

## 990-PF

Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation



29491.51406122

 ▶ 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. Department of the Treasury

		dar year 2017 or tax year beginning 7 / 01 / 17, a		0/10	1010011111		1-	
_		undation	and ending 06/3	0/18	A Empl	over identification number	<del></del> -	
		S L. BENZ TRUST				oya, 10011111021101111111111111111111111111		
		RONALD P. WEYLAND CO-TRUSTE	E.		04.	-6504871		
		d street (or P O box number if mail is not delivered to street address)		om/suite		hone number (see instructio	ns)	
1	35	LOOP ROAD			603	3-303-1128		
City	or town	n, state or province, country, and ZIP or foreign postal code		_	C If exe	mption application is pending	o check here	<u>▶</u> □
0'	<u>ris</u>	FIELD ME 04270			C II exe	inplion application is pending	g, check field	
G C	heck :	all that apply: Initial return Initial retu	rn of a former public of	chanty	D 1 Fo	reign organizations, check h	nere	<b>•</b>
		Final return Amended	return		2 Fc	reign organizations meeting	the	
		X Address change Name cha	ange	_	85	% test, check here and attac	ch computation	<b>•</b>
H C	heck	type of organization: X Section 501(c)(3) exempt prival	te foundation	01)	E If priv	ate foundation status was te	rminated under	
		n 4947(a)(1) nonexempt charitable trust Other taxab		00	sectio	n 507(b)(1)(A), check here		▶ □
		rket value of all assets at J Accounting method		rual	F If the	foundation is in a 60-month	termination	
en	d of y	rear (from Part II, col (c), Other (specify)			under	section 507(b)(1)(B), check	here	▶ □
	-	▶ \$ 9,741,127 (Part I, column (d) must	t be on cash basis )					
	ırt l	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Net inv	notmont	(c) Adjusted net	(d) Disbursem for charitable	
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	(D) Net 1110		income	purposes	
_			5555				(cash basis of	niy)
	1	Contributions, gifts, grants, etc., received (attach schedule)					<del> </del>	
	2	Check ► X if the foundation is <b>not</b> required to attach Sch	6,334		6,334			
	3	Interest on savings and temporary cash investments	302,906	3.0	2,906			
	4	Dividends and interest from securities	302,300	3(	2,900		·	
	5a	Gross rents						
ne	b	Net rental income or (loss)	44,215				<u>-</u> -	
Revenue	6a	Net gain or (loss) from sale of assets not on line 10  Gross sales price for all assets on line 6a  830,200	44,213	-		<del> </del>		
é	b				4,215		<del></del>	
UZ.	7	Capital gain net income (from Part IV, line 2)			1,210	0		
	8	Net short-term capital gain						
	9	Income modifications						
	10a b	Gross sales less returns and allowances Less Cost of goods sold						
	C	Gross profit or (loss) (attach schedule)						
	11	Other income (attach schedule)	-					
	12	Total, Add lines 1 through 11	353,455	35	3,455	0		
9	13	- KEIGEN/EN	58,088		9,044		<del></del>	,044
Expense	14	Other employee salaries and wages				<del>-</del>		
e	15	Pension plans employee benefits					-	
X	16a	A SUIT OF THE PROPERTY OF THE					-	
Ð	b	Accounting fees (attach schedule) State 1	3,250		3,250	· · ·	•	
<b>:</b>	c	Othen professional riees (affach schedule) Stmt 2	48,869	4	8,869			
tra	17	Interest					<u> </u>	
j:	18	Taxes (attach schedule) (see instructions) Stmt 3	5,913		637			
⋷	19	Depreciation (attach schedule) and depletion						
₹	20	Occupancy						
<b>7</b> p	21	Travel, conferences, and meetings						
Operating and Administrativ	22	Printing and publications						
ğ	23	Other expenses (att sch ) Stmt 4	174		174			
Ė	24	Total operating and administrative expenses.						
9.73		Add lines 13 through 23	116,294		1,974	0		,044
ğ	25	Contributions, gifts, grants paid	422,992				<del></del>	,992
	26	Total expenses and disbursements. Add lines 24 and 25	539,286		31,974	0	452	,036
	27	Subtract line 26 from line 12						
	а	Excess of revenue over expenses and disbursements	-185,831					
	ь	Net investment income (if negative, enter -0-)		27	1,481		L	
	c	Adjusted net income (if negative, enter -0-)				0		

Form 990-PF (2017)

