Form 990-P*

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

Dep	artme	nt of the Treasury						n this form as tructions and			1000	20	10
		ndar year 2018 or tax		JUL		2018	101 1113	, and e		JUN 30	, 2019	Open to Public	nspection
_		f foundation	year ocgining	0011		2010		, , , , , ,		A Employer			
		H FOUNDAT	ON. TNC.							Cilipioyer		, maniper	
		DEBRA NAS								02-0	406835	<u>,</u>	
		and street (or P O box nur	***	d to street	addres	s)			Room/suite	B Telephone			
I	·.c	BOX 390									882-27	02	
		town, state or province	country, and ZIP or	foreian p	ostal c	ode						pending, check here	\rightarrow
		•	3061								-, -, -, -, -, -, -, -, -, -, -, -, -, -	3 1	
		k all that apply:	Initial return			Initial retu	rn of a f	ormer public o	harity	D 1 Foreign	organizations	s, check here	ightharpoons
		,,,,	Final return			Amended		·	•		•		
		1	Address change			Name cha	nge			2. Foreign of check her	rganizations me re and attach co	eeting the 85% test, emputation	, >
H	Chec	k type of organization:	X Section 501	(c)(3) ex	empt	private found	ation		110	1		itus was terminat	
] s	ection 4947(a)(1) none	exempt charitable trus	t 🗀	Other	taxable privat	e found	ation	09)(A), check here	
1 F	aır m	arket value of all asset	s at end of year J	Account	ng me	thod: X	Cash	Accr	ual	F If the found	dation is in a	60-month termin	ration
(1	rom	Part II, col. (c), line 16				pecify)				1)(B), check here	
_	<u>\$</u>		767,079. (Par	t I, colun	nn (d)	must be on c	ash bas	is)					
P	a <u>rt l</u>	Analysis of Revenu	e and Expenses columns (b), (c), and (d) r	nav not		a) Revenue a			vestment	(c) Adju		(d) Disburse for charitable p	
_	т	necessarily equal the a	mounts in column (a))	nay not	e:	xpenses per t	ooks	ince	ome	inco		(cash basis	
	1	Contributions, gifts,	grants, etc., received						• •				<u> </u>
-	2	,	ndation is not required to attach	Sch B	ļ								
	3	Interest on savings and to cash investments	temporary -		L		59.		<u>59.</u>			STATEME	
	4	Dividends and interes	st from securities		ļ 	15,4	<u>117.</u>	1	5,417.	1	<u>5,417.</u>	STATEME	<u>NT 2:</u>
Revenue	5a	Gross rents									_		
	b	Net rental income or (loss	s)										
	6a	Net gain or (loss) from sa				12,6	<u> </u>		<u> </u>	, ,		ECEIV	FR
	b	Gross sales price for all assets on line 6a	112,1	<u>69.</u>									=
ě	7	Capital gain net income (• •		<u> </u>			1	2,633.			incressor	10 O
	8	Net short-term capita	•					<u> </u>		<u>N/</u>	A 8	OCT 15 20	RS-050
	9	Income modifications Gross sales less returns	S I								-		
	10a											GDEN,	UT-
	1	Cross profit or (less)											
	11	Gross profit or (loss) Other income										 	
	12	Total Add lines 1 thi	rough 11			28,1	109	2	8,109.	1	5,476.	 	
	13	Compensation of officers					0.	<u> </u>	0,100.		0.		0.
	14	Other employee salar						 				 	
	1	Pension plans, emplo	•					<u> </u>					
es	16a	Legal fees	y oo bonomo										
ens	Ь	Accounting fees	STMT	3			350.		0.		0.		0.
Expenses	C	Other professional fe											
Ş.	17	Interest											
Operating and Administrative	18	Taxes	STMT	4		2,1	62.		<u></u>		0.		0.
ııst	19	Depreciation and dep											
Ē	20	Occupancy											
Ad	21	Travel, conferences,	and meetings	į									
and	22	Printing and publicati	ions	[
ğ	23	Other expenses	STMT	5		8,6	06.		0.		0.		0.
at≣	24	Total operating and	administrative										
be	ļ	expenses Add lines	13 through 23			11,6	18.		0.		0.		0.
0	25	Contributions, gifts, g		ļ		38,6	<u>50.</u>					38	<u>,650.</u>
	26	Total expenses and	disbursements	}			_						_
		Add lines 24 and 25				50,2	268.	ļ	0.		0.	38	<u>,650.</u>
	a	Excess ob revenue over e	xpenses and disbursemer	nts		<22,1	<u>.59.</u>				_		
	b	Net investment incor	ne (if negative enter -0-)					2	8,109.			<u></u>	
	c	Adjusted net income	(if negative enter -0-)							1	<u>5,476.</u>		

