	of ve	ars			****	
the foundation has been in existence if I	•	o <u>.</u> . b , o ,	or by the hamber	0. , 0.	u. 0		3		.038345
	oo wan o you o								
Enter the net value of noncharitable-use	assets for 2016 from Part X,	line 5					4	4	4,027,919.
5 Multiply line 4 by line 3							5		154,451.
6 Enter 1% of net investment income (1%	of Part I line 27h)						6		2,050.
·	or arti, inic 2101						_ <u> </u>		
7 Add lines 5 and 6							7		156,501.
B Enter qualifying distributions from Part	•						8		212,030.
If line 8 is equal to or greater than line 7 See the Part VI instructions.	, check the box in Part VI, line	1b, and comp	lete that part using	g a 19	% tax rate.				

18 Exempt operating foundations described in section 4940(d)(2), check heir ▶ ☐ and enter **(NA* on line 1 on Date of rulings of determination letter:		n 990-PF (20 16) The Saab Family Foundation 27-4 art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948-	3927 see ins		ctio	<u>Page 4</u> 1 s)
Date of ruling or determination letter:	1a					
b Domestic foundations that meet the section 4947(a) requirements in Part V, check here						
on Part I, line 27b. of Part I, line 27b. of All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). 2 Yax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 3 \$2,050. 3 \$2,050. 5 Tax based on investment income. Subtract line 4 from line 3 I zero or liss, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3 I zero or liss, enter -0- 6 Credits-8/pments 2 0016 estimated tax payments and 2015 overpayment credited to 2016 6 Exempt foreign organizations - tax withheld at source 6 B. 6 B. 6 B. 7 Could be set of the subtract of the	b			:	2,0	50.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2 Q. Q. G. Add lines 1 and 2 3 Q. Q. 50 D. 3 Add lines 1 and 2 4 Subtile A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3 it zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3 it zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3 it zero or less, enter -0- 6 Techts/Payments 2 0016 estimated tax payments and 2015 overpayment credited to 2016 6 Exempt foreoption organizations: star withheld at source 6 Tax paid with application for extension of time to file (Form 8868) 6 Be 6 Be 7 Total credits and payments. Add lines 63 through 8d 7 Total credits and payments. Add lines 63 through 8d 8 Enter any penalty for underpayment of estimated tax. Check here I of form 220 is attached 9 1 Tax due if the total of lines. Sand 8 more than line 7, enter amount owed 9 2 2, 0.50 . 10 overpayment. If line 7 is more than the total of lines 5 and 8, inter the amount overpard 10 overpayment. If line 7 is more than the total of lines 5 and 8, inter the amount overpard 10 overpayment. If line 7 is more than the total of lines 5 and 8, inter the amount overpard 11 overpayment. If line 7 is more than the total of lines 5 and 8 is more than line 7, enter amount overpard 12 overpayment. If line 7 is more than the total of lines 5 and 8. 13 overpayment of line 10 to be: Credited to 2017 estimated tax. 14 overpayment. If line 7 is more than the total of lines 5 and 8. 15 overpayment. If line 7 is more than the total of lines 5 and 8. 16 overpayment. If line 7 is more than the total of lines 5 and 8. 17 overpayment. If line 7 is a credit line 4 form the 2 line 4 lin			_		-	
3 2,050. Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax based on investment income Subtract line 4 from line 3 ft zero or less, enter -0- Tax based on investment income Subtract line 4 from line 3 ft zero or less, enter -0- Codest-Payments 2 016 estimated tax payments and 2015 overpayment credited to 2016 Exempt foreign organizations - tax withheld at source Cax paid with oppolication for exemption of the 16 ft form 8868) 6 6 6 6 6 6 6 7 7 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).				
4 Q. C. Tax based on investment income Subtract line 4 from fine 3 if zero or less, enter -0- 6 C. Gredits-Pyments 2 D16 estimated tax payments and 2015 overpayment credited to 2016 6 Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8568) 6 B. Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8568) 6 B. Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8568) 6 B. Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8568) 6 B. Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8568) 6 B. Exempt foreign organizations - tax withheld at Source c Tax paid with application for extension of time to file (Form 8568) 6 B. G.	2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0.
5 Tax based on investment income Subtract line 4 from line 3 if zero or less, enter-0-6 6. CredityPayments a 2016 estimated tax payments and 2015 overpayment credited to 2016 b Exempt foreign organizations - tax withheld all source c Tax paid with application for extension of time to file (Form 8588) d Backup withholding erroneously withheld 7. Total credits and payments. Add lines 6a through 86 a Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 9. Tax due If this total of lines 5 and 8 is more than line 7, enter a mount of were 10. Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 9. Tax due If this total of lines 5 and 8 is more than line 7, enter a mount of were 11. Enter the amount of line 10 is be: Credited to 2017 estimated tax. Part VII-A Statements Regarding Activities 12. 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? 12. Dut is spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 13. If the answer is "Yes" to 1a or 1b., attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities 14. The answer is "Yes" to 1a or 1b., attach a detailed description of the activities and copies of any materials published or distributed by the foundation in € form 112-Pol. to this year? 15. Enter the amount (if any) part by the foundation during the year for political expenditure tax imposed on foundation minangers. ▶ \$ 0. 0. (2) for foundation managers. ▶ \$ 0. 0. Enter the reimbursement (if any) part by the foundation found from the year for political expenditure tax imposed on foundation minangers. ▶ \$ 0. 1. (2) in foundation managers. ▶ \$ 0. 1. (2) in foundation managers. ▶ \$ 0. 1. (2) in foundation managers. ▶ \$ 0. 1. (3) in foundation managers.	3	Add lines 1 and 2		:	2,0	<u>50.</u>
6 Credits/Payments a 2016 estimated tax payments and 2015 overpayment credited to 2016 b Exempt to longing organizations - tax withheld at source (Tax paid with application for extension of time to file (Form 8688) b Exempt to longing organizations - tax withheld at source (Tax paid with application for extension of time to file (Form 8688) b Each year of the Sea of the Sea of	4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				
a 2016 estimated tax payments and 2015 overpayment credited to 2016 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to title (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments Add times 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here in 1 Form 2220 is attached 9 Tax due If the total of lines 5 and 8, enter the amount owed 10 Overpayment If line? I is more than the total of lines 5 and 8, enter the amount ower paud 11 Enter the amount of line 10 to be; Credited to 2017 estimated tax Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 15 Did if spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 16 If the answer is "Yes" to 1 a or 1b, attach a defailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities 2 Did the foundation file Form \$120-POL for this year? 2 If the answer is "Yes" to 1 a or 1b, attach a defailed description of the activities 3 Did to the foundation of the promotion of the activities and copies of any materials published or distributed by the foundation mechanism of mechanisms of the activities and copies of any materials published or distributed by the foundation mechanism of the member of the activities and the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities 2 Did the foundation mada any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 3 A X 4 Did the foundation have unrelated business gross income of \$1,000 or more during	5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-			2,0	<u>50.</u>
