Department of the Treasury

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. OMB No. 1545-0052

Open to Public Inspection ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf 12/31,20 16 For calendar year 2016 or tax year beginning 05/01 , **2016**, and ending A Employer Identification number Name of foundation ARTHUR J.R. DOBLES & OLIVE G. DOBLES CHARITABLE REMAINDER UNITRUST DATED 8/2/1994 32-6435321 Number and street (or P.O. box number if mail is not delivered to street address) Room/suite Telephone number (see instructions) 603-527-3232 62 PLEASANT STREET City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here. . . LACONIA, NH 03246 G Check all that apply: X Initial return Initial return of a former public charity 1 Foreign organizations, check here . Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach Address change Name change computation H Check type of organization: | X | Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here . J Accounting method: X Cash Fair market value of all assets at Accrual F If the foundation is in a 60-month termination Other (specify) under section 507(b)(1)(B), check here . end of year (from Part II, col. (c), line 10,117,699 (Part I, column (d) must be on cash basis) 161 ▶ \$ (d) Disbursements Part I Analysis of Revenue and Expenses (The (a) Revenue and for charitable (b) Net investment (c) Adjusted net total of amounts in columns (b), (c), and (d) expenses per purposes may not necessarily equal the amounts in income income books (cash basis only) column (a) (see instructions)) Contributions, gifts, grants, etc., received (attach schedule) Statement 15 O if the foundation is not required to Check > attach Sch. B. **6**3 Interest on savings and temporary cash investments. STMT 166,559 166,559 Dividends and interest from securities b Net rental income or (loss) -49,171 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 2,672,432 Š Capital gain net income (from Part IV, line 2) . <u>may 9 9</u> 201 Net short-term capital gain. . . . Income modifications . Gross sales less returns and allowances 10a OGDEN. U b Less. Cost of goods sold . c Gross profit or (loss) (attach schedule) Other income (attach schedule) 11 117,388 166,559 12 Total. Add lines 1 through 11 72,570 72,570 13 Compensation of officers, directors, trustees, etc. Expenses NONE NONE 14 Other employee salaries and wages NONE NONE 15 Pension plans, employee benefits 15,967 NONE NONE NONE 16a Legal fees (attach schedule) . . . STMT . 4 . b Accounting fees (attach schedule) inistrative 500 c Other professional fees (attach schedule . 5. 1.788 1,788 Taxes (attach schedule) (see instructions). 6. Depreciation (attach schedule) and depletion. 19 20 NONE NONE Travel, conferences, and meetings 21 and NONE NONE 22 Printing and publications 357 Other expenses (attach schedule) STMT. 7. 23 24 Total operating and administrative expenses. 92,182 74,358 NONE NONE Add lines 13 through 23. 334,250 Contributions, gifts, grants paid 334,250 NONE 74,358 334,250 Total expenses and disbursements Add lines 24 and 25 426,432 26 Subtract line 26 from line 12: 27 -309,044 a Excess of revenue over expenses and disbursements . . 92,201 b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-). . Form **990-PF** (2016)

Form 990-PF (2016) 32-6435321

=			Attached schedules and amounts in the	Beginning of year	. 0433321 End	of year
P	art II	Balance Sheets	description column should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
\neg	1	Cook popietorost boor	ng	3,081.		
			cash investments	270,629.		
		Savings and temporary Accounts receivable		2,0,025.	102,733	102,733
			otful accounts ▶			
		Pledges receivable	otiai accodins P			
			otful accounts ▶			
			oriul accounts >			
			officers, directors, trustees, and other			
			ach schedule) (see instructions)			
		•	eceivable (attach schedule)			1
			btful accounts NONE		······································	+
S						1
Assets	8		se			
455	9	•	eferred charges	486,636.	764,836	. 752,426
•			e government obligations (attach schedule)	6,678,136.		7,158,645
		•	stock (attach schedule)	2,502,673.	2,124,762	
		Investments - land, building	bonds (attach schedule)	2,502,613.	2,124,702	2,102,032
		and equipment basis				
		Less: accumulated deprect (attach schedule)				
			loans			
		Investments - other (atta Land, buildings, and	sch schedule)			
		equipment: basis Less: accumulated depreci	ption >			
		(attach schedule)	<u> </u>			
		Other assets (describe I		<u>-</u>		
			completed by all filers - see the	0 044 455		10 117 600
_		instructions. Also, see p	age 1, item I)	9,941,155.	9,632,556	. 10,117,699
			ccrued expenses			-
	18	Grants payable				_
ies						-
Liabilities	20	Loans from officers, directo	rs, trustees, and other disqualified persons.			_
iab			otes payable (attach schedule)		·	-l i
	22	Other liabilities (describ	• ▶)			-{
_			es 17 through 22)		NON	<u>B</u>
			low SFAS 117, check here . ▶	•		ŀ
Balances		and complete lines 2	24 through 26 and lines 30 and 31.			
ă	24	Unrestricted			. <u> </u>	
ga Saf	25	Temporarily restricted			_	
	26	Permanently restricted	<u> </u>			_
H		Foundations that do	not follow SFAS 117, ►X			
Net Assets or Fund		check here and com	plete lines 27 through 31.			
0	27	Capital stock, trust princ	ipal, or current funds	9,941,155.	9,632,556	
ets	28	Pard-in or capital surplus, o	r land, bldg , and equipment fund			_]
SS	29	Retained earnings, accumu	lated income, endowment, or other funds			
t A	30	Total net assets or fun	d balances (see instructions)	9,941,155.	9,632,556	
ž	31	Total liabilities and	net assets/fund balances (see			
		instructions)	<u> </u>	9,941, <u>1</u> 55.	9,632,556	
P			nges in Net Assets or Fund Bala	nces		
			balances at beginning of year - Part I		must agree with	
			d on prior year's return)			9,941,155.
2			line 27a			-309,044.
			ded in line 2 (Itemize) ▶ADJUSTMENTS T			445.
						9,632,556.
5	Decr	eases not included in	n line 2 (itemize) ►		5	
			alances at end of year (line 4 minus li	ne 5) - Part II, column (t	o), line 30 6	9,632,556.