823501 12-11-18 LHA For Paperwork Reduction Act Notice, see instructions

For	m 99)406835 Page 2			
a	art	Balance Sheets Attached schedules and amounts in the description column should be for end of year amounts only	Beginning of year	End of	
	art	column should be for end of year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	8,483.	6,888.	6,888.
	2	Savings and temporary cash investments	59,157.	59,216.	59,216.
	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			
		Less: allowance for doubtful accounts			
sts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
⋖	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock STMT 6	692,977.	700,975.	700,975.
	C	Investments - corporate bonds	ļ.,		
	11	Investments - land, buildings, and equipment basis	, , , , ,		
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other	- 2	Temperature to the second	1
	14	·	一一一	4	
		Less accumulated depreciation			<u> </u>
	15	Other assets (describe)			.
	16	Total assets (to be completed by all filers - see the	760 617	ECE 050	767 070
_	<u> </u>	instructions. Also, see page 1, item I)	760,617.	767,079.	767,079.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
Liabilrties	20	Loans from officers, directors, trustees, and other disqualified persons			
Ë	21	Mortgages and other notes payable		_ - -	
_	22	Other liabilities (describe)			
		Total Kishikking (add lings 17 through 20)	0.	0.	
_	23	Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26, and lines 30 and 31			
es	24	Unrestricted			
anc	25	Temporarily restricted			
3al	26	Permanently restricted			
Assets or Fund Balances	-"	Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31			
ō	27	Capital stock, trust principal, or current funds	415,950.	415,950.	
ets	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
Ass	29	Retained earnings, accumulated income, endowment, or other funds	344,667.	351,129.	
Net	30	Total net assets or fund balances	760,617.	767,079.	
2					
	31	Total liabilities and net assets/fund balances	760,617.	767,079.	
			Ralances		
<u> </u>	aπ	Analysis of Changes in Net Assets or Fund E			
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line			
		st agree with end-of-year figure reported on prior year's return)		1	760,617.
2	Ente	r amount from Part I, line 27a		2	<22,159.>
3	Othe	r increases not included in line 2 (itemize)	E TO ASC #820	3	28,621.
4	Add	lines 1, 2, and 3		4	767,079.
		eases not included in line 2 (itemize)		5	0.
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30	6	767,079.
					Form 990-PF (2018)