b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) 6 Backup withholding erroneously withheld 7 Total credits and payments. Add lines 68 athrough 66 8 Enter any peatalty for underpayment of estimated tax. Check here if form 2220 is attached 8 Tax due if the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due if the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment if line? 's more than the total of lines 5 and 8, enter the amount overpaid 11 Tenter the amount of line 10 to be: Credited to 2017 estimated tax. 12 Enter the amount of line 10 to be: Credited to 2017 estimated tax. 13 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or influence any national of the properties of the definition? 14 In the answer is "Yes" to a or 16, attach a detailed description of the activities and copies of any maternals published or distributed by the foundation in connection with the activities 1 During the tax year, did the foundation in connection with the activities 2 Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 1 If the answer is "Yes" to a or 16, attach a detailed description of the activities and copies of any maternals published or distributed by the foundation in connection with the activities 2 Did the foundation fle Form 1120-PDL for this year? 3 In the foundation fle Form 1120-PDL for this year? 4 In 'Yes, 'attach a detailed description of the activities 3 Has the foundation mapped in any activities that have not previously been reported to the IRS? 4 In 'Yes, 'attach a detailed description of the activities 4 But the foundation have unrelated business gross is some of \$1,000 or more during the year? 5 In 'Yes, 'attach the statement required by General Instruction T A that the requirements of section 508(c) (relating to sections 494	6	Credits/Payments				
c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneusly withhold 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment If line? I sim one than the total of lines 5 and 8, enter the amount ower paid 11 Enter the amount of line 10 to be; Credited to 2017, estimated tax. ► Part VII-A 12 Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 15 Did if it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 16 the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and detailed by the foundation in Connection with the activities 1a Diring the trembursement (if any) paid by the foundation during the year? 4 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year. (1) On the foundation. ► S O. (2) On foundation managers. ► S O. 1a Extraction of the imposition of the activities and the rembursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► S O. 1b Extra the dividence of the activities and the foundation have already of the foundation faving the year? 15 Was there a fluidation, termination, dissolution, or substantial contraction during the year? 16 Are	a	2016 estimated tax payments and 2015 overpayment credited to 2016				
d Backup withholding erroneously withheld 7 Total credits and payments Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here	b	Exempt foreign organizations - tax withheld at source				
7 Total credits and payments Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 9 Tax due If the total of lines 5 and 4 is more than line 7, enter amount owed 10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount owed 11 Enter the amount of line 10 to be: Credited to 2017 estimated tax	C	Tax paid with application for extension of time to file (Form 8868)				
8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is altached ☐ 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed ☐ 10 Overpayment If the 7 is more than the total of lines 5 and 8, in the 1 ines 5 and 8 is more than the total of lines 5 and 8 is more than the total of lines 5 and 8 is more than the total of lines 5 and 8 is more than the total of lines 5 and 8 is more than the total of lines 5 and 8 is more than the total of lines 5 and 8 is more than the total of lines 5 and 8 is more than the total of lines 5 and 8 is more than the 10 lines 5 and 8 is more than the 10 lines 5 and 8 is more than the 10 lines 5 and 8 is more than the 10 lines 5 and 8 is more than 10 lines 5 and 8 is a line 10 lines 5 and 8 is a lines 10 lines 1	d	Backup withholding erroneously withheld 6d				
9 Tax due if the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment if line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be: Credited to 2017 estimated tax ▶ Refunded ▶ 11 Part VIII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? If the answer is "Yes" to 1a or 1b., attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities c Did the foundation if error 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year. (1) On the foundation. ▶ \$ 0 (2) On foundation managers. ▶ \$ 0 e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 0 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities 3 Has the foundation make any changes, not previously been reported to the IRS? If "Yes," attach a detailed description of the activities 3 Has the foundation make unrelated business gross income of \$1,000 or more during the year? 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: 8 By language in the governing instrument, or 9 99-17 for this year? 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV X X X X X X X X X	7	Total credits and payments Add lines 6a through 6d				<u>0.</u>
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Pa	rt VII-A	Statements Regarding Activities (continued)				
					Yes	No
11	At any time	e during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of				ĺ
		2(b)(13)? If "Yes," attach schedule (see instructions)		11		Х
12	Did the fou	indation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory	privileges?			
	If "Yes," atta	ach statement (see instructions)		12		Х
13	Did the fou	indation comply with the public inspection requirements for its annual returns and exemption application?		13	Х	
		dress ► www.saabfamilyfoundation.org				,
14			. ▶ 603-23	3-2	195	
	Located at	▶ 29 Northwestern Drive, Salem, NH	ZIP+4 ▶03			
15	Section 49	47(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here				
	and enter t	he amount of tax-exempt interest received or accrued during the year	► _ 15	N	/ <u>A</u>	
16	At any time	e during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,			Yes	No
	securities,	or other financial account in a foreign country?		16		Х
	See the ins	structions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	İ			
	foreign cou					
Pa	rt VII-B	Statements Regarding Activities for Which Form 4720 May Be Required				
	File Form	n 4720 if any item is checked in the "Yes" column, unless an exception applies.			Y <u>e</u> s	No
		year did the foundation (either directly or indirectly):				
	• • • •		Yes 🗶 No			
		w money from, lend money to, or otherwise extend credit to (or accept it from)				
			Yes X No			
	٠,		Yes X No			
			Yes X No			
		er any income or assets to a disqualified person (or make any of either available				
			Yes X No			
		to pay money or property to a government official? (Exception. Check "No"	,			
		oundation agreed to make a grant to or to employ the official for a period after			}	
			Yes X No		' I	
		ver is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	37 / 3			
		4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	N/A	1b		
		ons relying on a current notice regarding disaster assistance check here				
		ndation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		4.		v
		first day of the tax year beginning in 2016?		1c		X
		ailure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation section 4942(j)(3) or 4942(j)(5)).	'			
		of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginn:	ına			
	before 2016		Yes X No		İ	
		About the Market	163 [22] 110			
		the years ►,,,,,,,	ct			
		f assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attac				
		see instructions.)	M/A	2b		
		sions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	,			
	•					
3a	Did the four	ndation hold more than a 2% direct or indirect interest in any business enterprise at any time				
	during the y		Yes X No		ļ	
b	If "Yes," dıd	it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons a		į	İ	
		69; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to				
		acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule	·			
		0, to determine if the foundation had excess business holdings in 2016)	N/A	3ъ		
4a	Did the four	ndation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		Х
		ndation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpo	se that			
	had not bee	en removed from jeopardy before the first day of the tax year beginning in 2016?		4b		X
			г	~ 007	DE /	12010

