

Form **990-PF**

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.

► Go to www.irs.gov/Form990PF for instructions and the latest information.

Depar	tment	t of the Treasury				security numbers or				2017
Intern	al Rev	enue Service		Go to www.i	rs.go	v/Form990PF for inst			rmation.	Open to Public Inspection
For c	alen	dar year 2017	or tax year beginning				, and e	nding		
Nan	ne of	foundation							A Employer identification	number
т	нг	HEARTH	STONE CHAR	ITABLE	F	OUNDATION			90-0849733	
			oox number if mail is not de					Room/suite	B Telephone number	
		,				/			603-714-44	EΛ
		<u>LEOPARD</u>							-	
-		•	ovince, country, and Z		ostal	code			C If exemption application is pe	ending, check here
_ <u>M</u>	OU:	LTONBOR	OUGH, NH	03254		· ·				
G C	heck	all that apply:	Initial retur	ก		Initial return of a fo	ormer public o	charity	D 1. Foreign organizations	, check here 🕨 🔲
		***	Final return	1	Г	Amended return		-		
			Address ch		Ē	Name change		. 1	Foreign organizations med check here and attach cor	eting the 85% test,
	.									
H_ C	_	type of organiz		· · · · · · · · · · · · · · · · · · ·		private foundation			E If private foundation stat	
ᆜ	_ Se	<u>ction 4947(a)(1</u>) nonexempt charitable	e trust	Othe	taxable private found	ation		under section 507(b)(1)	(A), check here . PL
1 Fa	ır ma	irket value of all	assets at end of year	J Account	ng m	ethod: X Cash	Accı	rual	F If the foundation is in a 6	60-month termination
(fr	om P	Part II, col. (c), li	ine 16)	_ O	her (s	specify)			under section 507(b)(1)	(B), check here 🕨 🗔
	\$, ,,,	2,699,050.	(Part I, colur	nn (d)	must be on cash bas	is.)			•
_	rt I	Analysis of R	evenue and Expenses		Ĭ	(a) Revenue and		vestment	(c) Adjusted net	(d) Disbursements
	1	☐ (The total of amore)	ounts in columns (b), (c), ar	nd (d) may not		expenses per books		ome	income	for charitable purposes (cash basis only)
			al the amounts in column (₩,				* * * * * * * * * * * * * * * * * * * *	(Cash Dasis Offly)
	1		gifts, grants, etc., rece			5 * 4 * 200 * 400* >	**\	<u> </u>		
	2		if the foundation is not required t	to attach Sch B			<u> </u>			
	3	Interest on saving cash investments	gs and temporary	_		13.		13.	13.	STÄTEMENT: 1
	4		interest from securitie	s		45,009.	4	5,009.	45.009.	STATEMENT 2
	•	Gross rents						,		
					N 3	·		.> >	2.881.2.2.3.1	
	b	Net rental income	or (loss)		* .			* ., *	X 20 X 3 2 2 4 .	
ā	6a		from sale of assets not on			51,135.	\$	•		
Revenue	Ь	Gross sales price assets on line 6a	123 <u>123</u>	3,720.	1000	<u> </u>				1 ,834
ě	7	Capital gain net ii	ncome (from Part IV, line 2))			j 5	1,135.	''* -	
ď	8	Net short-term	canital dain		¥.	K. B. W. St	14.1814	3¥ S	N/A	
	9	Income modifi	, •	••	7 🕺 🖔	CANAL .	29	400 10 1		
	-	Gross sales less		1,404.			. / / / / /	''W 37, Lb	1316	STATEMENT 3
	10a	and allowances	·	1,404.	····	** / ** ***	2 3%	00 W 1886.		DIVIEWENT *2
	b	Less Cost of good	ods sold		ļ	2:22 3 344	3	Y 1 * * * * * * * * * * * * * * * * * *		
	C	Gross profit or	(loss)		<u></u>	1,404.	V	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	1,404.	STATEMENT 4
	11	Other income			L					
	12	Total Add line	es 1 through 11			97,561.	9	6,157.	46,426.	
	13		officers, directors, trustee	e etc		0.		0.	0.	0.
		•		3, 0.0	\vdash					
	14		e salaries and wages				 			
w		•	, employee benefits							
Se	16a	Legal fees			Ĺ					
Ē	ь	Accounting fee	es ST	TMT 5	ļ	1,236.		0.	0.	0.
X	lc	Other profession	onal fees ST	мт 6		75.		0.	0.	0.
ē	17	Interest		-				···		
莨			СП	'MT 7		206.		206.	0.	0.
Operating and Administrative Expenses	18	Taxes	•	.MI /	 	<u> </u>		400.	0.	
Ë	19	Depreciation a	nd depletion		<u> </u>					
Ē	20	Occupancy	production and the second	112 9344 444	-	·····				
¥	21	Travel, confere	endes, and freelings	IVEU						
힏	22	Printing and p	ublications		U					
а В	23	Other expense	1 1	A BAIA	双					
Ē	24		10.71 10.171	8 2018	1	·· ·				
20	4		g and administrative		IRS DSC	1 515		200	^	
ğ		expenses. Ad	d lines 13 through 23-	AL IN		1,517.	y-45444000	206.	0.	0.
J	25	Contributions,	gifts, grants paid DE	:N, U I		135,046.	**************************************	řýS-	学生的 第二十四年	135,046.
	26	Total expense	s and disbursements.							
		Add lines 24 a				136,563.	-	206.	0.	135,046.
_	27	Subtract line 2			* *					
					361	<39,002.				
	į .		e over expenses and disbu	=	12	<u> </u>		5,951.	real training the second	404,400
	l		nt income (if negative, en		14 × 3		9 / / / / / / ·	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1	
	C	Adjusted net i	ncome (if negative, enter	-0-)	the .	A. P. Stranger Stranger	1,4,8%	44 M	46,426.	港和海公 工会學的