F	<u>otm 99</u>	0-PF (2017) DORIS L. BENZ TRUST	<u>04-650487</u>	1	Page 2
	• Part	Ralance Shoots Attached schedules and amounts in the description column	Beginning of year	End of	year
_	rant	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing	283,087	131,970	131,970
	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 (attach schedule) (see		i	
		instructions)			
	7	Other notes and loans receivable (att. schedule)			
		Less: allowance for doubtful accounts ▶ 0			
2	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Š	10a	Investments – U.S. and state government obligations (attach schedule)			
	b	Investments – corporate stock (attach schedule) See Stmt 5	3,325,349	3,133,080	5,983,309
	С	Investments – corporate bonds (attach schedule)			
	11	Investments – land, buildings, and equipment basis			
		Less accumulated depreciation (attach sch ) ▶			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule) See Statement 6	3,576,394	3,733,949	3,625,848
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation (attach sch.)			
	15	Other assets (describe ▶ )			
	16	Total assets (to be completed by all filers – see the			
		instructions Also, see page 1, item I)	7,184,830	6,998,999	9,741,127
	17	Accounts payable and accrued expenses			
م	18	Grants payable			
apilities	19	Deferred revenue			
藚	20	Loans from officers, directors, trustees, and other disqualified persons			•
<u>a</u>	21	Mortgages and other notes payable (attach schedule)		<u></u>	
	22	Other liabilities (describe > )			
	<u>23</u>	Total liabilities (add lines 17 through 22)	0	0	
S		Foundations that follow SFAS 117, check here			
ces		and complete lines 24 through 26 and lines 30 and 31.			
lan	24	Unrestricted			
ă	25	Temporarily restricted	<u> </u>		
-una ba	26	Permanently restricted	ļ		
2		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
ō			7 220 027	6,706,448	
sets	27	Capital stock, trust principal, or current funds	7,328,837	0,700,440	
25	28	Paid-in or capital surplus, or land, bldg., and equipment fund	-144,007	292,551	
3	29 30	Retained earnings, accumulated income, endowment, or other funds	7,184,830	6,998,999	
Z	31	Total liabilities and not prostoffund belonges (see	7,104,030	0,330,333	
	31	Total liabilities and net assets/fund balances (see	7,184,830	6,998,999	
_	Part I	II Analysis of Changes in Net Assets or Fund Balances	7,101,030	0,330,333	
		net assets or fund balances at beginning of year – Part II, column (a), line 30 (	(must agree with	<del></del>	
•		of year figure reported on prior year's return)	(musi agree will)	1	7,184,830
2		amount from Part I, line 27a		2	-185,831
		r increases not included in line 2 (itemize)		3	
		ines 1, 2, and 3		4	6,998,999
		eases not included in line 2 (itemize)		5	
		net assets or fund balances at end of year (line 4 minus line 5) – Part II, colum	nn (b), line 30	6	6,998,999
_		Tartif, coldi	(5/)5 55		- 000 PE (0012)

Form 990-PF (2017) <b>DORIS L.</b>	BENZ TRUST		<u> </u>			Page 3
Part IV Capital Gains and	d Losses for Tax on Investment Ir	ncome				
(a) List and describe the k	kind(s) of property sold (for example, real estate, buse, or common stock, 200 shs MLC Co )		(b) How acquired P – Purchase D – Donation	(c) Date ac (mo , day		(d) Date sold (mo , day, yr )
1a See Worksheet						
b			_			
С						
d						·
e						
(e) Gross sales pnce	(f) Depreciation allowed (or allowable)	(g) Cost or plus expen			(h) Gain ( (e) plus (f)	
a						
b						
С						
d						<u> </u>
е					-	
Complete only for assets showing	gain in column (h) and owned by the founda	tion on 12/	31/69.			h) gain minus
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess over col	**		(), but not le Losses (fror	ess than -0-) or m col (h))
a			_			
b		<del></del> -				
С						
e			<del></del>			
2 Capital gain net income or (net cap	pital loss) If gain, also enter in Part I, Ii If (loss), enter -0- in Part I, Ii	ine /		,		44,215
		ne /	-	2		44,213
	s) as defined in sections 1222(5) and (6).	o ¬				
_	column (c) See instructions If (loss), enter-	0- In				
Part I, line 8  Part V Qualification Und	ler Section 4940(e) for Reduced T	ov on N	nt Investment In	como		
				icome		
•	foundations subject to the section 4940(a) ta	x on net inv	resument income.)			
f section 4940(d)(2) applies, leave this	s part blank					
Vas the foundation liable for the section	on 4942 tax on the distributable amount of a	nv vear in ti	he base period?			Yes X No
	y under section 4940(e) Do not complete th	• •				
	ach column for each year, see the instruction		aking any entries			
(a)	"-	is belove in			····	(d)
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value	(c) of nonchantable-use assets	s		bution ratio vided by col (c))
2016	400,817		9,391,4	73	(00. (0) 0.	0.042679
2015	475,931		8,958,0			0.053129
2014	520,918		9,634,1			0.054070
2013	449,734		9,321,2			0.048248
2012	385,691		8,981,0			0.042945
2012			5/25=/-5			
2 Total of line 1, column (d)				2		0.241071
	-year base period – divide the total on line 2	by 50 or h	ov the	<u>  -</u>		
_	is been in existence if less than 5 years	Dy 5 0, 0, L	y the	3		0.048214
number of years the loundation ha	is been in existence in less than 5 years			-		
4. Enter the net value of nencharitable	le-use assets for 2017 from Part X, line 5			4		9,841,833
- Litter the flet value of horichantable	ic-use assets for 2017 from Fart X, fine 5			<del> </del> -		<del>5 / 0 1                                 </del>
5 Multiply line 4 by line 3				5		474,514
5 Multiply line 4 by line 3				<u> </u>		1/1/511
6 Enter 1% of net investment income	o /19/ of Port Line 27h)			6		2,715
6 Enter 1% of het investment income	e (1% 01 Fatt 1, IIII e 270)			-		2/123
7 Add lines 5 and 6				7		477,229
Add lines 5 and 6				'		1111443
9 Enter qualifying distributions from	Part XII. line 4			8		452,036
8 Enter qualifying distributions from	ran All, line 4 line 7, check the box in Part VI, line 1b, and	complete t	hat nart using a 10/ +		e the	132,030
ii iiile o is euual lu vi ülealel (lläll			nacuantusinua 1/0 l	.un 1015 31	, u i i i i i	
Part VI instructions	mile 7, Greek the box hir art vi, mic 15, and	oompicte ti	<b>y</b>			