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Form 990-PF (2016) The Saab Family Foundati Part VII-B Statements Regarding Activities for Which I	on	Poguirod /	27-4392	768	Page 6
5a During the year did the foundation pay or incur any amount to:	TOTTI 4/20 IVIAY DE I	nequired (contin	uea)	- 1	
(1) Carry on propaganda, or otherwice attempt to influence legislation (section	1 4945(e))?	□ v	es X No		
(2) Influence the outcome of any specific public election (see section 4955); o	, ,,		/• <u> </u>		
any voter registration drive?	, , ,		es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	<u> </u>	es 🔲 No	i	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
4945(d)(4)(A)? (see instructions)		Y(es 🗶 No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or				
the prevention of cruelty to children or animals?		· · · · · · · · · · · · · · · · · · ·	es 🗶 No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		in Regulations			
section 53 4945 or in a current notice regarding disaster assistance (see instru				5b	<u> </u>
Organizations relying on a current notice regarding disaster assistance check h					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr					
expenditure responsibility for the grant?		I/A LY	es L No		
If "Yes," attach the statement required by Regulations section 53 4945					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to page a personal benefit contract?	oay premiums on		es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	arconal banafit contract?	Te	es LALINO	6ь	X
If "Yes" to 6b, file Form 8870	ersonal Denemi Contract?		-	00	^A
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?		es X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b	
Part VIII Information About Officers, Directors, Trusto		nagers. Highly			
Paid Employees, and Contractors			•		
1 List all officers, directors, trustees, foundation managers and their	compensation.				
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e	Expense ount, other
(a) Name and address	to position	enter -0-)	compensation	ai	owances
					•
See Statement 11		0.	0.	-	0.
		-			
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e	Expense ount, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(C) Compensation	and deferred compensation	al	owances
NONE					
				1	
					
Fotal number of other employees paid over \$50,000		i	T	L	0
Total number of other employees para ever 400,000					<u> </u>

Form 990-PF (2016) The Saab Family Foundation		392768 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Mana Paid Employees, and Contractors (continued)	igers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical informatio number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
Provide funds to charitable organizations in the Lo and Salem, NH areas that provide assistance to low		
individuals, youth and homeless individuals.		155,030.
High school and college scholarships for deserving youth of limited economic means.	local	
		57,000.
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
N/A		
All other program-related investments. See instructions.		
3		

P	art X Minimum Investment Return (All domestic foundations r	nust d	complete this	part Foreign foui	ndations, s	ee instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitab	le. etc	. purposes.			
a	Average monthly fair market value of securities	-,	, , , , , , , , , , , , , , , , , , , ,		1a	3,989,862.
ь	Average of monthly cash balances				1b	3,989,862. 99,396.
C	Fair market value of all other assets				1c	
d	Total (add lines 1a, b, and c)				1d	4,089,258.
е	Reduction claimed for blockage or other factors reported on lines 1a and					
	1c (attach detailed explanation)	1e	1	0.		
2	Acquisition indebtedness applicable to line 1 assets				2	0.
3	Subtract line 2 from line 1d				3	4,089,258.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount	, see II	nstructions)		4	61,339.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and or		•		5	4,027,919.
6	Minimum investment return Enter 5% of line 5		,		6	201,396.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) are foreign organizations check here ☐ and do not complete this part.		5) private opera	ting foundations ar	id certain	
1	Minimum investment return from Part X, line 6				1	201,396.
2a	Tax on investment income for 2016 from Part VI, line 5	2a		2,050.		
b	Income tax for 2016. (This does not include the tax from Part VI.)	2b				
C	Add lines 2a and 2b		-		2c	2,050.
3	Distributable amount before adjustments. Subtract line 2c from line 1				3	199,346.
4	Recoveries of amounts treated as qualifying distributions				4	0.
5	Add lines 3 and 4				5	199,346.
6	Deduction from distributable amount (see instructions)				6	0.
7_	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part	XIII, li	ne 1		7	199,346.
P	art XII Qualifying Distributions (see instructions)					
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purp	poses				
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26				1a	<u>212,030.</u>
b	Program-related investments - total from Part IX-B		-		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitate	ble, etc	., purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the.					
а	Suitability test (prior IRS approval required)			`	3a	
b	Cash distribution test (attach the required schedule)				3b	
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and	nd Par	t XIII, line 4		4	212,030.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net inve	stmen	t			
	income. Enter 1% of Part I, line 27b				5	2,050.
6	Adjusted qualifying distributions Subtract line 5 from line 4				6	209,980.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years w	vhen ca	alculating wheth	er the foundation of	ualifies for t	the section