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Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		l of year		
Column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
1 Cash - non-interest-bearing	12,617.	13,617.	13,617.		
2 Savings and temporary cash investments					
3 Accounts receivable ►					
Less: allowance for doubtful accounts					
4 Pledges receivable ►					
Less: allowance for doubtful accounts					
5 Grants receivable					
6 Receivables due from officers, directors, trustees, and other					
disqualified persons					
7 Other notes and loans receivable	The State of the second	2 × × × × × × × × × × × × × × × × × × ×			
Less: allowance for doubtful accounts	1 · · · · · · · · · · · · · · · · · · ·	. althour fall forence non			
9 Prepaid expenses and deferred charges					
10a Investments - U.S. and state government obligations					
b Investments - corporate stock STMT 8	1,830,962.	1,783,407.	2,329,891.		
c Investments - corporate bonds STMT 9	352,864.	360,417.	355,542.		
11 Investments - land, buildings, and equipment basis					
		ti, with the sit	All to V		
Less accumulated depreciation					
12 Investments - mortgage loans					
14 Land, buildings, and equipment basis					
Less accumulated depreciation			<u> </u>		
15 Other assets (describe					
16 Total assets (to be completed by all filers - see the	2 100 442	0 157 441	2,699,050.		
instructions. Also, see page 1, item I)	2,196,443.	2,157,441.	<u> </u>		
17 Accounts payable and accrued expenses					
18 Grants payable					
19 Deferred revenue					
20 Loans from officers, directors, trustees, and other disqualified persons					
20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable					
22 Other liabilities (describe >)		<u>-</u>			
		_			
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.					
25 Temporarily restricted		<u></u> , .			
26 Permanently restricted					
Foundations that do not follow SFAS 117, check here					
and complete lines 27 through 31.					
24 Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 28 Paid-in or capital surplus, or current funds 29 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances	0.	0.			
28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.			
Retained earnings, accumulated income, endowment, or other funds	2,196,443.	2,157,441.			
30 Total net assets or fund balances	2,196,443.	2,157,441.			
2					
31 Total liabilities and net assets/fund balances	2,196,443.	2,157,441.			
	-				
Partill Analysis of Changes in Net Assets or Fund E	baiances				
Total net assets or fund balances at beginning of year - Part II, column (a), line	e 30				
(must agree with end-of-year figure reported on prior year's return)		1	2,196,443.		
Enter amount from Part I, line 27a	•	2	<39,002.		
		3	0.		
Add lines 1 2 and 3			2,157,441.		
		5	0.		
	nolumn (h) line 20		2,157,441.		
Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, o	committee, time 30		Form 990-PF (2017		

THE HEARTHSTONE CHARITABLE FOUNDATION

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

See the Part VI instructions.