Fo	rm 990-PF (2018) C/O	DEB:	RA NASH						0	2 - 040	<u>6835</u>	Page 3
P	Part IV Capital Gains	and Lo	sses for Tax on In	vestmen	t Income							
			s) of property sold (for examor common stock, 200 sh		ate,	(b) i	How ac - Purcl - Dona	quired hase ation	(c) Date (mo , c	acquired day, yr.)	(d) Dat (mo., da	
1a	SEE SCHEDULE U	PLOA:	DED WITH RET	URN				P		1/18	06/3	0/19
_b	SEE SCHEDULE U	PLOA:	DED WITH RET	URN		<u> </u>		P	07/0	1/18	06/3	0/19
			·····									
d			 			ļ						
<u>e</u>						Щ,						<u> </u>
_	(e) Gross sales price	(f)	Depreciation allowed (or allowable)		st or other basis expense of sale				(h) Gain or (loss) ((e) plus (f) minus (g))			
_a					2,16						2	<u>,557.</u>
<u>b</u>	107,445.				97,36	9.					10	,076.
<u>d</u>												
e	Complete only for assets showin		anlumn (h) and award by	the foundation	2 22 12/21/60				. 0 10			
	Complete only for assets showing		_ _		cess of col. (i)			() col) Gains (C . (k). but i	Col (h) gain not less thar	minus 1 -0-) or	
	(i) FMV as of 12/31/69	,	(j) Adjusted basis as of 12/31/69		col. (j), if any					(from col. (
а								·			2	,557.
_ <u>=</u>											10	,076.
C				-								
d												
е												
2	Capital gain net income or (net ca	pital loss)	$\begin{cases} If gain, also enter \\ If (loss), enter -0- \end{cases}$	in Part I, line in Part I, line	7 7	}	2	_			12	,633.
3	Net short-term capital gain or (los	s) as defi	•									
	If gain, also enter in Part I, line 8,			- (-)-		}						
_	If (loss), enter -0- in Part I, line 8		10.40/) (<u> </u>			3				2	<u>.557.</u>
	art V Qualification U							ient inc	ome			
(Fo	r optional use by domestic private	foundate	ons subject to the section 4	1940(a) tax on	i net investment in	come	e.)					
lf s	ection 4940(d)(2) applies, leave th	ns part bl	ank.									
Wa	s the foundation liable for the sect	ion 4942	tax on the distributable am	ount of any v	ear in the base oer	odo					Yes	X No
	es," the foundation doesn't qualif				-							
1	Enter the appropriate amount in e	ach colui	nn for each year; see the ir	structions be	fore making any e	ntries	5.					
•	(a) Base period years		(b)			(c)		_		Distrib	(d) ution ratio	
(Calendar year (or tax year beginnir	ng in)	Adjusted qualifying dis		Net value of no	nchai				(col (b) div	ided by col.	
	2017			6,618.				<u>9,193</u>				48233
	2016			4,910.	-			6,974				51568
	2015			<u>5,369.</u>				9,725				54437
	2014			9,325.				$\frac{3,101}{0,140}$				$\frac{42310}{43201}$
	2013	1		8,700.			00	9,140	•		. 0	<u>42891</u>
2	Total of line 1, column (d)								2		. 2	39439
	Average distribution ratio for the 5	-year bas	se period - divide the total c	on line 2 by 5.0	O, or by the numbe	er of y	/ears					
	the foundation has been in exister			•	, ,	•			3		.0	47888
4	Enter the net value of noncharitable	le-use ass	sets for 2018 from Part X, I	ine 5					4		731	<u>,372.</u>
5	Multiply line 4 by line 3								5		<u>35</u>	<u>,024.</u>
									}			
6	Enter 1% of net investment incom	e (1% of	Part I, line 27b)						6			281.
,	Add 1 5 - 10								_		ם ה	205
,	Add lines 5 and 6								7		35	<u>, 305.</u>
8	Enter qualifying distributions from	Part XII,	line 4						8		38	,650.
-	If line 8 is equal to or greater than	-		1b, and comp	lete that part using	g a 19	% tax ra	ate				
;	See the Part VI instructions											

NASH FOUNDATION, INC.					
orm 990-PF (2018) C/O DEBRA NASH	- 4040(a) 4040(b) 4040(a) or	$\frac{02-040}{4048}$	<u>6835</u>	Pa	age 4
Part VI Excise Tax Based on Investment Income (Section		4940 - See	instru	cuons	<u>s)</u>
1a Exempt operating foundations described in section 4940(d)(2), check here					
Date of ruling or determination letter. (attach copy of letter	er if necessary-see instructions)			0.0	
b Domestic foundations that meet the section 4940(e) requirements in Part V, check h	nere \(\sum \left[X] \) and enter 1%	1		28	<u> 31.</u>
of Part I, line 27b					
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations,					_
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations	only; others, enter -0-)	2			0.
3 Add lines 1 and 2		3		28	
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations	s only, others, enter -0-)	4			<u>0.</u>
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter	-0-	5		28	11.
6 Credits/Payments:					
a 2018 estimated tax payments and 2017 overpayment credited to 2018	6a 684	<u>.</u>			
b Exempt foreign organizations - tax withheld at source	6ьО	•			
c Tax paid with application for extension of time to file (Form 8868)	6c O				
d Backup withholding erroneously withheld	6d O	.]			
7 Total credits and payments Add lines 6a through 6d		7		68	34.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 222	0 is attached	8			0.
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	•	9			
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount over	roaid	10		40	3.
11 Enter the amount of line 10 to be: Credited to 2019 estimated tax	403. Refunded	11			0.
Part VII-A Statements Regarding Activities	100 1,1101211101				
1a During the lax year, did the foundation attempt to influence any national, state, or lo	cal legislation or did it participate or interver	ie in	\top	Yes	No
any political campaign?	our regionation of and it participate of interven		1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political	al nurnoses? See the instructions for the del	inition	1b		X
If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and			 "- 		
	copies of any materials published of				
distributed by the foundation in connection with the activities			1.1		х
c Did the foundation file Form 1120-POL for this year?			1c		
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed du					
(1) On the foundation. \$\(\) 0 . (2) On foundation m		<u>•</u>			
e Enter the reimbursement (if any) paid by the foundation during the year for political	expenditure tax imposed on foundation		ŀ		
managers. ► \$0.					
2 Has the foundation engaged in any activities that have not previously been reported	to the IRS?		2		<u>X</u>
If "Yes," attach a detailed description of the activities.					
3 Has the foundation made any changes, not previously reported to the IRS, in its gov		Or			
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the chang			3		<u>X</u>
4a Did the foundation have unrelated business gross income of \$1,000 or more during	the year?		4a		<u>X</u>
b If "Yes," has it filed a tax return on Form 990-T for this year?	ŧ	N/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the	he year?		5		<u>X</u>
If "Yes," attach the statement required by General Instruction T			[[
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) said	tisfied either				
 By language in the governing instrument, or 					
By state legislation that effectively amends the governing instrument so that no m	andatory directions that conflict with the sta	te law		l l	
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	s," complete Part II, col. (c), and Part XV		7	Х	
8a Enter the states to which the foundation reports or with which it is registered. See in	nstructions >				
NH					
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," attach explanation	to		86	х	
	na of section 4942(i)(3) or 4942(i)(5) for ea	lendar	1 22		
9 Is the foundation claiming status as a private operating foundation within the meaning year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Year and the second of			9		x /
year 20 18 or the tax year beginning in 20 187 See the first factions for Part XIV. If the			10		** `