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI,		10a13 prior to 2013	2013	2010
·				100 246
line 7			<u>.</u>	199,346.
2 Undistributed income, if any, as of the end of 2016			210 220	
a Enter amount for 2015 only b Total for prior years:	. .		210,228.	
b rotarior prior years.		0.		
3 Excess distributions carryover, if any, to 2016:		<u> </u>		
a From 2011	•			
b From 2012				
	`		,	
c From 2013		•		
d From 2014			~	
e From 2015				
f Total of lines 3a through e	0.			<u>.</u>
4 Qualifying distributions for 2016 from		· ·		
Part XII, line 4: ► \$ 212,030.				
a Applied to 2015, but not more than line 2a	,		210,228.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount				1,802.
e Remaining amount distributed out of corpus	0.	-		<u> </u>
5 Excess distributions carryover applied to 2016	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))	0.			
6 Enter the net total of each column as indicated below.				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				·-········
amount - see instructions		0.		
e Undistributed income for 2015. Subtract line				
4a from line 2a Taxable amount - see instr.			0.	
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2017				107 544
F				197,544.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2011				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2017				
Subtract lines 7 and 8 from line 6a	0.			
O Analysis of line 9:				
a Excess from 2012		1		
b Excess from 2013		`		
c Excess from 2014				
d Excess from 2015				
e Excess from 2016		,		

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Form 990-PF (2016) The Saa	<u>b Family Fo</u>	<u>undation</u>			392768 Page 1
Part XIV Private Operating F	oundations (see in	structions and Part V	II-A, question 9)	N/A	
1 a If the foundation has received a ruling of	r determination letter tha	t it is a private operating			
foundation, and the ruling is effective fo	r 2016, enter the date of	the ruling	▶ ∟		
b Check box to indicate whether the found	dation is a private operation	ng foundation described	in section	1912(j)(3) or1	942(<u>j)(5)</u>
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	<u>, </u>	
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not				_	
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the			· · · · · · · · · · · · · · · · · · ·		
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets			<u> </u>		
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(1) Total support other than gross					
investment income (interest,]
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from		<u> </u>			
an exempt organization					
(4) Gross investment income	· ·			 	
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or m	ore in assets
at any time during the					
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation who	have contributed more	than 2% of the total cont	ributions received by the	foundation before the clo	se of any tax
year (but only if they have contributed m	ore than \$5,000). (See s	ection 507(d)(2).)			
See Statement 12					
b List any managers of the foundation who			(or an equally large porti	on of the ownership of a p	artnership or
other entity) of which the foundation has	a 10% or greater interes	St.			
None					
2 Information Regarding Contribution					
Check here If the foundation of	nly makes contributions t	o preselected charitable	organizations and does i	not accept unsolicited requ	iests for funds. If
the foundation makes gifts, grants, etc. (see instructions) to indiv	iduals or organizations u	inder other conditions, c	omplete items 2a, b, c, and	d d.
a. The name, address, and telephone numb	ier or e-mail address of t	he person to whom appl	cations should be addre	ssed.	
See Statement 13_					
b The form in which applications should be	e submitted and informat	ion and materials they sl	nould include:		
c Any submission deadlines:			-	<u>.</u>	
d Any restrictions or limitations on awards	, such as by geographica	l areas, charitable fields,	kınds of institutions, or	other factors:	

Page 11

Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount status of any foundation manager contribution Name and address (home or business) or substantial contributor recipient a Paid during the year Youssef Bourophael None Individual High school 45 Wesley Street scholarship Lawrence, MA 01841 1,000. Siddhart Agarwal None Individual College scholarship 25 Edinburgh Road Windham, NH 03087 2,000. Kelly Bettencourt None Individual College scholarship 233 Lawrence Street Lowell, MA 01852 2,000. Saddan Genoa Lizardo None Individual College scholarship 111 Park Street Lawrence MA 01841 2,000. Lily Kelley None Individual College scholarship 11 Etta Road Lowell MA 01851 2,000. See continuation sheet(s) Total **▶** 3a 212 030 b Approved for future payment None Total **▶** 3b

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated I	ousiness income	Excluded b	y section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
· ·	Code	 ·	Code		
			- 		
b	1 1				
d					
0	-				
e	-				
g Fees and contracts from government agencies					
2 Membership dues and assessments		••			
3 Interest on savings and temporary cash		_			
investments			14	18.	
4 Dividends and interest from securities			14	97,932.	
5 Net rental income or (loss) from real estate:		·			
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property 7 Other investment income			1 4	766	
	-	-	14	766.	.
8 Gain or (loss) from sales of assets other than inventory			18	118,757.	
9 Net income or (loss) from special events				110,/5/	
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
			1		
c	1 1		+		
d					
e		 .:			
12 Subtotal Add columns (b), (d), and (e)	-	().	217,473.	0.
3 Total Add line 12, columns (b), (d), and (e)	•	_		13	217,473.
See worksheet in line 13 instructions to verify calculations.)					