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	irt·VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instruction	ons)
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.		1
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	×	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐ and enter 1% 1	1,	919 <u>.</u>
	of Part I, line 27b		ŧ
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		<u> </u>
3	Add lines 1 and 2	1,	919.
4	Subtitle A (income) tax (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-		<u>919.</u>
6	Cieuis/rayments.	;, ^ 3,	3 % 1
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 840.		
þ	Exempt foreign organizations - tax withheld at source		, ,
C	Tax paid with application for extension of time to file (Form 8868) 6c 0.	, *	
d	Backup withholding erroneously withheld 6d 0.		, .\(\displaystar\)
	Total credits and payments. Add lines 6a through 6d		8 <u>40.</u>
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8		<u>0.</u>
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	1,	<u>079.</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid .		
	Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ Refunded ▶ 11		
	rt VII-A Statements Regarding Activities	1 ' ss.1 = 2'	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	Ye:	s No
	any political campaign?	1a	X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b	X
	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.		
	Did the foundation file Form 1120-POL for this year?	1c	<u> </u>
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	,	<i>*</i>
	(1) On the foundation. ► \$ (2) On foundation managers. ► \$	¥	
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		
	managers. ► \$0.	k. A	i. ««`
	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	X X X X X X X X X X X X X X X X X X X
	If "Yes," attach a detailed description of the activities.		
	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	v. 8 27	3.24
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	<u>X</u>
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	X
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	<u> </u>
	If "Yes," attach the statement required by General Instruction T.		
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		
	By language in the governing instrument, or		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law	شي شاء سيد	i
	remain in the governing instrument?	6 X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7 X	L bootstare
_			
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.		
	NH		
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		
	of each state as required by General Instruction G? If "No," attach explanation	8b X	
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	'سناساً سالسا	J
	year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV	9	$+\frac{\mathbf{x}}{\mathbf{y}}$
10	Did any persons become substantial contributors during the tax year? If "yes," attach a schedule listing their pages and addresses	1 10	ı X

	n 990-PF (2017) THE HEARTHSTONE CHARITABLE FOUNDATION 90-084 art VII-A Statements Regarding Activities (continued)	<u>9733</u>	3	Page 5
ت ا	The state of the s	T	Vac	No
44	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	 	163	140
• • •	section 512(b)(13)? If "Yes," attach schedule. See instructions			v
40	• • • • • • • • • • • • • • • • • • • •	11_	<u> </u>	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	100		v
40	If "Yes," attach statement. See instructions	12	37	Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	_13	X	<u> </u>
	Website address ► N/A	1 4 4	450	
14				
	Located at ▶ 9 GRASSY POND ROAD, MOULTONBOROUGH, NH ZIP+4 ▶0	3254	·	 _
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		. , . ▶	•
	and enter the amount of tax-exempt interest received or accrued during the year	N	[/A_	
16			Yes	No
	securities, or other financial account in a foreign country?	16	L	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the		d .	
	foreign country	1 . 3.	?	
P	art 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.	<u> </u>	Yes	No
18	a During the year, did the foundation (either directly or indirectly):	1.25	k.g.,; , ,	, ,
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	139	. 🤾	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	18.33	þ	
	a disqualified person? Yes X No		řá.	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			'
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			ļ
	(5) Transfer any income or assets to a disqualified person (or make any of either available	*- 's		1
	for the benefit or use of a disqualified person)?			
	(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	J	,	
	termination of government service, if terminating within 90 days.)			
ı	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			~3
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b	Jan. 10.10	
	Organizations relying on a current notice regarding disaster assistance, check here		19.	kg 5
	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
•	before the first day of the tax year beginning in 2017?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	1		1 4
_	defined in section 4942(j)(3) or 4942(j)(5)):			42
	a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
•				'^′v
		1	2	; 1
	If "Yes," list the years \(\sum_{\text{inst}} \),			
		. کیرا		135.3
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	- 12 · · · · · · ·	L = -	22.62
	statement - see instructions.)	2b	P 13.80	الدرقمد الأ
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	1.77		
_	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		1, 1%	100
38		Biri)	EŽ.	17.67.4
	during the year? Yes X No	14.,44		-
ı	b If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after	*		
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2017.)	3b		ļ
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 <u>a</u>	\$-87A	X
ı	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	Ž.		Éi'. Ái
	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b	l	X