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Form **990-PF** (2018)

Pa	art VII-A Statements Regarding Activities (continued)			
			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]	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? N/A	13		
	Website address ► N/A	·		
14	The books are in care of ▶ DEBRA NASH Telephone no. ▶ 603-8	82-2	702	
	Located at ► 40 TEMPLE STREET, NASHUA, NH ZIP+4 ►0	3060		
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	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank,		Yes	\vdash
	securities, or other financial account in a foreign country?	16		<u>X</u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	-		
	foreign country			<u> </u>
Pa	rt 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	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	1		
	a disqualified person?	1		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			ļ
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No	-)
	(5) Transfer any income or assets to a disqualified person (or make any of either available	i		
	for the benefit or use of a disqualified person)? Yes 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) Yes X No	J		
D)	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			
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 2018?	1.		x
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	1c		
2	defined in section 4942(j)(3) or 4942(j)(5))	ŀ		
a	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning]
-	before 2018? Yes X No			
	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 all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	>			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	-		
	during the year?			
þ	If "Yes," did it have excess business holdings in 2018 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 2018) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u>X</u>
þ	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 2018?	4b		X
	F	orm 990)-PF	(2018)

Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (continu	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 (section	1 4945(e))?	Ye	s X No				
(2) Influence the outcome of any specific public election (see section 4955), o		ectly,	1				
any voter registration drive?							
(3) Provide a grant to an individual for travel, study, or other similar purposes?							
(4) Provide a grant to an organization other than a charitable, etc., organization described in section							
4945(d)(4)(A)? See instructions		Ye	s X No				
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f		i		: İ		
the prevention of cruelty to children or animals?		Ye	s X No				
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unc	der the exceptions described i	n Regulations					
section 53.4945 or in a current notice regarding disaster assistance? See instru	uctions		N/A	5b			
Organizations relying on a current notice regarding disaster assistance, check t	nere						
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr					1		
expenditure responsibility for the grant?	N	[/ A	s No				
If "Yes," attach the statement required by Regulations section 53.4945-5(d).					ļ		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on						
a personal benefit contract?		Ye	s X No		. [
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		-	6b_		<u>X</u>	
If "Yes" to 6b, file Form 8870.							
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	s X No				
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b			
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	61,000,000 in remuneration o						
excess parachute payment(s) during the year?							
Part VIII Information About Officers, Directors, Trustone Paid Employees, and Contractors	ees, Foundation ivia	inagers, Higniy	/				
1 List all officers, directors, trustees, and foundation managers and t	heir compensation.						
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred		(e) Exp	enșe	
(a) Name and address hours per week devoted to position compensation hours per week devoted to position compensation compensation compensation hours per week devoted to position compensation compensation hours per week devoted to position compensation compensation hours per week devoted to position hours per week devoted to posi						(e) Expense account, other allowances	
DEBRA NASH	PRES/DIR						
67 MUSQUASH ROAD	,						
HUDSON, NH 03051	1.00	0.	0.	.		0.	
	SEC/DIR			1			
20 TRAFALGAR SQUARE, 202							
NASHUA, NH 03063	1.00	0.	0.			0.	
	DIR						
BUSH HILL ROAD				1			
HUDSON, NH 03051	1.00	0.	0.			0.	
		1010115		<u>L</u>			
2 Compensation of five highest-paid employees (other than those inc		enter "NUNE."	(d) Contributions to	Τ,	a) Fyn	ense	
(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	ad	(e) Exp ccount,	other	
	devoted to position		compensation		allowar	nces	
NONE				İ			
				-			
				 			