Par	Capital Gains	and Losses for Tax on Inv	estment Income									
		describe the kind(s) of property sold		(b) How acquired P - Purchase	(c) Date acquired	(d) Date sold						
		rick warehouse; or common stock, 200	o shs. MLC Co.)	D - Purchase D - Donation	(mo., day, yr)	(mo., day, yr.)						
	PUBLICLY TRADED	SECURITIES		ļ .		 						
<u> </u>				ļ	_							
<u>c</u>				 	 							
<u>d</u>												
		 	(h) Gain or (lo									
	(e) Gross sales price	(e) plus (f) minus (g)										
а	2,672,432.	-49,171.										
b			2,721,603.									
d												
<u> </u>					_							
	Complete only for assets sh		Gains (Col. (h) ga									
(i) F.M.V. as of 12/31/69	(j) Adjusted basis	(k) Excess of col. (i)	col.	(k), but not less t Losses (from co							
		as of 12/31/69	over col. (j), if any	<u> </u>								
<u>a</u> _			-	 		<u>-49,171.</u>						
<u>D</u>				 								
d				1								
<u>u</u>				<u> </u>								
		r If c	gain, also enter in Part I, line 7	1								
2	Capital gain net income		loss), enter -0- in Part I, line 7	2		-49,171.						
3	Net short-term capital ga	ain or (loss) as defined in sections										
	If gain, also enter in P	art I, line 8, column (c) (see in	structions). If (loss), enter -0- in $\}$									
		 <u> </u>		3								
Par	t V Qualification U	nder Section 4940(e) for Rec	duced Tax on Net Investment I	ncome	N/	<u>A</u>						
Was		•	ibutable amount of any year in the b	ease perio	d?	Yes No						
1			ar; see the instructions before making	ng anv en	tries.							
<u> </u>	(a)	(b)	(c)		(d)							
Cale	Base period years ndar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution ra (col. (b) divided by							
	2015											
	2014											
	2013			1								
	2012			1								
	2011		<u> </u>	 								
_	-			,								
2				2								
3			de the total on line 2 by 5, or by the ess than 5 years	1 - 1								
	number of years the fou											
4	Enter the net value of no	4										
5	Multiply line 4 by line 3	5										
6	Enter 1% of net investm	6										
7	Add lines 5 and 6			7								
8	Enter qualifying distribute of the state of	that par	t using a 1% ta	x rate. See the								

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OIIII.	32-0433321			-8
Part	VII-A Statements Regarding Activities (continued)			
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
-	meaning of section 512(b)(13)7 If "Yes," attach schedule (see instructions)	11_		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► www.doblesfoundation.org			
14	The books are in care of ▶ Bank of New Hampshire Telephone no. ▶ (603) 230-	-420	7	
	Located at ► 62 PLEASANT STREET, LACONIA, NH ZIP+4 ► 03246			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	T
	and enter the amount of tax-exempt interest received or accrued during the year		_	
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority	\neg	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of	_		
	the foreign country			
Pari	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
10	During the year did the foundation (either directly or indirectly).			
14	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	1 177			
	disqualified person?			
	(0) (0) (0)	į '		
	(1) 10) component to the part of the part			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the parient of account and account of the parient o	·		}
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
_	termination of government correct, it comments and an appropriate the contract of the contract			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1b	l	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	10		
	Organizations relying on a current notice regarding disaster assistance check here		l .	
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	10	ļ	X
	were not corrected before the first day of the tax year beginning in 2016?	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		İ	
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			1
8	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and	-		
	6e, Part XIII) for tax year(s) beginning before 2016?			
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		v	-
	all years listed, answer "No" and attach statement - see instructions.)	2b	X	
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	<u> </u>		İ	
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		İ	
	at any time during the year?			
b	olf "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the		}	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	<u></u>		
	foundation had excess business holdings in 2016)	3b		17
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	₩	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	<u></u>	 	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b	<u> </u>	X