orm 990-PF (2017) THE HEARTHSTONE CHARITAE			<u>90-08497</u>	33	Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)		
5a During the year, did the foundation pay or incur any amount to:				Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (sectio	n 4945(e))?	. 🗀 Yı	es X No		
(2) Influence the outcome of any specific public election (see section 4955); (or to carry on, directly or indire	ectly,	ĺ		
any voter registration drive?		Y	es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	37	□ Ye	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization					1
4945(d)(4)(A)? See instructions			es X No		-
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational nurposes or t				1 :
the prevention of cruelty to children or animals?	, or outdutional purposes, or i		es 🗶 No	* `* ``	·
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni-	 der the excentione described :			\$ 1.5	- 1
section 53.4945 or in a current notice regarding disaster assistance? See instr		iii ricguiations	NT / 7	5b	ئد ــ شــ
	•		N/A	υ <u>υ</u> ε & * > > .	
Organizations relying on a current notice regarding disaster assistance, check	• • •				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f			es 🔲 No 🕴		1, 26.
expenditure responsibility for the grant?		「/A . └ _ Ye	es Lino 🎼		12 F
If "Yes," attach the statement required by Regulations section 53.4945-5(d).			.*		X
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				1
a personal benefit contract?		Ye	es 🗶 No 🕍	[]	i italia
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		📙	6b	X
If "Yes" to 6b, file Form 8870.				Strange.	
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	L Ye	es 🗶 No 🗓	% to 1	31.w.
b If "Yes," did the foundation receive any proceeds or have any net income attribi	utable to the transaction?	<u> </u>	N/A.	7b	<u> </u>
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly	y		
Paid Employees, and Contractors					
1 List all officers, directors, trustees, and foundation managers and t		•			
4.) Marra and address	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp	ense
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	ačcount allowa	, other nces
BETH STONEBRAKER	PRESIDENT		., .		
P.O. BOX 171530					
BOSTON, MA 02117	1.00	0.	0.		0.
- · · · · · · · · · · · · · · · · · · ·	VICE PRESIDEN				
43 HIDDEN OAK WAY	VIOL INDEDIN	1			
MANCHESTER, NH 03102	1.00	0.	0.		0.
MICHAEL STONEBRAKER	TREASURER	0.	0.		<u> </u>
P.O. BOX 171530	IKEASUKEK		İ		
BOSTON, MA 02117	1 00	0.	0.		_
	1.00 SECRETARY	0.	0.		0.
	SECRETARI				
P.O. BOX 171530	1 00				_
BOSTON, MA 02117	1.00	0.	0.		0.
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	4-3 Fum	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans : and deferred	(e) Exp account	, other
	devoted to position	(0)	compensation	allowa	nces
NONE					
			<u> </u>		

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Total number of other employees paid over \$50,000

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Part·VIII Information About Officers, Directors, Trustees, Founda Paid Employees, and Contractors (continued)	ition Managers, riigniy	
3 Five highest-paid independent contractors for professional services. If none, enter	r "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		D 0
Part IX A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis number of organizations and other beneficiaries served, conferences convened, research papers produced to the conference of the conferenc	tical information such as the duced, etc.	Expenses
1 N/A		
2		
3		
4		
Detaily P. C		
Part X-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
1 N/A		
2		
All other program-related investments. See instructions.		
Total Add lines 1 through 3		0

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	s, see instructions.)
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	2,591,015.
b	Average of monthly cash balances	1b	27,280.
C		1c	
d	Total (add lines 1a, b, and c)	1d	2,618,295.
е		` `	
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	2,618,295.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	39,274.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,579,021.
6	Minimum investment return. Enter 5% of line 5	6	128,951.
Р	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations, check here and do not complete this part.)	d certair	
1	Minimum investment return from Part X, line 6	1	128,951.
2a	Tax on investment income for 2017 from Part VI, line 5		
Ь	Income tax for 2017. (This does not include the tax from Part VI.)	***	
C	Add lines 2a and 2b	2c	1,919.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	127,032.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	127,032.
6	Deduction from distributable amount (see instructions)	6	
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	127,032.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	135,046.
b	Program-related investments - total from Part IX-B	1b	<u> </u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	. 5.	
а	Suitability test (prior IRS approval required)	_3a	
þ	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	135,046.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	135,046.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	jualifies 1	for the section

Form **990-PF** (2017)

Part XIII Undistributed Income (see instructions)

,	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI,		,	j.	
line 7	<u></u>	5		127,032.
2 Undistributed income, if any, as of the end of 2017		, / ,	alt	3. 30 mm
a Enter amount for 2016 only		/ * *	0.	3331
b Total for prior years:	,	0	,	
3 Excess distributions carryover, if any, to 2017:	· 72;	0.	* 2	* Z-288478.18
1		· · · · · · · · · · · · · · · · · · ·		
a From 2012 47,743. b From 2013 39,365.			\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	
c From 2014 138,605.				
dFrom 2015 46,373.				
e From 2016 4, 249.		5963 7754347		
f Total of lines 3a through e	276 335			
4 Qualifying distributions for 2017 from	270,333.			
Part XII, line 4: ►\$135,046.				A Harrison and Marian
a Applied to 2016, but not more than line 2a			0.	
b Applied to undistributed income of prior			Y Y X	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus		5 3 3		
(Election required - see instructions)	0.			
d Applied to 2017 distributable amount				127,032.
e Remaining amount distributed out of corpus	8,014.	444		
5 Excess distributions carryover applied to 2017	0.	11. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	14. W. W. 14.	0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	284,349.	(
b Prior years' undistributed income. Subtract line 4b from line 2b		0.	3 42	
c Enter the amount of prior years'		0.		13.20 12.00
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 2016. Subtract line			_	
4a from line 2a. Taxable amount - see instr.	\$ 1.0.00 × 1.00		0.	· · · · · · · · · · · · · · · · · · ·
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2018	/ 学业業後			U .
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 2012	47,743.			
not applied on line 5 or line 7	41,143.			
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	236,606.			
10 Analysis of line 9:	230,000.			TENER TOTAL
a Excess from 2013 39,365.				
b Excess from 2014 138,605.		Assa Samuel Sal		
c Excess from 2015 46,373.				
d Excess from 2016 4, 249.				
e Excess from 2017 8,014.		Secretary and the second		