Forn	n 990-PF (2017) DORIS L. BENZ TRUST	04-6504871		Pag	<u>je 4</u>
P'	art VI Excise Tax Based on Investment Income (Section 4940(a), 49	40(b), 4940(e), or 4948 – see instructions)			
1a		and enter "N/A" on line 1			_
		tter if necessary—see instructions			
ь	Domestic foundations that meet the section 4940(e) requirements in Part V	11 1		5,43	30
-	here ▶ ☐ and enter 1% of Part I, line 27b	,			
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations	vations enter 4% of			
·	Part I, line 12, col. (b)				
2		idations only; others, enter -0-)			Λ
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable four	additions only, others, enter -u-)		5,43	<del>2</del> \( \)
3	Add lines 1 and 2	<u> </u>		<u> </u>	<del>3 0</del>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable four			5,43	<del></del>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or le	ss, enter -0-		3,43	<u>3 U</u>
6	Credits/Payments	5 000			
a	2017 estimated tax payments and 2016 overpayment credited to 2017	6a 5,000			
þ	Exempt foreign organizations – tax withheld at source	6b			
С	Tax paid with application for extension of time to file (Form 8868)	6c			
d	Backup withholding erroneously withheld	6d			
7	Total credits and payments Add lines 6a through 6d	7		<u>5,00</u>	<u>00</u>
8	Enter any penalty for underpayment of estimated tax. Check her I if Form				4
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owe	d ▶ 9		4.3	34
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the am	ount overpaid ▶ 10			
11_	Enter the amount of line 10 to be: Credited to 2018 estimated tax	Refunded ▶ 11			
_P:	art VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, sta	ate, or local legislation or did it		Yes N	No
	participate or intervene in any political campaign?		1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for	political purposes? See the			
	Instructions for the definition		1b	1 :	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activit	es and copies of any materials			
	published or distributed by the foundation in connection with the activities			1	
С	Did the foundation file Form 1120-POL for this year?		1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imp	osed during the year:	''		<u></u>
•	(1) On the foundation $\blacktriangleright$ \$ (2) On foundation				
е	Enter the reimbursement (if any) paid by the foundation during the year for				
•	on foundation managers. > \$	political expeliciture tax imposed		1	
2	Has the foundation engaged in any activities that have not previously been	reported to the IPS?	2	1 .	X
-	If "Yes," attach a detailed description of the activities	reported to the INS?		<del></del>	<u>~</u>
•		in the payons are transfer and a declar of			
3	Has the foundation made any changes, not previously reported to the IRS,		'	.	v
4	incorporation, or bylaws, or other similar instruments? If "Yes," attach a con		3	<del>                                     </del>	$\frac{\mathbf{x}}{\mathbf{x}}$
4a	Did the foundation have unrelated business gross income of \$1,000 or more		4a	┝═┾	<u> </u>
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/.	F 1	$\vdash$	<del></del>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year	ar <i>'</i>	5	<del>                                     </del>	<u>X</u>
_	If "Yes," attach the statement required by General Instruction T.	n			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4	945) satisfied either	}		
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so the state of the s	at no mandatory directions that			
	conflict with the state law remain in the governing instrument?		6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year		7	X	
8a	Enter the states to which the foundation reports or with which it is registered <b>NH</b>	d See instructions ▶			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form	990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," a		8b	x	
9	Is the foundation claiming status as a private operating foundation within the				
-	4942(j)(5) for calendar year 2017 or the taxable year beginning in 2017? Se				
	complete Part XIV	a management of Fall File 100	9	,	x '
10	Did any persons become substantial contributors during the tax year? If "Ye	es " attach a schedule listing their		<del>                                     </del>	<del></del>
	Did any persons become substantial continutions during the tax year? If it is	o, attach a schedule ilsting thell		1 I.	
	names and addresses		10	1 1 1	X_

DAA

	art VII-A Statements Regarding Activities (continued)		_		
	at VII-A Statements Regarding Activities (Sofianded)			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the				
••	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions		11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified				
12	person had advisory privileges? If "Yes," attach statement. See instructions		12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	Х	
13	Website address ► N/A				
14	The books are in care of ▶ RONALD P. WEYLAND  Telephone no. ▶	603-3	03-	112	8
1-4	135 LOOP ROAD	•••	• •		
	Located at ▶ OTISFIELD ME ZIP+4 ▶	04270	)		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – check here	<b>V</b> · ·			►Ü
		15			·
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		-	Yes	No
10	over a bank, securities, or other financial account in a foreign country?		16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of				
	the foreign country				
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.			Yes	No
1a					
14	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a				
	disqualified person?	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	X No			i
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for				
	the benefit or use of a disqualified person)?	X No			
	(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 service, if terminating within 90 days.)	X No			
ь	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations				
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here	▶□			
С	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?	N/A	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private				
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))				
а	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 before 2017?	X No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20				
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				
	all years listed, answer "No" and attach statement – see instructions )	N/A	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here				
	<b>▶</b> 20 , 20 , 20 , 20				
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise				
	at any time during the year?	X No			
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 )	N/A	3b_		<u> </u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes?		4a		<u> </u>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its				
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?		4b		<u> </u>
		Fc	.m 99	U-PF	(2017)