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		32-64	35321		Paga 6
Part VII-B Statements Regarding Activities	for Which Form 4	720 May Be Req	uired (continued)		
5a During the year did the foundation pay or incur any amo	ount to:				
(1) Carry on propaganda, or otherwise attempt to influe	ence legislation (section	n 4945(e))?	. Yes X No		
(2) Influence the outcome of any specific public el	ection (see section 4	1955); or to carry or	n,		
directly or indirectly, any voter registration drive?			. Yes X No	.	
(3) Provide a grant to an individual for travel, study, or o	other similar purposes?	·	. Yes X No		
(4) Provide a grant to an organization other than a	chantable, etc., org	anization described i	n — —		
section 4945(d)(4)(A)? (see instructions)				.	
(5) Provide for any purpose other than religious, c	haritable, scientific, l	iterary, or educationa			
purposes, or for the prevention of cruelty to children	or animals?		. Yes X No	·	
b If any answer is "Yes" to 5a(1)-(5), did any of the		•	·	1 1	
Regulations section 53.4945 or in a current notice rega	rding disaster assistan	ce (see instructions)?		5b	
Organizations relying on a current notice regarding disa	ster assistance check	here			
c If the answer is "Yes" to question 5a(4), does the	e foundation claim e	xemption from the t			
because it maintained expenditure responsibility for the	grant?		. Yes No	·	
If "Yes," attach the statement required by Regulations se	ction 53.4945-5(d)			1 1	1
6a Did the foundation, during the year, receive any fu	nds, directly or indire	ectly, to pay premiu	ms		
on a personal benefit contract?			, Yes X No		
b Did the foundation, during the year, pay premiums, direct	ctly or indirectly, on a p	personal benefit contra	act?	6b	X_
If "Yes" to 6b, file Form 8870					
7a At any time during the tax year, was the foundation a pa	•	· ·		1	1
b If "Yes," did the foundation receive any proceeds or have				7b	
Part VIII Information About Officers, Directors	ors, Trustees, rou	ndation ivianagei	s, nignly Pala Emp	noyees,	
1 List all officers, directors, trustees, foundation m					
(a) Name and address	(b) Title, and average hours per week	(c) Compensation (if not paid,	(d) Contributions to employee benefit plans	(e) Expense	account,
	devoted to position	enter -0-)	and deferred compensation	Outler alto	wances
ank of NH	Co-Trustee	55 348			
2 Pleasant Street, Laconia, NH 03264	3	55,767.			-0-
arcia Hennelly Moran, Esq.			-0-		
D 11 D 1 G1 200 G 1 177 2000	Co-Trustee	14 000			
wo Delta Drive, Ste 303, Concord, NH 03301	Co-Trustee	16,803.	-0-		-0-
wo Delta Drive, Ste 303, Concord, NH 03301	-	16,803.			
wo Delta Drive, Ste 303, Concord, NH 03301	-	16,803.			
wo Delta Drive, Ste 303, Concord, NH 03301	-	16,803.			
	3		-0-	one) If no	-0-
wo Delta Drive, Ste 303, Concord, NH 03301 2 Compensation of five highest-paid employees "NONE."	3		-0-	ns). If no	-0
2 Compensation of five highest-paid employees	3		-()- e 1 - see instructio		-0-
2 Compensation of five highest-paid employees	(other than thos		e 1 - see instructio (d) Contributions to employee benefit plans and deferred	ns). If no	-0-
2 Compensation of five highest-paid employees "NONE."	(other than thos	e included on lin	e 1 - see instructio	(e) Expense	-0-
Compensation of five highest-paid employees "NONE." (a) Name and address of each employee paid more than \$50,000	(other than thos	e included on lin	e 1 - see instructio (d) Contributionsto employee benefit plans and deferred compensation	(e) Expense other allo	-0- ne, enter
Compensation of five highest-paid employees "NONE." (a) Name and address of each employee paid more than \$50,000	(other than thos	e included on lin	e 1 - see instructio (d) Contributions to employee benefit plans and deferred	(e) Expense other allo	-0-
Compensation of five highest-paid employees "NONE." (a) Name and address of each employee paid more than \$50,000	(other than thos	e included on lin	e 1 - see instructio (d) Contributionsto employee benefit plans and deferred compensation	(e) Expense other allo	-0- ne, enter
Compensation of five highest-paid employees "NONE." (a) Name and address of each employee paid more than \$50,000	(other than thos	e included on lin	e 1 - see instructio (d) Contributionsto employee benefit plans and deferred compensation	(e) Expense other allo	-0- ne, enter
"NONE."	(other than thos	e included on lin	e 1 - see instructio (d) Contributionsto employee benefit plans and deferred compensation	(e) Expense other allo	-0- ne, enter
Compensation of five highest-paid employees "NONE." (a) Name and address of each employee paid more than \$50,000	(other than thos	e included on lin	e 1 - see instructio (d) Contributionsto employee benefit plans and deferred compensation	(e) Expense other allo	-0- ne, enter
Compensation of five highest-paid employees "NONE." (a) Name and address of each employee paid more than \$50,000	(other than thos	e included on lin	e 1 - see instructio (d) Contributionsto employee benefit plans and deferred compensation	(e) Expense other allo	-0- ne, enter
Compensation of five highest-paid employees "NONE." (a) Name and address of each employee paid more than \$50,000	(other than thos	e included on lin	e 1 - see instructio (d) Contributionsto employee benefit plans and deferred compensation	(e) Expense other allo	-0- ne, enter
Compensation of five highest-paid employees "NONE." (a) Name and address of each employee paid more than \$50,000	(other than thos	e included on lin	e 1 - see instructio (d) Contributionsto employee benefit plans and deferred compensation	(e) Expense other allo	-0- ne, enter
Compensation of five highest-paid employees "NONE." (a) Name and address of each employee paid more than \$50,000	(other than thos (b) Title, and average hours per week devoted to position	e included on lin (c) Compensation NONE	e 1 - see instructio (d) Contributionsto employee benefit plans and deferred compensation	(e) Expense other allo	-0- ne, enter