	RTHSTONE CH				149733 Page/1
Part XIV Private Operating F			I-A, question 9)	N/A	
1 a If the foundation has received a ruling of					<u>/</u> *
foundation, and the ruling is effective for			- ▶ └	14040()(0)	
b Check box to indicate whether the foun		ng toundation described		4942(<u>j)(3)</u> or49	942(j)(5)/
2 a Enter the lesser of the adjusted net	Tax year (a) 2017	(b) 2016	Prior 3 years (c) 2015	(4) 2014	(a) Total
income from Part I or the minimum	(2) 2017	(0) 2010	(6) 2015	(d) 2014	(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			-	 	<u> </u>
d Amounts included in line 2c not		}			}
used directly for active conduct of				1	
exempt activities			 /	 	
e Qualifying distributions made directly					}
for active conduct of exempt activities.		1			
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the		····		-	<u> </u>
alternative test relied upon:					ļ
a "Assets" alternative test - enter:					
(1) Value of all assets			<i>/</i>		<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	1				1
securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt			İ		İ
organizations as provided in					
section 4942(j)(3)(B)(iii)			 	 	· · · · · · · · · · · · · · · · · · ·
(3) Largest amount of support from			İ		ļ
an exempt organization					
(4) Gross investment income	<u> </u>	A		1 105 000	
Part XV Supplementary Info	rmation (Comple	ete this part only	if the foundation	n nad \$5,000 or mo	ore in assets
at any time during		uctions.)			
1 Information Regarding Foundation	_				
a List any managers of the foundation where year (but only if they have contributed in the contributed in			ributions received by the	e foundation before the clo	se of any tax
	nore man wo,000). (Occ 3	(L)(2).)			
SEE STATEMENT 10		* ** ** ** ** * * * * * * * * * * * *	/		
 b List any managers of the foundation who other entity) of which the foundation ha 			(or an equally large port	ion of the ownership of a p	armership or
-,	ou to to or grounds into or	-			
NONE Contribution Reporting Contribute	ion Cront Cift Loon	Cabalanahin ata D			
2 Information Regarding Contribut Check here ► X if the foundation of				not accept uppellaited regu	unate for funds. If
the foundation makes gifts, grants, etc.	to individuals or organiz	to preselected charitable ations under other condit	organizations and does ions, complete items 2a	not accept unsonched requ	16212 101 IU11U2. 11
a The name, address, and telephone num					
a The hame, address, and telephone hum	inei oi eiliali addiess di ti	іе регоон то многи аррік	auons should be addres	sseu.	
b The form in which applications should l	pe submitted and informat	tion and materials they sl	hould include:		
c Any submission deadlines:					
d Any restrictions or limitations on award	s, such as by geographica	al areas, charitable fields,	kınds of institutions, or	other factors:	

Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to status of recipient Amount any foundation manager Name and address (home or business) or substantial contributor a Paid during the year ALL HANDS VOLUNTEERS HUMANITARIAN 6 COUNTY ROAD, SUITE 6 MATTAPOISETT MA 02739 2,000. APPALACHIAN MOUNTAIN CLUB HUMANITARIAN 5 JOY STREET BOSTON, MA 02108 2,000. ART HUMANITARIAN 31 ST JAMES AVE #360 BOSTON, MA 02116 1,000. BEACON ACADEMY HUMANITARIAN 477 LONGWOOD AVENUE BOSTON, MA 02215 6,350. BOSTON ARTS ACADEMY 174 IPSWICH STREET BOSTON, MA 02215 500. SEE CONTINUATION SHEET(S.) **▶** 3a Total 135,046, b Approved for future payment NONE Tota! **▶** 3b