		L. BENZ TRUST		3048/I			<u> </u>	age <b>o</b>
<u>Pa</u>	art VII-B Statemer	nts Regarding Activities for Which For	<u>m 4720 May B</u>	e Required (d	continued)	r		
5a		undation pay or incur any amount to						
		, or otherwise attempt to influence legislation (secti		\ <b></b> \	∕es X No			
	(2) Influence the outcome	e of any specific public election (see section 4955),	or to carry on,					
	directly or indirectly, a	iny voter registration drive?		י ⊔	∕es X No			
		individual for travel, study, or other similar purpose		\ <b>`</b>	∕es 🏋 No			
	(4) Provide a grant to an	organization other than a charitable, etc., organiza	tion described in		-			
	section 4945(d)(4)(A)	? See instructions		\ <b></b> \	∕es X No			
	(5) Provide for any purpo	se other than religious, charitable, scientific, literar	y, or educational	_				
	purposes, or for the p	revention of cruelty to children or animals?		\ <b></b> \	∕es 🏻 No			
b	If any answer is "Yes" to	5a(1)-(5), did any of the transactions fail to qualify	under the exceptio	ns described in				
	Regulations section 53 49	345 or in a current notice regarding disaster assista	ince? See instructi	ons	N/A	5b		
	Organizations relying on a	a current notice regarding disaster assistance, che	ck here		▶ ∐ }			
C	If the answer is "Yes" to q	uestion 5a(4), does the foundation claim exemptio	n from the tax					
	because it maintained exp	penditure responsibility for the grant?		N/A 📗	∕es 🗌 No 📗			
	If "Yes," attach the statem	ent required by Regulations section 53 4945-5(d)						
6a	Did the foundation, during	the year, receive any funds, directly or indirectly,	to pay premiums					
	on a personal benefit con			\ \ \	res 🗓 No			
b	Did the foundation, during	the year, pay premiums, directly or indirectly, on a	a personal benefit o	contract?	_	6b		<u> </u>
	If "Yes" to 6b, file Form 88					I		
7a	At any time during the tax	year, was the foundation a party to a prohibited ta	x shelter transaction	on? 🔲 ۱	res 🗶 No			
b	If "Yes," did the foundation	n receive any proceeds or have any net income att	ributable to the tra	nsaction?	N/A	7b		
Pa	art VIII Informatio	n About Officers, Directors, Trustees,	Foundation M	anagers, Hig	hly Paid Emp	oloye	es,	
	and Contra							
1 1	ist all officers, directors,	trustees, and foundation managers and their o	ompensation. Se	e instructions.				
			(b) Title, and average	(c) Compensation	(d) Contributions to			
		(a) Name and address	hours per week	(If not paid,	employee benefit plans and deferred		ense a r allowa	
			devoted to position	enter -0-)	compensation			
RC	NALD P. WEYLAND	OTISFIELD	CO-TRUSTEE					
13	5 LOOP ROAD	ME 04270	25.00	29,044	0			0
JA	NICE W. SINCLAIR	BLUFFTON	CO-TRUSTEE					
25	OCOEE DRIVE	SC 29910	25.00	29,044	0	<u> </u>		0
			]					
			]					
	,		<u></u>			<u> </u>		
2	Compensation of five hi	ghest-paid employees (other than those includ	ed on line 1 – see	instructions). If	none, enter			
	"NONE."							
			(b) Title, and average		(d) Contributions to employee benefit	/a) Eve	ense a	Securit
	(a) Name and address	of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred		r allowa	
			devoted to position		compensation			
NC	NE							
						<u> </u>		
			1					
				<u> </u>		<u> </u>		
			1					
	<u></u>					<u> </u>		
			1	1		l		
				<u> </u>		<u> </u>		
Tota	I number of other employe	es paid over \$50,000						0
					Ea	<b>9</b> 9	N.PF	(2017)

Form 990-PF (2017) DORIS L. BENZ TRUST	<u>04-6504871</u>	Page 7
Part VIII Information About Officers, Directors, Truste	ees, Foundation Managers, Highly Pa	id Employees,
and Contractors (continued)  3 Five highest-paid independent contractors for professional service	es See instructions If none enter "NONE"	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(5) 1390 0.30/100	(c) compensation
1012		
•		
otal number of others receiving over \$50,000 for professional services		
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistic organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 N/A	-	
2		
3		
3		
4		
		<u> </u>
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year or	n lines 1 and 2	Amount
1 N/A		
2		
All other program-related investments. See instructions		
•		
otal Add lines 1 through 3		

Form 990-PF (2017)

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Form 990-PF (2017)