Part VIII	and Contractors (continued)	loyees,
3 Five	highest-paid independent contractors for professional services (see instructions). If none, enter "NC	NE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		NONE
1101111		NOME
_		·
Total numb	er of others receiving over \$50,000 for professional services	NONE
Part IX-A	Summary of Direct Charitable Activities	
	indation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number on and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 NONE		
2		
-		·
3		
4		
D AIV D	Comment of Day and Day and American Comment of the	
Part IX-B	Summary of Program-Related Investments (see instructions) e two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	o two largest program-rotated mental made by the roundation during the tax year of miles 1 and 2	
2		
		•
All other pro	ogram-related investments. See instructions.	
3 NONE		
Total. Add I	ines 1 through 3	

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Part	Minimum Investment Return (All domestic foundations must complete this part. Foreigne instructions.)	ign founda	tions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		-
	purposes:		
а	Average monthly fair market value of securities	1a	NONE
b	Average of monthly cash balances	1b	271,684.
C	Fair market value of all other assets (see instructions)	1c	10,612,865.
d	Total (add lines 1a, b, and c)	1d	10,884,549.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	1	
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	10,884,549.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	Instructions)	4	163,268.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	10,721,281.
6	Minimum investment return. Enter 5% of line 5	6	359,824.
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations check here ▶ and do not complete this part.)	ndations	
1	Minimum investment return from Part X, line 6	1	359,824.
2 a	1 044	\Box	
b	Income tax for 2016. (This does not include the tax from Part VI.) 2b		
C	Add lines 2a and 2b	2c	_1,844.
3	Distributable amount before adjustments. Subtract line 2c from line 1	1 1	357,980.
4	Recoveries of amounts treated as qualifying distributions		NONE
5	Add lines 3 and 4		357,980.
6	Deduction from distributable amount (see instructions),		NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
-	line 1	7	357,980.
	XII Qualifying Distributions (see instructions)	1 1	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	1a	334,250.
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		334,230.
	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	10	· · · · · · · · · · · · · · · · · · ·
2	· · · · · · · · · · · · · · · · · · ·	2	NONE
_	purposes	-	INOINE
3	Amounts set aside for specific charitable projects that satisfy the:	,	NONE
a	Suitability test (prior IRS approval required)		NONE
b	Cash distribution test (attach the required schedule)		
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4		334,250.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	1 1	
	Enter 1% of Part I, line 27b (see instructions)		224 050
6	Adjusted qualifying distributions. Subtract line 5 from line 4		334,250.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when a qualifies for the section 4940(e) reduction of tax in those years.	aiculating	wnether the foundation