Unrelated business income

Excluded by section 512, 513, or 514

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelated business income			ided by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
	COGC		1		
<u>a</u>			 		
b	1		 		
·		· · · · · · · · · · · · · · · · · · ·	 	· · · · · · · · · · · · · · · · · · ·	
d	<u> </u>	·····	-		
e					<u>-</u> .
f	<u> </u>		ļ	<u> </u>	
g Fees and contracts from government agencies			ļ		
2 Membership dues and assessments			 		
3 Interest on savings and temporary cash					•
investments					13.
4 Dividends and interest from securities					45,009.
5 Net rental income or (loss) from real estate:	" " no 3 ".			·	Y /编译/编译/编、表、:
a Debt-financed property			Ï		
b Not debt-financed property					
6 Net rental income or (loss) from personal					
nronarh	1				
7 Other investment income	1		 		
	<u> </u>		 		
8 Gain or (loss) from sales of assets other	1				E1 12E
than inventory			 		51,135.
9 Net income or (loss) from special events		· · · · · · · · · · · · · · · · · · ·	 		4 404
10 Gross profit or (loss) from sales of inventory			<u> </u>		1,404.
11 Other revenue:					
a	1				
b					
C					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)	, y ,	0.	,	0.	97,561.
13 Total. Add line 12, columns (b), (d), and (e)	•				97,561.
(See worksheet in line 13 instructions to verify calculations.)	•				
	- 44 4			4 D	
Part XVI-B Relationship of Activities t	o the Acco	omplishment of Ex	xemp	t Purposes	
Line No. Explain below how each activity for which inco			\ contril	outed importantly to the accord	nplishment of
the foundation's exempt purposes (other than					
4 INCOME GENERATED FROM :					
8 TO MAKE CONTRIBUTIONS I	REQUEST	ED FROM THE	HEA	RTHSTONE CHAR	ITABLE FUND
_					
		•			
				*	
	· · · · · · · · · · · · · · · · · · ·	-		······································	
					<u>. </u>
				-	
					

	330-11 (2				TIABLE FOOM			043/33		igo ic
Par	t XVII			insfers to a	nd Transactions	and Relation	ships With None	charitable	;	
		Exempt Organ						<u></u>	Yes	NIO
					g with any other organiza		ection 50 I(c)		162	INO
	-				g to political organizations	s <i>′</i>			İ	
		from the reporting found	ation to a nonchar	nable exempt or	gamzanon oi.			40/41		v
	(1) Cash			-	•			1a(1)		X
	(2) Other							1a(2)	-	X
	Other tran		hla					45/45		v
		of assets to a noncharita	· · · · · ·		•		•	1b(1)		X
		nases of assets from a no	-	t organization	•		•	1b(2)	-	X
,	,	I of facilities, equipment,			• • •	·· · · ·		1b(3)		X
	• •	bursement arrangements		•			•	1b(4)		X
		s or loan guarantees	Imbarahin ar fundi	raioina aaliaitatia	200		•	1b(5)		X
	. ,	rmance of services or me					• • •	1b(6)		X
		f facilities, equipment, ma	-			ahunua ahauu tha fai	ir markat valua of the go		L	Α_
		-	-	_	edule. Column (b) should				seis,	
		-			ed less than fair market v	alue III aliy Ilalisaci	ion or snaring arrangem	eng snow in		
(a) Lin		(b) Amount involved			e exempt organization	(d) Decemb	tion of transfers, transactions	and charing or		
(a) Lin	10 10	(b) Amount involved	(c) Name		s exempt organization	(u) Descrip	non or transfers, transactions	s, and sharing ar	angeme	##ILS
			-	N/A						
	-									
										
									_	
			•						-	
							· · · · - · ·			
			 							
			 							
								 -		
		-	<u> </u>				<u> </u>			
						<u> </u>	 -			
										
				•						
						-				
	la tha farr	adation desaths as indepen	the offiliated with a	r related to one	or more toy exempt error	nurations describes				
		-	-		or more tax-exempt orga	inizations described		Yes	T] No
		501(c) (other than section		Section 527?				169		_ INO
D	ii Yes, co	omplete the following sch (a) Name of org			(b) Type of organization	n	(c) Description of rela	tionshin		
	-	N/A	junization		(b) Typo of organization	'	(b) Boodinpaon or role	шолотр		
		N/A		<u></u>						
	-	· · · · · · · · · · · · · · · · · · ·				- 				
			<u> </u>			 				
	Under	penalties of periury. I declare	that I have examined	this return, includir	l ng accompanying schedules a	nd statements, and to	the best of my knowledge	<u></u>		
Sig	and b				n taxpayer) is based on all info			May the IRS return with th	e prepar	er
Her		1811KADM	0/m/1/2	\sim	12/14/18	Pias	ident	Shown below		str No
		nature of officer or trustee		V I	Date	Title	<u> </u>			_ 140
		Print/Type preparer's na		Preparer's s		Date	Check if F	PTIN		
		The brokers of the	-	1/1.	11111		self- employed			
Pai	d	MARIE C. M	CKAY	Maca	n MMan	05/04/18	1 ' 1	P00294	931	
	parer	Firm's name ► BIG		OMPANY,	CDA DI.I	10.0 \(\(\frac{1}{10.0}\)	Firm's EIN ► 02			
	Only	Tames name > DIG	LLOW & C	OHL MILL	C111, 1114C		I IIII S LIII P U Z	- 		