		-		\vdash			
				+			
				1			
Total number of other employees paid over \$50,000	<u> </u>	1	•	1		0	
Total number of other employees paid over googood			Form	990)-PF		
						,	

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Hig Paid Employees, and Contractors (continued)	jniy 	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of	service	(c) Compensation
NONE		İ
		-
		*
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	-	Expenses
1 GIRLS INC		
		5,000.
2 NASHUA CENTER FOR THE HANDICAPPED		
		2 000
WOMEN TO THE TARE WOOD TO BE		3,000.
3 HOME HEALTH AND HOSPICE		
		2,500.
4 HUMANE SOCIETY OF GREATER NASHUA		2,500.
4 HOPERICH DOCUMENT OF CREMITER AMERICA		
		2,500.
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1 N/A		
		 -
2		
All other program-related investments. See instructions.	-	
3		
<u> </u>		
Total, Add lines 1 through 3	<u> </u>	0.
		Form 990-PF (2018

Page 8

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a		1a	0.
	Average of monthly cash balances	1b	742,510.
	Fair market value of all other assets	1c	<u>, , - , -, -, -, -, -, -, -, -, -, -,</u>
	Total (add lines 1a, b, and c)	1d	742,510.
	Reduction claimed for blockage or other factors reported on lines 1a and		
Ī	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	742,510.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	11,138.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	731,372.
6	Minimum investment return. Enter 5% of line 5	6	36,569.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations ar	id certain	
_	foreign organizations, check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	36,569.
2a	Tax on investment income for 2018 from Part VI, line 5		
b	Income tax for 2018. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	281.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	36,288.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	36,288.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	36,288.
P	art XII Qualifying Distributions (see instructions)	_I	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	38,650.
þ	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	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	38,650.
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	281.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	38,369.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for	the section

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4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI,				
line 7				36,288.
2 Undistributed income, if any as of the end of 2018				
a Enter amount for 2017 only			0.	
b Total for prior years:				
,		0.		
3 Excess distributions carryover, if any, to 2018:				
a From 2013				
b From 2014			!	
c From 2015				
d From 2016 348.]			
e From 2017 22.				
f Total of lines 3a through e	370.			
4 Qualifying distributions for 2018 from	<u> </u>			
Part XII, line 4: ► \$ 38,650.				
a Applied to 2017, but not more than line 2a	·		0.	·•••
b Applied to undistributed income of prior	.T.;		;	,,
years (Election required - see instructions)	gar and gar garantee gar	0.	عالم ب نه	4
c Treated as distributions out of corpus		,	****	
(Election required - see instructions)	0.1	t ·:	:	. 3
d Applied to 2018 distributable amount	and at			36,288.
e Remaining amount distributed out of corpus	2,362.			
5 Excess distributions carryover applied to 2018	0.		•	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 31, 4c, and 4e Subtract line 5	2,732.			
b Prior years' undistributed income. Subtract	277321		·	
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2017 Subtract line		0.		
4a from line 2a Taxable amount - see instr.			0.	
f Undistributed income for 2018 Subtract			<u> </u>	
lines 4d and 5 from line 1. This amount must		ļ		
be distributed in 2019				0.
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 2013	<u>~.</u>			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2019		-		
Subtract lines 7 and 8 from line 6a	2,732.			
IO Analysis of line 9:	2,,52.			
a Excess from 2014				
b Excess from 2015				
c Excess from 2016 348.				
d Excess from 2017 22.				
e Excess from 2018 2, 362.				
				5 - 000 DE (0040)