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Part XIII Undistributed Income (see instr	uctions)			
	(a)	(b)	(c)	(d)
1 Distributable armount for 2016 from Part XI,	Corpus	Years prior to 2015	2015	2016
line 7				357,980.
2 Undistributed income, if any, as of the end of 2016.				
a Enter amount for 2015 only			NONE_	
b Total for prior years 20,20,20		NONE _		
3 Excess distributions carryover, if any, to 2016				
a From 2011 NONE				
b From 2012				
c From 2013 NONE				
d From 2014 NONE				
e From 2015 NONE				
f Total of lines 3a through e	NONB			
4 Qualifying distributions for 2016 from Part XII,				
line 4: ▶ \$334, 250.			NONE	
a Applied to 2015, but not more than line 2a			NONE	
b Applied to undistributed income of prior years		NONE		
(Election required - see instructions)		NONE		
c Treated as distributions out of corpus (Election	NOME			
required - see instructions)	NONB			334,250.
d Applied to 2016 distributable amount	NONE			334,230.
e Remaining amount distributed out of corpus	NONE NONE			NONE
5 Excess distributions carryover applied to 2016 . (If an amount appears in column (d), the same	NONE	····		NONE
amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
	NONE			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	110111			
b Prior years' undistributed income. Subtract		NONE		
line 4b from line 2b				
income for which a notice of deficiency has				
been issued, or on which the section 4942(a) tax has been previously assessed		NONE		
· · · · ·				
d Subtract line 6c from line 6b. Taxable amount - see instructions		NONE		
e Undistributed Income for 2015. Subtract line				
4a from line 2a. Taxable amount - see instructions			NONE	
f Undistributed income for 2016. Subtract lines 4d and 5 from line 1. This amount must be				
distributed in 2017				<u>23,730.</u>
7 Amounts treated as distributions out of corpus				
to satisfy requirements imposed by section			į	
170(b)(1)(F) or 4942(g)(3) (Election may be				
required - see instructions)	NONE NONE			
8 Excess distributions carryover from 2011 not				
applied on line 5 or line 7 (see instructions)	NONE			
9 Excess distributions carryover to 2017.			1	
Subtract lines 7 and 8 from line 6a	NONE			
10 Analysis of line 9:				
a Excess from 2012 NONE				
b Excess from 2013 NONE				
c Excess from 2014 NONE			Ì	
d Excess from 2015 NONE				
e Excess from 2016 NONE				Form 990-PF (2016)

JSA 6E1490 1 000

SEE ATTACHED STATEMENT FOR LINE 2

3 Grants and Contributions Paid Durin Recipient Name and address (home or business)	g the Year or Appr	oved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	contribution	
a Paid during the year				
SEE STATEMENT 14				334,250.
]
		1		
		1		
			i	
		}		_
Total	<u> </u>	_	▶ 3a	334,250.
b Approved for future payment		<u> </u>		3317233.
a rippiered for fatare payment				
			İ	
Total	<u> </u>		▶ 3b	L

Part XVI-	AAnalysis of Income-Produ	ucing Acti	ivities			
Enter gross a	amounts unless otherwise indicated.		eted business income	1	section 512, 513, or 514	(e) Related or exempt
i Frogram service revenue		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions.)
						
				 		
_				 		
e				+		
	and contracts from government agencies			 		
2 Members	ship dues and assessments					
	n savings and temporary cash investments					
4 Dividend	s and interest from securities			14	166,559.	
5 Net renta	al income or (loss) from real estate					
a Debt-	financed property					
	debt-financed property					
6 Net rental	Income or (loss) from personal property. •			 		
	vestment income		<u> </u>	1.0	40 151	
	oss) from sales of assets other than inventory			18	-49,171.	
	me or (loss) from special events · · ·			ļ		
	ofit or (loss) from sales of inventory			-		
	venue: a			-		
				1		
			<u> _</u>			
e						
	Add columns (b), (d), and (e)				117,388.	
	dd line 12, columns (b), (d), and (e)					117,388.
	eet in line 13 instructions to verify calcu				· · · · · · · · · · · · · · · · · · ·	
Part XVI-I	B Relationship of Activities	to the A	ccomplishment of E	kempt Pur	ooses	
Line No.	Explain below how each activity					stad impactantly to the
▼	accomplishment of the foundation					
· ·			t parpooos (other than	by providing	Tanas for sacir parpose	a). (Occ matractions.)
						
						
	··				 	
			NOT APPLICABL	<u></u>		
	<u> </u>		NOT APPLICABL	<u> </u>		
					··	_ .
						<u> </u>
						-
			<u> </u>			
_						
JSA						Form 990-PF (2016)