Form **990-PF** (2017)

Phone no. 6036277659

Firm's address ▶ 500 COMMERCIAL STREET

MANCHESTER, NH 03101

3 Grants and Contributions Paid During the Y	ear (Continuation)			
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		
SOSTON DEBATE LEAGUE			HUMANITARIAN	
1 STATE STREET				
BOSTON, MA 02109	1			1,000
BRIGHAM & WOMEN'S			HUMANITARIAN	
116 HUNTINGTON AVENUE, 5TH FLOOR				
BOSTON, MA 02116	-			5,000
BUILD BOSTON			HUMANITARIAN	
745 ATLANTIC AVENUE, 8TH FLOOR				
BOSTON, MA 02111				500
CATIE'S CLOSET			HUMANITARIAN	
19 SCHOOL STREET				
DRACUT, MA 01826				2,500
CLIMATE REALITY PROJECT			HUMANITARIAN	
750 9TH STREET, NW, SUITE 520				
WASHINGTON, DC 20001		 		2,000
DERRYFIELD SCHOOL			HUMANITARIAN	
2108 RIVER ROAD				500
MANCHESTER, NH 03104-1302				500
OVERSON DRIVER				
DIRECT RELIEF 27 S. LA PATERA LANE			HUMANITARIAN	
GOLETA CA 93117				10,000
OONORS CHOOSE			HUMANITARIAN	
134 W. 37TH STREET				
NEW YORK, NY 10018				2,096
GIVE DIRECTLY			HUMANITARIAN	
P.O. BOX 3221				
NEW YORK, NY 10008				5,000
HEBRON			HUMANITARIAN	
5091 MOUNTAIN BROOK RD				500
GREENSBORO NC 27455 Total from continuation sheets			<u> </u>	

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y	7		<u> </u>	
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		
HESTIA FUND			HUMANITARIAN	
75 STATE ST #2500				
BOSTON, MA 02109				6,000.
HUNTINGTON THEATER			HUMANITARIAN	
264 HUNTINGTON AVENUE BOSTON MA 02115-4606				3,000.
BUSTON, MA 02113-4000				3,000.
LIFE AFTER HATE 917 W. WASHINGTON BLVD, SUITE 212			HUMANITARIAN	
CHICAGO, IL 60607				500.
•				
MCLANE HOSPITAL			HUMANITARIAN	
115 MILL STREET				
BELMONT MA 02478				2,000.
MEDSHARE			HUMANITARIAN	
P.O. BOX 2075				
SECAUCUS, NJ 07096				5,000.
MFA			HUMANITARIAN	
465 HUNTINGTON AVE				3,000.
BOSTON, MA 02115-4606				3,000.
NEW HAMPSHIRE CHARITABLE FOUNDATION 37 PLEASANT STREET			HUMANITARIAN	
CONCORD NH 03301				25,000,
NOONAN SCHOLARS			HUMANITARIAN	
50 MILK STREET, 15TH FLOOR				
BOSTON, MA 02109				10,000.
PHILANTHROPY CONNECTION			HUMANITARIAN	
1770 MASSACHUSETTS AVENUE, SUITE 222				1 100
CAMBRIDGE, MA 02140				1,100.
PLANNED PARENTHOOD MA 1055 COMMONWEALTH AVENUE			HUMANITARIAN	
BOSTON MA 02215-1001			<u> </u>	6,000.
Total from continuation sheets				