NASH FOUNDATION, INC. 02-0406835 Page 10 Form 990-PF (2018) C/O DEBRA NASH Part XIV Private Operating Foundations (see instructions and Part VII A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling 4942(j)(3) or 4942(4)(5) b Check box to indicate whether the foundation is a private operating foundation described in section Prior 3 years Tax year 2 a Enter the lesser of the adjusted net (b) 2017 (c) 2016 (d) 2015 (e) Total (a) 2018 income from Part I or the minimum investment return from Part X for each year listed **b** 85% of line 2a c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets (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 c "Support" alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization (4) Gross investment income Part XV | Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) NONE b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. NONE Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: __ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number or email address of the person to whom applications should be addressed DEBRA NASH. 603-882-2702 40 TEMPLE STREET, NASHUA, NH 03060 b The form in which applications should be submitted and information and materials they should include WRITTEN REQUESTS c Any submission deadlines d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors AMOUNTS GRANTED ONLY TO TAX EXEMPT ORGANIZATIONS.

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3 Grants and Contributions Paid During th Recipient	If recipient is an individual	T dyment		
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
	or substantial contributor	recipient		
a Paid during the year				
BOYS AND GIRLS CLUB	N/A	PUBLIC	GENERAL USE	
1 POSITIVE PLACE				
NASHUA NH 03060		 		2,00
CHILDRENS WISH FOUNDATION	N/A	PUBLIC	GENERAL USE	
8615 ROSWELL RD				
ATLANTA, GA 30350				25
CITY ARTS OF NASHUA	N/A	PUBLIC	GENERAL USE	
PO_BOX_1603				
NASHUA, MA 03061				50
GIRLS INC	N/A	PUBLIC	GENERAL USE	
27 BURKE ST				
NASHUA, NH 03060				5,00
GREAT AMERICAN DOWNTOWN	N/A	PUBLIC	GENERAL USE	
6 MAIN STREET				
NASHUA, NH 3064				50
	CONTINUATION SHEE	<u>ET(S)</u>		38 65
b Approved for future payment				
NONE				
		 		
			-	
Talal		<u></u>	N 01	
Total			<u> 3b</u>	m 990-PF (201

Form 990-PF (2018) C/O DEBRA NASH	•			02-0)406835 Page 12
Part XVI-A Analysis of Income-Produ	icing Activitie	es			
Enter gross amounts unless otherwise indicated	Unrelated b	usiness income		by section 512, 513, or 514	(e)
•	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion code	Amount	function income
a					
b					
C					
d	1 1				
e	1				
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					59
4 Dividends and interest from securities		<u> </u>			15,417
5 Net rental income or (loss) from real estate:					-
a Debt-financed property					<u> </u>
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					12,633
9 Net income or (loss) from special events			-		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b		-			
c	1				
d					
e					
12 Subtotal Add columns (b), (d), and (e)		0		0.	28,109.
13 Total Add line 12, columns (b), (d), and (e)		_		13	28,109.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Accom	nlishment of I	Exempt P	urposes	
Line No Explain below how each activity for which inco			-A contribute	d importantly to the accom	olishment of
the foundation's exempt purposes (other than					
3 INTEREST EARNED ON TEM					RIBUTED IN
ACCORDANCE WITH THE OR	<u>GANIZATIO</u>	N'S GOVER	NING I	NSTRUMENT.	
					
	···				
		<u> </u>			

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Dort VVII		CEDKA NASH	17		02-040			
Part XVII	Information Re Exempt Organ	egarding Transfers to a	and Transactions a	and Relationsi	nips With Noncha	ritable		
1 Did the or		rectly engage in any of the followi	ing with any other organizati	on described in sect	uon 501/c)	Yes No		
					1011 30 1(0)	103 110		
		nizations) or in section 527, relation						
		ation to a noncharitable exempt o	rganization of.			4.(1)		
(1) Cash						1a(1) X		
(2) Other						1a(2) X		
b Other tran								
(1) Sales	of assets to a noncharital	ble exempt organization				1b(1) X		
(2) Purc	hases of assets from a no	ncharitable exempt organization				1b(2) X		
(3) Renta	al of facilities, equipment,	or other assets				1b(3) X		
(4) Reim		1b(4) X						
(5) Loans or loan guarantees								
(6) Perfo	ormance of services or me	embership or fundraising solicitati	ions			1b(6) X		
c Sharing o	if facilities, equipment, ma	uling lists, other assets, or paid er	mployees			1c X		
d If the ansi	wer to any of the above is	"Yes," complete the following sch	nedule. Column (b) should al	lways show the fair r	narket value of the goods,	other assets,		
or service	s given by the reporting fo	oundation. If the foundation recei	ved less than fair market val	ue in any transactior	or sharing arrangement,	show in		
column (d	d) the value of the goods,	other assets, or services received	l.					
(a) Line no	(b) Amount involved	(c) Name of noncharitab	le exempt organization	(d) Description	of transfers, transactions, and	sharing arrangements		
_		N/A						
		, , , , , , , , , , , , , , , , , , , ,						
	· · · · · · · · · · · · · · · · · · ·							
			·······					
	-	-	-					
				- 				
-			_ .					
				 		· ·		
								