Part	XVII	Information R Exempt Organ		ansfers T	o and Tra	nsacti	ons a	nd Relation	ships V	Vith None	harit	able	;
i	n secti	organization direct on 501(c) of the Co	ly or indirectly			_						Yes	No
	_	ations? rs from the reporting	n foundation to	a nonchari	table evemr	nt organi	zation d	of∙					
		h	_		-	-					1a(1)		Х
		er assets									1a(2)		Х
	•	ransactions:											
(1) Sale	es of assets to a non	charitable exer	mpt organiz	ation						16(1)	ľ	X
(2) Pur	chases of assets from	m a noncharita	ble exempt	organization	1					1b(2)	_	Х
		tal of facilities, equip									1b(3)		X
		mbursement arrange									1b(4)		X
		ns or loan guarantee formance of services									1b(5)		X
		of facilities, equipm										-	X
	-	enswer to any of th	-									air m	narket
		f the goods, other											
	/alue ii	n any transaction or		=									
(a) Lin	e no.	(b) Amount involved	(c) Name of	noncharitable (exempt organiz	ation	(d) D	escription of trans	ers, transac	tions, and shar	ing arra	ngeme	nts
												-	
							-						
						1							-
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	-+											-	
		.			<u> </u>							_	
									<u> </u>				
(describ	foundation directly ed in section 501(c) "complete the follow	of the Code (d								Ye	es 🔼	X No
	i res,	(a) Name of organization		T (1	b) Type of organ	nization	-		(c) Descrip	tion of relations	ship		
					<u>-::</u>								
				ļ				_					
	Linder	penalties of perjury, I decla	are that I have ever	nined this return	including accor	mnanving ec	hedules a	nd statements and	to the hest	of my knowledg	e and h	elief it	is true
Sign		t, and complete Declaration of			d on all information	on of which p	oreparer ha		10 1110 0031	May the IRS		s this	
Here	Sign	ature of officer or trustee		Dat		<u></u>	Title			(see Instruction	·	Yes	No
	AR	LENE C. FOLSO	M, SVP										_
Paid	_	Print/Type preparer's na	me	Preparei	r'asignature	011)	Date		"" "	TIN		-
		WILLIAM J. P	ELLETIER,	EA NA	WIL	V 15		05/12/	T		P003		<u>70</u>
Prep				DVANTĀGI			1		Firm's Elf	v ▶ 46-	<u>0750</u>	489	
Use	Only		STANIELS		SUITE 6	027	207		DL:	602.2	60 1	600	
		1 <u> </u>	OUDON, NH		<u> </u>	033) U /		Phone no		m 99 ((2016)

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

NET INVESTMENT INCOME	1, 1, 9472. 1, 9472. 1, 9600. 1, 1, 1, 243. 1, 1000. 1, 1000. 1, 1000. 1, 1000. 1, 1000. 2, 891. 2, 891.
REVENUE AND EXPENSES PER BOOKS	1,500. 1,920. 1,560. 1,560. 1,907. 1,076. 1,378. 1,736. 1,100. 1,100. 1,004. 1,004. 1,004. 1,004. 1,004. 1,004. 1,004. 1,004. 1,004. 1,004. 1,008. 1,009.
DESCRIPTION	AFLAC INC AFLAC INC 2.65% 2/15/2017 AT&T INC AT&T INC AT&T INC AT&T INC AT&T INC AFBOTT LABS AETNA INC NEW APPLE INC AUTOMATIC DATA PROCESSING IN BANC OR AMERICAC CORPORATION BANC OR AMERICAC CORPORATION BANC OR INCORPORATION BANC OR INC CATERPILLAR FINANCIAL SVCS 1.25% 11/6/20 CISCO SYS INC COLGATE PALMOLIVE CO COLGATE PALMOLIVE CO COLGATE PALMOLIVE CO COLGAST CORP CL A CONCCOPHILLIPS CORNING INC COSTCO WHSL CORP NEW DANAHER CORPORATION DERRE JOHN CAP CORP 2.25% 4/17/2019 DISNEY WALT CO DOMINION RES INC VA NEW DU PONT E IDE NEMOURS & CO ECG RESOURCES 4.1% 2/1/2021 EXXON MOBIL CORP FED HOME LOAN BANK 1.125% 12/8/2017

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

ND NET INVESTMENT INVESTMENT INCOME	557. 55	. 27	81.	87. 1,68	587. 58	42. 00. 1.20	235. 23	4,264. 4,26	,534. 19,53	, 493. 5, 49	,030. 2,03	,040.	94. L,49 80. 1.38	585. 585	56. 25	,323. 1,32	62. 5,36	21. 82	, 103. 2, 10 541. 54	20. 2,52	72.	17. 31	96. 19	26	84. 05.	44. 54	50.	
REVENUE AND EXPENSES PER BOOK	l																											0,000
DESCRIPTION	FARM CREDIT BANK 2.5% 10/24/2025	BANK 1:95% 12/1//2019 BANK 0217C 1.4% 2/24/20	STROPHE FD 2.995% 7/1	DYNAMICS			INTERCONTINENTALEXCHANGE	ISHARES MSCI EMERGING MARKETS ETF	MSCI EAFE ETF	S&P SM C	JPMORGAN CHASE & CO			KROGER COMPANY COMMON		COS		MERCK & CO INC NEW		TECHNOLOGY INC	PRIME VALUE OBL FUND # 85	PRIME VALUE OBL FUND # 853	PRIME CASH OBL FUND #8	ASH OBL FUND #851	GKNI BAB 3.9348 4 524% 3/1/2018			TO 1 1 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