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

₩ WO	the foundation's exempt purposes (other than by providing funds for such purposes)
+	
	

		Exempt Organ	izations							
1 Di	d the or	ganization directly or indir	rectly engage in any	of the following	ng with any other organizati	on described in secti	on 501(c) of		Yes	No
the	e Code	(other than section 501(c))(3) organizations) oi	r in section 52	27, relating to political organ	nizations?				
a Tra	ansfers	from the reporting founda	ation to a noncharital	ble exempt or	ganization of:					
(1)) Cash							1a(1)		_X_
(2)	Other (assets						1a(2)		<u> </u>
b Ot	her tran	isactions:						ļ		
(1)	Sales	of assets to a noncharital	ble exempt organizat	ion		•		1b(1)		X
(2)	Purch	hases of assets from a noi	ncharitable exempt o	rganization				1b(2)		X
(3)	Renta	al of facilities, equipment, i	or other assets		'			1b(3)		X
(4)	Reim	bursement arrangements						1b(4)		Х
(5)	Loans	s or loan guarantees						1b(5)		X
(6)	Perfo	rmance of services or me	mbership or fundrais	sing solicitatio	ons			1b(6)		<u>X</u>
c Sh	aring o	f facilities, equipment, mai	iling lists, other asse	ts, or paid em	ployees			1c		<u>X</u>
d If t	he ansv	wer to any of the above is	"Yes," complete the f	ollowing sche	edule Column (b) should al	ways show the fair m	narket value of the goods, ot	her ass	ets,	
or	service	s given by the reporting fo	oundation. If the four	idation receiv	ed less than fair market vali	ue in any transaction	or sharing arrangement, sh	ow in		
		I) the value of the goods, o								
(a) Line r	10	(b) Amount involved	(c) Name of		e exempt organization	(d) Description	of transfers, transactions, and sh	aring ari	angeme	nts
				N/A						
		_								
										
	_									
		-								
_			-							
	_					<u> </u>				
	-									
	-									
_										
20 101	ho four	adation directly or indirect	h, affiliated with or r	alatad ta ana	or more toy evenet ereen	Totiono doceribod	<u> </u>		-	
		501(c) of the Code (other	-		or more tax-exempt organi	zations described		Yes	X] No
		emplete the following sche		(3)) 01 111 3661	1011 327		L	7 162	لما	טאונ
יו ע	163, 66	(a) Name of orga			(b) Type of organization	1	c) Description of relationshi	n		
		N/A			(b) Type of organization	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	e possinguon or relationent	<u> </u>		
		11/11					-			
		-								
										
	Under	penalties of perjury, I declare t	hat I have examined this	return, includin	g accompanying schedules and	statements, and to the t	pest of my knowledge	ha IDC a	liscuss ti	_
Sign	and be	elief, it is true, correct, and com	plete, Declaration of pre	parer (other thai	n taxpayer) is based on all inform	nation of which preparer	nas any knowledge return	with the	prepare (see inst	er
Here		ליצול	n su	a-b	10-25-18	Truste		Yes	(See IIISII	No
	Sign	ature of officer or trustee	<u>, , , </u>		Date	Title			-	
		Print/Type preparer's na	me	Preparer's si	gnature	Date ,	Check If PTIN			
				1.11	1112	10/18/18	self- employed			
Paid		William V.	A. Zorn	win	-V4 6	10110110	P00	291	996	
Prepa	arer			eton,	Professional	Assoc.	Firm's EIN ► 02-03			
Use (Only			•						
		Firm's address ▶ P . (O. Box 32	6		_				
			nchester,	NH 03	105-0326		Phone no. (603)6	<u> 25-</u>	646	4
							For	m 990)-PF (2016)

The Saab Family		27-43	92768	<u>Page</u>	<u> 1 of</u>	1
	sses for Tax on Investment Income		- 1		,	
	d describe the kind(s) of property sol rick warehouse; or common stock, 2		(b) How acc P - Purch D - Dona	quired (c) Date acquiase (mo., day,)	ured (d) Date (r.) (mo., da	
1a AB Small Cap G	rw - 413.804 sh		P	12/16/	1502/24	1/16
	ust Int Gvt - 55	8 sh	P		1502/24	
c AB Small Cap G	rw - 4,885.699 s	h	P		02/24	
	ty Dividend - 2,		P	05/30/	1201/07	
e JP Morgan High	Yield - 2,804.8	74 sh	P		1402/24	
	quity Sel - 8,93		P	05/30/		., 10
	ope Hedged - 682		P		1406/28	1/16
	an Hedge - 851 s		P		1406/28	
Gabelli Asset			P	06/14/		,, 10
	t Sec - 547.337s	h	P		1102/24	/16
	Global - 1,193.		P		$\frac{1102}{24}$	
Capital Gains		100 811		00/14/	1102/24	:/ 10
	Dividends					
m						
n	V-3-	 -				
0	(0 Decreed to all to all	/ 1 O1 1 - 1	<u> </u>	"10 "		
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (loss (e) plus (f) minus ((g)	
a 15,062.		18,096.			-3,0	
b 28,328.		31,275.			-2,9	
c 177,839.		194,986.				
d 50,000.		46,183.			3,8	<u> 17.</u>
e 18,540.		21,990.			-3,4	50.
f 129,779.		93,243.			36,5	36.
g 33,289.	,	39,248.			-5,9	59.
h 32,648.		46,618.			-13,9	
173,255.		147,850.			25,4	
11,620.	•	11,254.	***			66.
k 19,926.		18,959.				67.
98,173.					98,1	
m	_	* **	-		·	
n						
0						
Complete only for assets showin	g gain in column (h) and owned by t	he foundation on 12/31/69	(I) 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	Gains (ex	cess of col. (h) gain but not less than "-(over col (k),	
a					-3,0	34.
b		-			-2,9	
c		', , ,			-17,1	
<u> </u>						17.
8	<u> </u>	···			-3,4	
f		·			36,5	
9		7	-		-5,9	
y h					-13,9	
					$\frac{-13, 9}{25, 4}$	
	-					66.
<u>l</u>						
1						<u>67.</u>
<u> </u>					98,1	13.
n						
n						
)					.	
Capital gain net income or (net cap	pital loss) { If gain, also enter If (loss), enter "-0-	ın Part I, line 7 1			110 7	E 77
, Sapital gain het income or (net ca)	t If (loss), enter "-0-	in Part I, line 7 /	2		118,7	<u> </u>
Net short-term capital gain or (los		d (6).				
If gain, also enter in Part I, line 8, o		}				
If (loss), enter "-0-" in Part I, line 8			3	N/A		