5

6

Enter 1% of Part I, line 27b See instructions

Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years

b Excess from 2014c Excess from 2015d Excess from 2016e Excess from 2017

<u>Pa</u>	rt XIV Private Operating Fou	<u>ndations (see</u>	instructions and	<u>Part VII-A, ques</u>	tion 9)	
a	If the foundation has received a ruling or	determination lette	r that it is a private op	erating		
	foundation, and the ruling is effective for 2				·	
b	Check box to indicate whether the foundate		perating foundation de		4942(j)(3) or	4942(1)(5)
а	Enter the lesser of the adjusted net	Tax year		Pnor 3 years		(e) Total
	income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	/ (4,1544)
	investment return from Part X for		ĺ		/	
	each year listed					
)	85% of line 2a	<u> </u>				
:	Qualifying distributions from Part XII,					
	line 4 for each year listed				<u></u>	
t	Amounts included in line 2c not used directly		İ	/		
	for active conduct of exempt activities					
)	Qualifying distributions made directly					
	for active conduct of exempt activities					i
	Subtract line 2d from line 2c					
	Complete 3a, b, or c for the					
	alternative test relied upon					
l	"Assets" alternative test – enter		,	₹	1	
	(1) Value of all assets		/			
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)		/	1		
,	"Endowment" alternative test – enter 2/3				1	
	of minimum investment return shown in		/			
	Part X, line 6 for each year listed		/	1		
	"Support" alternative test – enter				<u></u>	
	(1) Total support other than gross		/			
	investment income (interest,					
	dividends, rents, payments on		<b>Y</b>			
	secunties 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)				<del></del>	
	(3) Largest amount of support from					
	an exempt organization		<u> </u>			
	(4) Gross investment income rt XV Supplementary Inform	ation (Cample	to this part only	if the foundati	on had \$5 000	or more in esset
d	• • • • • • • • • • • • • • • • • • • •	, -		if the foundati	on nad \$5,000	or more in asset
_	any time during the ye		ictions.)	<del></del>		···
	Information Regarding Foundation Mai	_	W	4.14.6.4		1.4
	List any managers of the foundation who				-	dation
	before the close of any tax year (but only	if they have contrib	outed more than \$5,0	00). (See section 50	)/(d)(2) )	
_	NONE					<del></del>
	List any managers of the foundation who		· ·		ly large portion of	the
	ownership of a partnership or other entity	) of which the foun	dation has a 10% or (	greater interest		
	NONE					
	Information Regarding Contribution, G			•		
-	Check here $ ightharpoonup$ if the foundation only r	makes contribution	s to preselected char	itable organizations	and does not acc	ept
-	unsolicited requests for funds. If the found	dation makes gifts,	grants, etc , to individ	duals or organization	ns under other con	ditions,
	complete items 2a, b, c, and d. See instru	ctions.				
•	The name, address, and telephone numb	er or email addres	s of the person to who	om applications sho	uld be addressed	
	See Statement 7					
_					_ <u></u>	
, -	The form in which applications should be	submitted and info	rmation and materials	s they should includ	e	
	See Statement 8					
_	Any submission deadlines:					
	NO SUBMISSION DEADLI	NES				
	NO SUBMISSION DEADLI  Any restrictions or limitations on awards, s		phical areas, charitab	le fields, kinds of ins	stitutions, or other	

Page 11

Part XV Supplementary Information ( 3 Grants and Contributions Paid During	(continued)			
3 Grants and Contributions Paid During	the Year or Approved to	or Future Paymen	<u>t</u>	
Recipient	ff recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor		<del>- </del>	<u> </u>
a Paid during the year See Statement 10				
see statement 10			-	
•				422,992
			1	
	•			
			Ì	
			1	
•				
•				
		<u> </u>		
Total	T	<del></del>	▶ 3a	422,992
b Approved for future payment				
N/A				
			1	
,				
			1	
Total			▶ 3b	
DAA	- <del></del>		•	orm <b>990-PF</b> (2017