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ORM 990PF, PART I - DIVIDENDS AND INTEREST	Σ	
	REVENUE AND EXPENSES	NET INVESTMENT TNCOMF
DESCRIPTION	FEK BOOKS	LINCOME
PEPSICO INC	1,505.	1,5
PHILLIPS 66	2,277.	2,2
T ROWE PRICE GROUP INC	1,863.	D'T
PUBLIC STORAGE INC	2,440.	2,4
OUALCOMM INC	928.	o
SPDR S&P MIDCAP 400 ETF TR	4,901.	4 ,
SECTOR SPDR ENERGY ETF SOTITIVED MINIM MIN DWD DAR 3 774% 1/1/201	435.	1.1
; ; ;	1,822.	1,8
STRYKER CORP	798.	7
IJX CO INC	1,482.	1,4
TENNESSEE VALLEY AUTH 2.875% 9/15/2024	58	C C
3M CO 3M CO 1% 6/26/2017	.,331.	, v
THE TRAVELERS COMPANIES INC	1,856.	1,8
DEL	482.	4
STATES TREAS NOTE 2.125% 12	528.	u)
UNITED STATES TREAS NOTE 1.875% 10/31/20	709.	7
STATES TREAS NOTE 1.5% 2/28	209.	,
HEALTH GROUP INC	1,500.	1,5
HIGH YIELD CC	1,766.	1,7
ADMIRAL	27,553.	27,5
Д	4,072.	4,0
<u> </u>	2,914.	2,2
0.000 L 0.000 L 0.000 L 0.000 L 0.000 L 0.000 L 0.000 L 0.000 L 0.000 L 0.000 L 0.000 L 0.000 L 0.000 L 0.000 L	727	4

1,505. 2,277. 1,863.

368. 2,440.

FXJ448 D40G 05/12/2017 10:14:35

001860

166,559.

2,898.

456. 780. 166,559

TOTAL

WALMART 4.125% 2/1/2019 WALMART STORES INC 1.95% 12/15/2018 WELLS FARGO & CO NEW WELLS FARGO & CO 3% 1/22/2021

1,500. 1,766. 27,553. 4,072. 2,914.

209.

528. 709.

482

1,482. 581. 2,331.

662. 1,856.

798.

928. 4,901. 435. 1,108.

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LEGAL FEES	
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CHARITABLE PURPOSES	NONE
ADJUSTED NET INCOME	NONE
NET INVESTMENT INCOME	NONE
REVENUE AND EXPENSES PER BOOKS	15,967.
DESCRIPTION	LEGAL FEES - PRINCIPAL (ALLOCA TOTALS

FORM	990PF,	PART	I	-	OTHER	PROFESSIONAL FEES	
=====	======	=====	==	==	======		

TOTALS

REVENUE AND EXPENSES PER BOOKS

DESCRIPTION

TAX PREPARATION FEE (NON-ALLOC

500.

500.

9

32-6435321

TAXES
J
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PART
990PF,
FORM

NET INVESTMENT INCOME	1 1 1 1 1	1,648. 140.	1,788.
REVENUE AND EXPENSES PER BOOKS	1 1 1 1 1 1 1	1,648.	1,788.
DESCRIPTION	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	FOREIGN TAXES ON QUALIFIED FOR FOREIGN TAXES ON NONQUALIFIED	TOTALS

FORM 990PF, PART I - OTHER EXPENSES

> REVENUE AND **EXPENSES**

DESCRIPTION

PER BOOKS

OTHER ALLOCABLE EXPENSE-PRINCI

1,357.

TOTALS

1,357. ==========

AVERAGE MONTHLY FMV - 990PF, PART X, LINES 1a-1c

MONTH	LINE 1a-FMV SECURITIES	LINE 1b-FMV CASH BALANCES	LINE 1c-FMV OTHER ASSETS
MAY JUNE JULY AUGUST SEPTEMBER OCTOBER NOVEMBER		264,734. 293,990. 223,988. 227,130. 281,195. 360,701. 417,741.	10,571,214. 10,695,996. 10,802,150. 10,339,009. 10,798,967. 10,700,322. 10,755,566.
DECEMBER		103,996.	10,239,695.
TOTAL		2,173,475.	84,902,919.
	==========	=======================================	=========
AVERAGE FMV	==========	271,684.	10,612,865.
AVERAGE FMV	2222222222	271,684. =======	,

RECIPIENT NAME:

Bank of NH & Marcia Moran, Co-Trustees

ADDRESS:

62 Pleasant Street

Laconia, NH 03264

RECIPIENT'S PHONE NUMBER: 6032304207

FORM, INFORMATION AND MATERIALS:

Applications are accepted by invitation of the Trustees.

Visit website at www.doblesfoundation.org for more information.

SUBMISSION DEADLINES:

By October 1st of each year.

RESTRICTIONS OR LIMITATIONS ON AWARDS:

Charitable organizations exempt under IRC 501(c)(3) registered in the State of NH. Specific areas of charitable interest will be selected by the trustees annually.