Part XV Supplementary Informa Grants and Contributions Paid During t				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
Miranda Melo	none	Individual	College scholarship	
10 Merrill Street				2 00
Lowell, MA 01852				3,000
Meghan Menihane	none	Individual	College scholarship	
106 Hampstead Street			correge sonorarsmip	
Metheun, MA 01844				5,000
Jose Molina	none	Individual	College scholarship	
1337 Pawtucket Blvd, Apt 22 Lowell, MA 01854				2,000
LOWETT, MA 01054				
Michael Montijo	Varia	T- 31-1 31		
45 Foster St., Apt. A	None	Individual	College scholarship	
Lowell, MA 01851				3,000
Geoffrey Paige	none	Individual	College scholarship	
376 Hale St., #1946				
Beverly, MA 01915				3,000
Daniel Pires 2 Longmeadow Road	None	Individual	College scholarship	
Chelmsford, MA 01824		`		5,000
Courtney Richards	none	Individual	College scholarship	
346 Concord St.	,			
Lowell, MA 01852				3,000
Amanda Simoneau 114 Talent Road	none	Individual	College scholarship	
Litchfield NH 03052				3,000
Alison Bettencourt	none	Individual	College scholarship	
158 Berkeley Avenue				
Lowell, MA 01851			-	2,000
Julianna Bourzerdan	none	individual	College scholarship	
50 Station Landing, Apt. 615 Medford, MA 02155				2,000
Total from continuation sheets	L	1	-1-	203.030

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount contribution any foundation manager status of Name and address (home or business) or substantial contributor recipient Janelle Bouzerdan None Individual College scholarship 50 Station Landing, Apt. 615 Medford MA 02155 2,000. Jessica DaSılva None Individual College scholarship 44 Manchester Street Lowell, MA 01852 2,000. Junsu Kim none Individual College scholarship 100 Pawtucket St., Apt. 1001 2,000. Lowell MA 01854 Keegan Lannon none Individual College scholarship 8 Arrowwood Street Metheun, MA 01844 2,000. Shelby Phillips Individual None College scholarship 552 Lawrence Street Lowell, MA 01852 3,000. Stephanie Silva Individual College scholarship hone 10 Independent Drive Lowell, MA 01854 3,000. Bladys Soler None Individual College scholarship 144 Chester Street Lawrence, MA 01843 3,000. Aaron's Presents none Public Charity Mentoring and 180 Main St. logistical assistance Andover, MA 01810 for school children carrying out an idea that benefits at least 5,000. Public Charity Support Forces in Aviation Museum of New Hampshire None 27 Navigator Rd. Motion program Londonderry, NH 03053 teaching school hildren about flight 4,000. Boys & Girls Club of Greater Lowell hone Public Charity Funding a job 657 Middlesex St. readiness program for Lowell MA 01851 15,000. teenagers Total from continuation sheets

3 Grants and Contributions Paid During th				_
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Coalition for a Better Acre	None	'	Supported Training and	
517 Moody St., 3rd Flr			Education Program	
Lowell, MA 01854			training low income	
•			and minority youth	
			skills necessary for	7,500
Housing Families, Inc.	none	Public Charity	Providing therapeutic	•
919 Eastern Ave			and academic services	
Malden, MA 02148			to children and	
			parents who are at	
			risk of homelessness	10,000
-				
International Institute of New	None	public Charity	Fudning refugess	
England			resettlement for newly	
1850 Elm St. #6	1		arrived families in	
Manchester, NH 03104			Lowell MA	15,000
Jumpstart for Young Children	None	Public Charity	Support provision of	•
308 Congress Street, 6th Floor			high quality early	
Boston, MA 02210]		education for young	
			children in the	
			Lawrence area	10,000
LeBlanc Therapeutic Day School	None	Public Charity	Support programs	
58 Sycamore St.		_	encouraging children	
Lowell, MA 01852			in the Lowell area to	
			work collectively to	
			achieve success	1,030
Lowell Community Health Center	None	public Charity	Supporting provision	
161 Jackston St.			of medical	
Lowell, MA 01852	ĺ		interpreting and other	
			services for	
			low-income individuals	10,000
Mayhew Program	None	Public Charity	Tuition assistance for	
293 W. Shore Rd.			at-risk boys to	
Bristol, NH 03222	1		receive supportive	
			residential summer	
			programs	2,500
Middlesex Community College	none	public Charity	Supporting at risk out	
591 Springs Rd.			of school youths for	
Bedford, MA 01730		i	costs of certification	
			training, books, and	
			classroom materials	15,000
Nashua Childrens Home	none		Supporting program	
125 Amherst St.			providing housing and	
Nashua, NH 03064			other transitional	•
			assistance to youths	
		į.	aging out of the	15,000
Nevins Family of Services	None		Providing low income	
10-12 Ingalls Court			seniors and disabled	
Methuen, MA 01844			persons in Essex	
,			County with long term	
		1	nursing home care	15,000
Total from continuation sheets		•		