Form 990-PF (2017) DORIS L. BENZ TRUST

Part XVI-A Analysis of Income-Producing Activities

Er	ter gross am	ounts unless otherwise indicated.	Unrelate	ed business income	Excluded	by section 512, 513, or 514	(a)
	_	rvice revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
٠	-						
	b						-
		d contracts from government agencies					
2	_	dues and assessments					
3	Interest on s	savings and temporary cash investments			14	6,334	
4		nd interest from securities			14	302,906	
5	Net rental in	come or (loss) from real estate:					
		anced property					
		t-financed property					
6	Net rental in	come or (loss) from personal property					
7	Other invest	tment income					
8	Gain or (los	s) from sales of assets other than inventory	_		18	44,215	
9	Net income	or (loss) from special events					
10	Gross profit	or (loss) from sales of inventory					
11	Other reven	ue:a					
	b						
	С						
	d						
	e						
12	Subtotal Ad	td columns (b), (d), and (e)	L	]0	ئے۔	353,455	
13	Total. Add	ine 12, columns (b), (d), and (e)				13	353,455
		in line 13 instructions to verify calculations)					
	Part XVI-B						
	Line No.	Explain below how each activity for which incom					
_	▼	accomplishment of the foundation's exempt purp	ooses (other th	han by providing fund	s for suc	th purposes) (See ins	tructions)
	N/A						
_				-		<del></del>	
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_							<del></del>
_						<u> </u>	
_				<del>.</del> .			<del>.</del>
_						<del></del>	<u>.</u>
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			<del></del>	<del>.</del>			<del></del>
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Form 990-PF (2	017) DORIS L.	BENZ TRUST		04-6504871	<u> </u>	Pa	ge <b>13</b>
Part XVII		garding Transfers To a	and Transact	ions and Relationship	os With Noncharita		
1 Did the org		ndirectly engage in any of the	following with ar	y other organization describ	ed	Yes	No
ın section	501(c) (other than sec	ction 501(c)(3) organizations)					
organizatio		-d-t t		n of			
	from the reporting four	ndation to a noncharitable exe	empt organization	1 01	<sub>4</sub> ,	a(1)	x
(1) Cash						1(2)	X
(2) Other b Other tran					10	12/	┢┸
		itable exempt organization			<u>1</u> t	o(1)	X
(2) Purcha	ases of assets from a r	noncharitable exempt organiz	ation		<u>1k</u>	(2)	X
(3) Rental	l of facilities, equipmen	it, or other assets				o(3)	X
(4) Reimb	ursement arrangemen	ts				(4)	X
	or loan guarantees					(5)	X
		nembership or fundraising so				o(6)	X
		mailing lists, other assets, or		مرام مرتوريات المرتورات (بال محريات		lc	
		e is "Yes," complete the follow , or services given by the repo					
		ng arrangement, show in colu					
(a) Line no	(b) Amount involved	(c) Name of nonchantable exem			, transactions, and sharing arran	gements	
N/A							
				<del>-</del>	·		
<del></del>						<del></del>	
				<del></del>			
				<del></del>			
					<u>-</u>		
	-						
	-	-		<del></del>			
2a Is the four	dation directly or indire	Lectly affiliated with, or related	to one or more	tax-exempt organizations	<del> </del>		
		er than section 501(c)(3)) or in		dax-exempt organizations		Yes X	No
	omplete the following s				<u></u>		
	(a) Name of organization	(b) Type of o	organization	(c) Des	cnption of relationship		
N/A							
				*****			
-		<del></del>		<del></del>			
				·	<del></del>		
Under p	enalties of perjury, I declare	that I have examined this return, incli	uding accompanying	schedules and statements, and to the	ne best of my knowledge and b	elief, it is tru	ıe,
correct,	and complete Declaration o	f preparer (other than taxpayer) is ba	ised on all information	of which preparer has any knowled	lge May the IRS discuss	this return	$\neg$
Sign		•			with the preparer sho		¬ I
Here -	$\rightarrow$ $\rho$	" / / "		<b>~</b>	See instructions	X Yes	No
	X ) /. /	Wyland	11.	4.2018 CO.	-TRUSTEE		
Sig	nature of officer or trustee		Date	Title			
Pnnt/	Type preparer's name		Preperer's signatu		Date	Check	ıf X
Paid			1	-U-4 C/34	, , , , ,		mployed
Preparer	iel E. Clasby	alashu a gama	Daniel E.	Clasby	11/01/		<u> </u>
Use Only		<u> Clasby &amp; Compar</u> Cummings Cente:		2380		2 <u>6958</u> 39513	
Firm's		rly, MA 01915	r parce ,	2500		922-9	
	2010.					990-PF	

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(15)

Form <b>990-PF</b>	Capital G	ains and Losses f	or Tax on In	vestment l	ncome	2017
Form 990-PF	For calendar year 20:	17, or tax year beginning	07/01/1	7 , and ending	06/30/18	2017
ame	Tor carcinal year 20	17, or tax your boginning	<u> </u>	,		ntification Numb
DORIS L. B	ENZ TRUST					
C/O RONALD	P. WEYLAND	CO-TRUSTEE			04-6504	
(a)	List and describe the kind(s) of 2-story brick warehouse, or cor	property sold, e.g., real estate, mmon stock, 200 shs MLC Co		(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1) DOMINION	ENERGY	,		P	06/01/00	11/08/1
) ILLINOIS	TOOL WORKS	INC		<u>P</u>	02/01/11	11/08/1
	RPORATION			P P	10/20/09	11/08/1
MCDONALDS MICROSOF				P P	10/20/09	11/08/1
	ENERGY INC			P	10/14/04	11/08/1
	CONVERTIBLE	2		P	05/15/14	11/08/1
	L GLOBAL DIV	/ERSIFIED		P	05/15/14	11/08/1
	OR COMPANY			<u>P</u>	09/24/15	11/08/1
	RGO & COMPAN		<del></del>	<u>Р</u>	05/15/14	11/08/1   06/18/1
	ELECTRIC COM	TPAIN I		<u>r</u>	02/26/15	06/18/1
12) 13)					†	<u> </u>
14)		·				
15)						
	· · · · · · · · · · · · · · · · · · ·		<u> </u>		<del></del>	<del></del>
(e) Gross sales prio	ce <b>(f)</b>	Depreciation allowed (or allowable)	(g) Cost or oth plus expense	of sale	(h) Gain (e) plus (f	or (loss) ) minus (g)
1) 19,9				5,645		14,321
2) 59,9				0,552	<del></del>	39,419
$\frac{3)}{3}$ $\frac{29}{3}$				.3, <u>428</u> .0,637	<del></del>	<u>16,547</u> 19,456
4) 30,0 5) 59,9		<del></del>		.0,637 .8,853		41,050
6) 50,0				1,177		38,865
7) 59,3			5	4,256		5,126
8) 311,4				9,491		1,909
9) 65,0				2,967		-7,871
10) 70,0				80,176 8,803		50,160 74,447
11) <b>74</b> ,3	336		т.я	:0,003	<del> </del>	/3,33/
12) 13)						
14)					_	
15)						
Complete only for a	ssets showing gain in c	column (h) and owned by the	foundation on 12/3	31/69		
(i) FMV as of 12/31		Adjusted basis as of 12/31/69	(k) Excess over col (j		(I) Gains (Co col (k), but not le Losses (fron	ol (h) gain minus ss than -0-) <b>Of</b> n col (h))
1)						14,321
2)						39,419
3)						16,547
4)			<del></del>	<del></del>		19,456 41,050
5)						38,865
6) 7)				-	†	5,126
8)				·		1,909
9)						-7,871
10)				<del></del>		50,160
11)					<del></del>	74,447
12)					<del> </del>	
13)			<del></del>			
14)					+	