3 Grants and Contributions Paid During the Ye		-		
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	Purpose of grant or contribution	Amount
PLANNED PARENTHOOD NH 24 PENACOOK STREET MANCHESTER, NH 03104	or substantial contributor	recipient	HUMANITARIAN	10,000
PROPUBLICA 155 AVENUE OF THE AMERICAS, 13TH FLOOR NEW YORK, NY 10013			HUMANITARIAN	2,000
RAINN 1220 L ST. NW, SUITE 505 WASHINGTON, DC 20005			HUMANITARIAN	1,500
ROMANIA EVANGELICAL MEDICAL MISSION P.O. BOX 537 LAKE BLUFF, IL 60044			HUMANITARIAN	5,000
SCHWAB CHARITABLE FUND P.O. BOX 628298 ORLANDO, FL 32862			HUMANITARIAN	8,000
SUMMER SEARCH 3840 WASHINGTON STREET BOSTON, MA 02130			HUMANITARIAN	500
TEAM RUBICON 6171 W. CENTURY BLVD, SUITE 310 LOS ANGELES, CA 90045			HUMANITARIAN	3,000
WBUR 890 COMMONWEALTH AVENUE, THIRD FLOOR BOSTON, MA 02215			HUMANITARIAN	1,500
WINNIPESAUKEE PLAYHOUSE P.O. BOX 5201 LACONIA, NH 03247			HUMANITARIAN	1,000

FORM 990-PF	INTEREST	ON SAVING	S AND	TEMPORAR	Y CASH	INVESTMENTS	STATEMENT 1
SOURCE				(A) REVENUE ER BOOKS	NET	(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME
US TREASURY				13	•	13.	13.
TOTAL TO PART	I, LINE	3		13	•	13.	13.
FORM 990-PF		DIVIDENDS .	AND II	NTEREST F	ROM SE	CURITIES	STATEMENT 2
SOURCE		GROSS AMOUNT	GA:		(A) REVENUI ER BOOI		
CHARLES SCHWAR	3	48,794.	3	3,785.	45,00	9. 45,00	45,009.
TO PART I, LIN	JE 4	48,794.	3	3,785.	45,00	9. 45,00	45,009.

FORM 990-PF	INCOME AND COST OF GOODS SOL		STATEMENT	3
INCOME				
1. GROSS RECEIPTS . 2. RETURNS AND ALLOW 3. LINE 1 LESS LINE				
	LD (LINE 15)			
6. OTHER INCOME		1,404		
7. GROSS INCOME (ADI	D LINES 5 AND 6)		1,	404
COST OF GOODS SOLD				
9. MERCHANDISE PURCE 10. COST OF LABOR 11. MATERIALS AND SUE				
	LD (LINE 13 LESS LINE 14)			

FORM 990-PF COST (90-PF COST OF GOODS SOLD - OTHER INCOME				
DESCRIPTION				AMOUNT	
US TREASURY				1,404.	
TOTAL OTHER INCOME	<u> </u>	1,404.			
FORM 990-PF	ACCOUNTI	NG FEES	S'	ratement 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING FEES	1,236.	0.	0.	0.	
TO FORM 990-PF, PG 1, LN 16B	1,236.	0.	0.	0.	
FORM 990-PF (OTHER PROFES	SIONAL FEES	S	ratement 6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
STATE FEE	75.	0.	0.	0.	
TO FORM 990-PF, PG 1, LN 16C	75.	0.	0.	0.	
FORM 990-PF	TAX	ES	S	PATEMENT 7	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FOREIGN TAXES ACCRUED	206.	206.	0.	0.	
TO FORM 990-PF, PG 1, LN 18	206.	206.	0.	0.	
= 10 10 11, 10 1, DN 10	200.	200.			

FORM 990-PF	CORPORATE STOCK		STATEMENT	
DESCRIPTION		BOOK VALUE	FAIR MARKE VALUE	T
VANGUARD TOTAL STOCK MARKET		135,119.	263,5	91.
VANGUARD ENERGY FUND		108,044.	92,3	
VANGUARD TOTAL INTL STK		96,748.	119,9	
POWERSHS QQQ TRUST SER 1		78,741.	185,0	
CALAMOS MARKET NEUTRAL		221,039.	224,8	
VANGUARD MID CAP		347,312.	423,7	88.
VANGUARD SMALL CAP		347,824.	434,5	32.
VANGUARD 500 INDEX		285,265.	363,9	87.
ISHARES CORE S&P MID CAP		84,160.	112,9	19.
ISHARES CORE S&P SMALL CAP		79,155.	108,9	17.
TOTAL TO FORM 990-PF, PART	II, LINE 10B	1,783,407.	2,329,8	91
FORM 990-PF	CORPORATE BONDS		STATEMENT	9
DESCRIPTION		BOOK VALUE	FAIR MARKE	T
VANGUARD INFLATION		49,517.	45,7	 25
VANGUARD SHORT TERM		310,900.	309,8	
FOTAL TO FORM 990-PF, PART	II, LINE 10C	360,417.	355,5	42
FORM 990-PF	PART XV - LINE 1A F OF FOUNDATION MANAGE	an a	STATEMENT	10

NAME OF MANAGER

BETH STONEBRAKER MICHAEL STONEBRAKER