Part XV Supplementary Information	n		, .	
3 Grants and Contributions Paid During the	Year (Continuation)	_		
Recipient	If recipient is an individual,	Fa. adatas	D	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
One Family	none	- 	Provide financial	
800 South St. #610			assistance to homeless	
Waltham, MA 02453			or at-risk single	
· · · · · · · · · · · · · · · · · · ·			parents to pursue a	
			college degree	10,000.
Rise Above Foundation	none	public Charity		
P.O. Box 174			Massachusetts children	
Northbridge , MA 01534			in foster care with	
- ,			activities to provide	
			normalcy and build	10,000.
Si, Se Puede	none	public Charity	Providing educational,	
P.O. Box 53	,		social and economic	
North Andover, MA 01845			support to very low	
•			income youth and their	
			families in the	10,000.
				1
				,
				·
			l i	
,				
Total from continuation sheets				

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

Name of Recipient - Aaron's Presents

Mentoring and logistical assistance for school children carrying out an idea that benefits at least one other person, animal or the environment

Name of Recipient - Coalition for a Better Acre

Supported Training and Education Program training low income and

minority youth skills necessary for manufacturing careers

Name of Recipient - LeBlanc Therapeutic Day School

Support programs encouraging children in the Lowell area to work

collectively to achieve success

Support programs for children in the Lowell area to work collectively

to achieve success

Name of Recipient - Nashua Childrens Home

Supporting program providing housing and other transitional assistance

to youths aging out of the child-protective or juvenile justice system

Name of Recipient - Rise Above Foundation

Providing Massachusetts children in foster care with activities to

provide normalcy and build self-esteem

Name of Recipient - Si, Se Puede

Providing educational, social and economic support to very low income

youth and their families in the Lawrence area

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

Name of the organization

Employer identification number

	Th	le Saab Family Foundation	27-4392768
Organizati	ion type (check or	·	
Filers of:		Section:	
Form 990 o	or 990-EZ	501(c)() (enter number) organization	
		4947(a)(1) nonexempt charitable trust not treated as a private foundation	
		527 political organization	
Form 990-F	PF .	X 501(c)(3) exempt private foundation	
		4947(a)(1) nonexempt charitable trust treated as a private foundation	
		501(c)(3) taxable private foundation	`
-	a section 501(c)(covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule.	e See instructions
	=	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor's	•
Special Ru	ıles		
se an	ections 509(a)(1) a ny one contributo	described in section 501(c)(3) filing Form 990 or 990 EZ that met the 33 1/3% support that 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990 EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount line 1 Complete Parts I and II	or 16b, and that received from
ye	ear, total contribut	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educaruelty to children or animals. Complete Parts I, II, and III	
ye ıs pu	ear, contributions checked, enter he urpose Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a exclusively for religious, charitable, etc., purposes, but no such contributions totaled mo ere the total contributions that were received during the year for an exclusively religious, applete any of the parts unless the General Rule applies to this organization because it re e, etc., contributions totaling \$5,000 or more during the year	re than \$1,000 If this box charitable, etc ,
but it must	answer "No" on	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fo Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fo ne filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization

Employer identification number

The Saab Family Foundation

27-4392768

me S	saab Family Foundation		7-4392768
Part I	Contributors (See instructions) Use duplicate copies of Part I	if additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Elisia Saab 396 Andover St. Lowell, MA 01852	\$\$\$\$.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Mark Saab 396 Andover St. Lowell, MA 01852	\$2,249,428.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	Analise Brown 45 Clark Road Lowell, MA 01852	\$500,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>4</u>	Alana Saab 396 Andover St. Lowell, MA 01852	\$\$	Person X Payroll X Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Omnocash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
B23452 10-1		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

The Saab Family Foundation

27-4392768

raitii	Noticasti Property (see instructions) Ose duplicate copies of Part II ii	additional opace is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	14,326.5 shares common stock and 2,840.5 shares of series A-2 stock of Vention Medical Holdings, Inc	\$ <u>2,249,428.</u>	12/16/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
2	14,326.5 shares common stock and 2,840.5 shares of series A-2 stock of Vention Medical Holdings, Inc	s2,249,428.	12/16/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
3	4,000 shares common stock of Vention Medical Holdings, Inc.	\$500,000.	_12/16/16
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
4	4,000 shares common stock of Vention Medical Holdings, Inc.	\$500,000.	12/16/16
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	

Name of orga	nization		Employer identification number
The Sa	ab Family Foundation		27-4392768
Part III	Exclusively religious, charitable, etc., con the year from any one contributor. Complete completing Part III, enter the total of exclusively religion	columns (a) through (e) and the follow	n section 501(c)(7), (8), or (10) that total more than \$1,000 for
	Use duplicate copies of Part III if addition	nal space is needed	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
-			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
_		(e) Transfer of gift	<u> </u>
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
-			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gift	
	Transferee's name, address, a		Relationship of transferor to transferee
-			
-			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
-		(e) Transfer of gift	
	Transferee's name, address, a		Relationship of transferor to transferee
-			

Form 990-PF Intere	st on Savi	ngs and	Tempor	cary Ca	sh In	vestments	Statement	1
Source			(a) Revenue er Book		(b) Net Investment Income		(c) Adjusted Net Income	
Morgan Stanley Smit	h Barney			18.		18.		-
Total to Part I, li			18.		18.			
Form 990-PF	Dividend	s and Ir	nterest	from	Secur	ities	Statement	2
Source	Gross Amount	Capi Gai Divid	ns	(a Reve Per B	nue	(b) Net Inves ment Inco	_	
Morgan Stanley Smith Barney	196,105	. 98	3,173.	97	,932.	85,45	3.	
To Part I, line 4	196,105	98	3,173.	97	,932.	85,45	3.	
Form 990-PF		Othe	er Inco	ome			Statement	3
				(a) evenue Books		(b) et Invest- ent Income	(c) Adjuste Net Inco	
Nondividend distrib	outions			7	66.	766	•	
Total to Form 990-P	F, Part I,	line 11		7	66.	766	•	
Form 990-PF		Le	gal Fe	es			Statement	4
Description		(a) Expense Per Boo		(b) et Inve		(c) Adjusted Net Incom		
<u> </u>								
Professional Fees		7,9	61.		0.			0.