<del>1</del>-3

BENZ4871 DORIS L. BENZ TRUST 04-6504871 FYE: 6/30/2018

**Federal Statements** 

•	Charitable Purpose	v.	v.		Charitable Purpose	₩	۰ م		Charitable Purpose	·v.	\cdot
inting Fees	Adjusted Net	w	ν.   Ο	fessional Fees	Adjusted Net		۰ 0	axes	Adjusted Net	w.	o o
I, Line 16b - Accou	Net Investment	\$ 650	\$ 3,250	Part I, Line 16c - Other Professional Fees	Net Investment	\$ 48,869	\$ 48,869	. Part I, Line 18 - T	Net Investment	\$ 637	637
Statement 1 - Form 990-PF, Part I, Line 16b - Accounting Fees	Total	\$ 650	\$ 3,250	.m 990-PF,	Total	\$ 48,869	\$ 48,869	Statement 3 - Form 990-PF, Part I, Line 18 - Taxes	Total	\$ 276 5,000 637	\$ 5,913
Statement	Description	TAX PREPARATION 990-PF/NH ACCOUNTING AND BOOKKEEPING	Total	Statement 2 - For	Description	MERRILL LYNCH INVESTMENT FEES	Total	State	Description	FORM 990-PF 6/30/17 FORM 990-PF 6/30/18 FOREIGN DIVIDEND TAX	Total

4-6

## Federal Statements

•	Charitable Purpose	v.	\odots		Fair Market Value	\$ 5,983,309		Fair Market Value	\$ 97,021 3,528,827 \$ 3,625,848
enses	Adjusted Net	v <sub>r</sub>	\o_\ \_\_\	Investments	Basis of Valuation	Cost	tments	Basis of Valuation	Cost
Line 23 - Other Exp	Net Investment	50 4 7 5 6	174	0b - Corporate Stock	End of Year	\$ 3,133,080 \$ 3,133,080	Line 13 - Other Inves	End of Year	\$ 97,000 3,636,949 \$ 3,733,949
ant 4 - Form 990-PF, Part I, Line 23 - Other Expenses	Total	\$ 50 75 49	\$ 174 \$	orm 990-PF, Part II, Line 10b - Corporate Stock Investments	Beginning of Year	\$ 3,325,349 \$ 3,325,349	it 6 - Form 990-PF, Part II, Line 13 - Other Investments	Beginning of Year	\$ 97,000 3,479,394 \$ 3,576,394
Statement	Description	Expenses PUBLICATION FEE & MISC ANNUAL REPORT CERT. NH POSTAGE	Total	Statement 5 - Form	Description	CORPORATE STOCK Total	Statement 6	Description	CERTIFICATES OF DEPOSIT MUTUAL FUNDS Total

### BENZ4871 DORIS L. BENZ TRUST

04-6504871

### **Federal Statements**

FYE: 6/30/2018

Name of Manager	Amount
NONE	\$
Total	\$0
Form 990-PF, Part XV, Line 1b - Manage	ers Who Own 10% or More Stock
Name of Manager	Amount
NONE	\$
Total	\$0
Statement 7 - Form 990-PF, Part XV, Line 2a - Na	ame, Address and Email for Applications
Description	
Description THE DORIS L. BENZ TRUST 603-303-1128 135 LOOP ROAD OTISFIELD ME 04270 r.weyland@icloud.com	
THE DORIS L. BENZ TRUST 603-303-1128 135 LOOP ROAD OTISFIELD ME 04270	oplication Format and Required Contents
THE DORIS L. BENZ TRUST 603-303-1128 135 LOOP ROAD OTISFIELD ME 04270 r.weyland@icloud.com	oplication Format and Required Contents
THE DORIS L. BENZ TRUST 603-303-1128 135 LOOP ROAD OTISFIELD ME 04270 r.weyland@icloud.com  Statement 8 - Form 990-PF, Part XV, Line 2b - Ap	
THE DORIS L. BENZ TRUST 603-303-1128  135 LOOP ROAD OTISFIELD ME 04270 r.weyland@icloud.com  Statement 8 - Form 990-PF, Part XV, Line 2b - Ap  Description  WRITE TO PART XV 2A, INCLUDE IRS DETERMINATION	ON LETTER AS A
THE DORIS L. BENZ TRUST 603-303-1128 135 LOOP ROAD OTISFIELD ME 04270 r.weyland@icloud.com  Statement 8 - Form 990-PF, Part XV, Line 2b - Ap  Description  WRITE TO PART XV 2A, INCLUDE IRS DETERMINATION	ON LETTER AS A

### Statement 9 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

### Description

RESTRICTIONS APPLY, ONE HALF OF SAID INCOME SHALL BE USED FOR SCHOLARSHIPS FOR STUDENTS GRADUATING FROM INTERLAKES REGIONAL HIGH SCHOOL, SANDWICH, NH. STUDENTS GRADUATING FROM ANY HIGH SCHOOL LOCATED IN CARROLL COUNTY NEW HAMPSHIRE. THE REMAINING ONE HALF OF INCOME SHALL BE DISTRIBUTED ANNUALLY TO SUCH EXEMPT ORGANIZATIONS 501(c) (3) LOCATED IN MASSACHUSETTS OR NEW HAMPSHIRE.