ARTHUR J.R. DOBLES & OLIVE G. DOBLES 32-6435321 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: NH CHARITABLE FOUNDATION ADDRESS: 37 PLEASANT STREET CONCORD, NH 03301 PURPOSE OF GRANT: TO SUPPORT SUBSTANCE USE DISORDER MISSION AMOUNT OF GRANT PAID 30,000. RECIPIENT NAME: HOPE ON HAVEN HILL ADDRESS: PO BOX 1272 ROCHESTER, NH 03867 PURPOSE OF GRANT: PURCHASE OF VAN FOR RESIDENTS IN RECOVERY RECIPIENT NAME: HARBOR HOMES INC ADDRESS: 45 HIGH STREET NASHUA, NH 03060 PURPOSE OF GRANT: FOR SUPPORT OF MEDICAL RESPITE CENTER RECIPIENT NAME: NEW LIFE HOME FOR WOMEN ADDRESS: PO BOX 148 MANCHESTER, NH 03105 PURPOSE OF GRANT: GRANT MADE FOR SUPPORT OF DAILY OPERATIONS ARTHUR J.R. DOBLES & OLIVE G. DOBLES 32-6435321 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: FAMILIES IN TRANSITION ADDRESS: 122 MARKET STREET MANCHESTER, NH 03101 PURPOSE OF GRANT: FOR SUPPORT OF RECOVERY HOUSING PROGRAM RECIPIENT NAME: MAKIN IT HAPPEN COALITION ADDRESS: 497 HOOKSETT RD STE 207 MANCHESTER, NH 03104 PURPOSE OF GRANT: SUPPORT OF EMPOWER U INITIATIVE RECIPIENT NAME: NHIAA LIFE OF AN ATHLETE ADDRESS: 251 CLINTON STREET CONCORD, NH 03301 PURPOSE OF GRANT: FOR SUPPORT OF LIFE OF AN ATHLETE PROGRAM AMOUNT OF GRANT PAID 5,000. RECIPIENT NAME: DISMAS HOME ADDRESS: 102 4TH STREET MANCHESTER, NH 03102 PURPOSE OF GRANT: FOR SUPPORT OF HEALTHY FAMILIES PROGRAM

ARTHUR J.R. DOBLES & OLIVE G. DOBLES 32-6435321 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID _______ RECIPIENT NAME: TEEN CHALLENGE ADDRESS: 147 LAUREL STREET MANCHESTER, NH 03103 PURPOSE OF GRANT: IMPROVEMENTS TO POSITIVELY IMPACT RESIDENTS AMOUNT OF GRANT PAID 12,250. RECIPIENT NAME: CONCORD HOSPITAL TRUST THE FAMILY PLACE ADDRESS: 250 PLEASANT STREET CONCORD, NH 03301 PURPOSE OF GRANT: SUPPORT OF NEONATAL ABSTINANCE SYNDROME CARE RECIPIENT NAME: CONCORD COMMUNITY MUSIC SCHOOL ADDRESS: 23 WALL STREET CONCORD, NH 03301 PURPOSE OF GRANT: FOR SUPPORT OF NAS BABIES AND MICI RECIPIENT NAME: NH ALCOHOL DRUG ABUSE COUNSELORS ADDRESS: 130 PEMBROKE RD STE 100 CONCORD, NH 03301 PURPOSE OF GRANT: FOR SUPPORT OF HIRING DEVELOPMENT DIRECTOR AMOUNT OF GRANT PAID 15,000.

ARTHUR J.R. DOBLES & OLIVE G. DOBLES 32-6435321 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID _______ RECIPIENT NAME: HOPE FOR NH RECOVERY ADDRESS: 140 CENTRAL STREET MANCHESTER, NH 03103 PURPOSE OF GRANT: GRANT MADE FOR SUPPORT OF DAILY OPERATIONS RECIPIENT NAME: SE NH ALCOHOL AND DRUG ABUSE SERVICES ADDRESS: 272 COUNTY FARM ROAD DOVER, NH 03820 PURPOSE OF GRANT: FOR FUNDING PUBLIC AWARENESS OF ORGANIZATION AMOUNT OF GRANT PAID 10,000. RECIPIENT NAME: HELPING HANDS OUTREACH CENTER ADDRESS: 50 LOWELL STREET MANCHESTER, NH 03101 PURPOSE OF GRANT: FOR SUPPORT OF RECOVERY CLASS PROGRAM RECIPIENT NAME: SERENITY PLACE ADDRESS: 101 MANCHESTER STREET MANCHESTER, NH 03101 PURPOSE OF GRANT: GRANT MADE FOR SUPPORT OF DAILY OPERATIONS AMOUNT OF GRANT PAID 25,000. ARTHUR J.R. DOBLES & OLIVE G. DOBLES 32-6435321 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

GRANITE UNITED WAY

ADDRESS:

46 SOUTH MAIN STREET CONCORD, NH 03301 PURPOSE OF GRANT:

EFFORTS IN SUBSTANCE USE PREVENTION/TREATMENT

TOTAL GRANTS PAID:

334,250.