Form 990-PF ,	Taxes			Statement 5			
Description	(a) Expenses Per Books	(b) Net Invest- ment Income		(c) Adjusted Net Incom		Charitable	
Foreign Taxes Federal Excise Taxes	1,530. 3,782.		0.		,	0.	
To Form 990-PF, Pg 1, ln 18	5,312.		0.		,	0.	
Form 990-PF	Other E	xpenses			Statement	6	
Description	(a) Expenses Per Books	(b) Net Inve ment Inc		(c) Adjusted Net Incom	(d) Charitable Purposes		
Investment Advisory Fees Software	30,704. 2,500.		0.		0.		
To Form 990-PF, Pg 1, ln 23	33,204.		0.		0.		
Form 990-PF U.S. and	State/City G	overnment	Obli	gations	Statement	7	
Description	U.S Gov't		Вос	ok Yalue	Fair Marke Value	t	
NY City Mun Wtr Fin Auth Illinois St Genl Oblig		X X				08. 73.	
Total U.S. Government Obligat	tions	-				•	
Total State and Municipal Government Obligations			268,368.		267,5	267,581.	
Total to Form 990-PF, Part II, line 10a				268,368. 267,581			

Form 990-PF	Corporate Stock		Statement 8	
Description		Book Value	Fair Market Value	
Gabelli Asset I		333,411.	337,338.	
Mainstay Epoch Global Eq Yld I		204,109.	205,394.	
Blackrock Equity Dividend		300,390.	342,999	
JP Morgan US Equity Sel		272,622.	335,453	
Prudential Jennison Md Cp Gw		208,871.	217,591	
Alerian MLP ETF		146,758.	114,106.	
FPA Crescent		339,214.	/322,538.	
SPDR S&P Inter Dvd		92,731.	73,274.	
SPDR S&P Oil & Gas		80,591.	71,325.	
WIsdomTree Europe Hedged Eq		85,809.	79,442.	
WisdomTree Trust Emrg Mkt		44,919.	36,332	
WisdomTree Trust Japn Hedge		96,760.	85,556	
Vanguard FTSE Europe		45,894.	37,825	
Harding Loevner Int'l Equity		66,561.	69,260.	
Victory Small Cap Growth		189,103.	228,101.	
Vention Medical Holdings		1,140,117.	5,498,956.	
Total to Form 990-PF, Part II,	line 10b	3,647,860.	8,055,490.	
Form 990-PF	Corporate Bonds		Statement 9	
Description		Book Value	Fair Market Value	
Fidelity Floating RT HI Inc A		163,197.	160,547.	
John Hancock Income I		265,098.	251,219.	
JP Morgan High Yld Sel		176,752.	167,626.	
Mainstay Hi Yld Corp Bond		197,046.	194,135.	
Ridgeworth SEIX Ft/Rt		95,355.	93,969.	
Total to Form 990-PF, Part II,	line 10c	897,448.	867,496.	

Form 990-PF	Other Investments	State	ement 10		
Description	Valuation Method	Book Value			
Invesco Convert Securities Y SPDR Series Trus DB Int Gvt	COST COST	186,28 83,45			
Total to Form 990-PF, Part II	, line 13 \	269,7	14.	284,179.	
	List of Officers, Di and Foundation Manag		State	ement 11	
Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Contrib		
Elisia M. Saab 396 Andover Street Lowell, MA 01852	Trustee, Chair,	Treasurer 0.	0.	0.	
Mark A. Saab 396 Andover Street Lowell, MA 01852	Trustee 0.00	0.	0.	0.	
Analise S. Brown 45 Clark Road Lowell, MA 01853	Trustee 0.00	0.	0.	0.	
Tricia L. Albert 29 Northwestern Drive Salem, NH 03079	Trustee 0.00	0.	0.	0.	
Alana T. Saab 396 Andover Street Lowell, MA 01852	Trustee 0.00	0.	0.	0.	

0.

0.

0.

Totals included on 990-PF, Page 6, Part VIII

Form 990-PF Part XV - Line 1a Statement 12
List of Foundation Managers

Name of Manager

Elisia M. Saab Mark A. Saab Analise S. Brown Alana T. Saab Form 990-PF

Grant Application Submission Information Part XV, Lines 2a through 2d

Statement

13

Name and Address of Person to Whom Applications Should be Submitted

Board of Directors 27 Northwestern Drive Salem, NH 03079

Telephone Number

Name of Grant Program

603-475-6162

Organization grants

Email Address

grant@saabfamilyfoundation.org

Form and Content of Applications

Application should include information on the applicant, reason for the request for a grant, and budget information.

Any Submission Deadlines

October 15 for grant applications

Restrictions and Limitations on Awards

The Foundation focuses in the areas of fostering education, supporting youth, elderly, disabled and low income individuals, addressing housing and homelessness and fostering social responsibility

Name and Address of Person to Whom Applications Should be Submitted

Board of Directors 27 Northwestern Drive Salem, NH 03079

Telephone Number

Name of Grant Program

603-475-6162

Scholarships

Email Address

Grant@saabfamilyfoundation.org

Form and Content of Applications

Scholarship applications should include grade transcript, statement demonstrating financial need, latest tax return, list of liabilities and letters of recommendation.

Any Submission Deadlines

May 15 for scholarship applications

Restrictions and Limitations on Awards

The Foundation focuses in the areas of fostering education for youth who might not be able to pursue continued education without financial assistance.