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BENZ4871 DORI 04-6504871 FYE: 6/30/2018

## **Federal Statements**

# Statement 10 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

Status   Status	Ac Blationship  268 MAST RO 450 BROOKLI ONE POSITIV 57 MONROE S 27 DURRELL 35 PARK ST. 2 PILLSBURY 959 ISLINGT 450 BROOKLI 450 BROOKLI 376 HALE ST 39 CENTRAL 740 MOUNT I P.O. BOX 27 P.O. BOX 27 P.O. BOX 16	I	Purpose Amount	501(C)(3 CHARITABLE DISTRIBUTION 10,000		CHARITABLE DISTRIBUTION 10,000	CHARITABLE DISTRIBUTION 10,000		CHARITABLE DISTRIBUTION 10,000	CHARITABLE DISTRIBUTION 5,000	CHARITABLE DISTRIBUTION 5,000		CHARITABLE DISTRIBUTION 5,000	CHARITABLE DISTRIBUTION 5.000		CHARITABLE DISTRIBUTION 5,000	CHARITABLE DISTRIBUTION 5,000		CHARITABLE DISTRIBUTION 10,000		CHARITABLE DISTRIBUTION 5,000	MOTIMITATION OF A TAKENTAKIN		CHARITABLE DISTRIBUTION 15,000	CHARITABLE DISTRIBUTION 5,000			CHARLISTEE DISTRIBUTION	
	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	T ROAD IRC OKLINE A IRC IRC	, , , , <u>,</u> ,	ROOKLINE AVE. IRC 501(C)(3 CHARITABL) DSITIVE PLACE	(C)		(C) (3	STREET	IRC 501(C)(3	IRC 501(C)(3 CHARITABLE	IRC 501(C) (3 CHARITABLE	SBURY ST., 6TH FLR	IRC 501(C)(3 CHARITABL STINGTON ST #3	IRC 501(C) (3 CHARITABLE	ROOKLINE AVE.	501(C)(3	IRC 501(C)(3	STREET	IRC 501(C)(3	ST.	IRC 501(C)(3	ISKEAL ROAD	.RC 301 (C) (3	RC 501 (C) (3	(C) (3	EASANT STREET	IRC 501(C)(3 CHAKLTABLE DISTRIBUTION HOLTON STREET		IRC 501(C)(3 CHARITABLE DISTRIBUTION

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BENZ4871 DORI: 04-6504871 FYE: 6/30/2018

## Federal Statements

10 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the	Year (continued)
Statement 10 - Form 9	

Name		Addi	Address	1		
Address	Relations	ship	Status		Purpose	Amount
NEW HAMPSHIRE SPCA	P.O.	BOX 196				
STRATHAM NH 03885	NONE	IR	C 501(C)(3	CHARITABLE	IRC 501(C)(3 CHARITABLE DISTRIBUTION	10,000
BEVERLY SCHOOL FOR THE DEAF	6 BC	6 ECHO AVENUE				
BEVERLY MA 01915	NONE	IR	C 501(C)(3	CHARITABLE	IRC 501(C)(3 CHARITABLE DISTRIBUTION	7,500
RED SOX FOUNDATION	4 YA	4 YAWKEY WAY				
BOSTON MA 02215 ,	NONE	IR	C 501(C)(3	CHARITABLE	IRC 501(C)(3 CHARITABLE DISTRIBUTION	10,000
SANDWICH MEALS ON WHEELS	P.O.	BOX 453				
WOLFEBORO NH 03894	NONE	IR	IRC 501(C)(3	CHARITABLE	CHARITABLE DISTRIBUTION	10,000
MOUNT PROSPECT ACADEMY INC	212	COOLIDGE AVE.	AVE.			
MANCHESTER NH 03102	NONE	IR	C 501(C)(3	CHARITABLE	IRC 501(C)(3 CHARITABLE DISTRIBUTION	10,000
MISSION OF DEEDS INC	9 CH	6 CHAPLIN AVENUE	INUE			
READING MA 01867	NONE	IR	C 501(C)(3	CHARITABLE	IRC 501(C)(3 CHARITABLE DISTRIBUTION	5,000
LYNN SHORE REST HOME NP INC	426	BROADWAY				
LYNN MA 01904	NONE	IR	C 501(C)(3	CHARITABLE	IRC 501(C)(3 CHARITABLE DISTRIBUTION	10,000
TOUGH WARRIOR PRINCESS	80 M	MONROE STREET	REET			
AMESBURY MA 01913	NONE	IR	C 501(C)(3	CHARITABLE	IRC 501(C)(3 CHARITABLE DISTRIBUTION	5,000
THE JAMIE FUND	P.O.	BOX 256				
MANSFIELD MA 02048 NONE		IR	C 501(C)(3	CHARITABLE	IRC 501(C)(3 CHARITABLE DISTRIBUTION	7,500
VERSITY OF NEW HAMPSHIRE FO		ELLIOTT ALUMNI CENTER	II CENTER			
DURHAM NH 03824	NONE	IRC	C 501(C)(3	CHARITABLE	DISTRIBUTION	10,000
Total						422,992

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