_								
				-				
				<u> </u>				
	. <u></u>							
2a Is the four	ndation directly or indirect	tly affiliated with, or related to, on-	e or more tax-exempt organ	izations described	_			
	. , ,	n 501(c)(3)) or in section 527?			L	Yes X No		
b If "Yes," co	omplete the following sche							
	(a) Name of org	anization	(b) Type of organization		(c) Description of relations	ship		
	N/A							
	<i>,</i>							
		that I have examined this return, includi				ay the IRS discuss this		
Sign and be	elief, it is true, correct, and com	nplete Declaration of preparer (other tha	an taxpayer) is based on all inform	nation of which preparer	nas any knowledge ret	urn with the preparer own below? See instr		
Here	1(), Veralle	mush	10/11/19	PRESID		X Yes No		
Sign	nature of officer or trustee	- week	Date	Title	L			
	Print/Type preparer's na			Date	Check If PTIN			
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				self- employed			
Paid	DAVID E. T) EL C/2	10/10/19	, ,	0000857		
Preparer	Firm's name DAV		ASSOCIATES, P	PA	Firm's EIN ▶ 02-0			
Use Only	THILIS HAIRE P DAV	א א זרורו יה מיד מיד מיד	TODECINIBO, F	4.3	I IIII S LIN P UZ = U	JJ0213		
	Firm's address > 20	שבאוראם פרווא	ARE SUITE 202					
		TRAFALGAR SQUA	TUE SOTTE 202	•	Dhana 602 0	06 0005		
	INA	SHUA, NH 03063				86-8885		
					F	orm 990-PF (2018)		

	If recognised in an individual	1		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
GREATER NASHA MENTAL HEALTH	N/A	PUBLIC	GENERAL USE	
7 PROSPECT STREET				
NASHUA NH 03060				1,00
GREATER NASHUA CHAMBER OF COMMERCE -	N/A	PUBLIC	GENERAL USE	
NASHUA GOES BACK TO SCHOOL	1			
142 MAIN STREET #5				1 00
NASHUA, NH 03060				1,00
HOME HEALTH AND HOSPICE	N/A	PUBLIC	GENERAL USE	
7 EXECUTIVE DRIVE	[
MERRIMACK, NH 03054			, , , , , , , , , , , , , , , , , , , ,	2,50
HUDSON FIRE DEPT LOCAL 3154	N/A	PUBLIC	GENERAL USE	
PO_BOX_46				- 5(
HUDSON FISH AND GAME	N/A	PUBLIC	GENERAL USE	
53 PINE RD				
HUDSON, NH 03051				50
HUDSON OLD HOME DAYS 211 DERRY RD	N/A	PUBLIC	GENERAL USE	
HUDSON, NH 03051				2,00
HUMANE SOCIETY OF GREATER NASHUA	N/A	PUBLIC	GENERAL USE	
24 FERRY ROAD NASHUA NH 03064				2,50
MANCHESTER POLICE ATHLETIC LEAGUE	N/A	PUBLIC	GENERAL USE	
409 BEECH STREET				
MANCHESTER, NH 03103	-			50
MULTIPLE SCLEROSIS	N/A	PUBLIC	GENERAL USE	
ONE BEDFORD FARMS DRIVE, SUITE 105 BEDFORD, NH 03110				15
•				
NASHUA CENTER FOR THE HANDICAPPED	N/A	PUBLIC	GENERAL USE	
18 SIMON STREET				
NASHUA NH 03060 Total from continuation sheets		<u> </u>		3,00 30,40

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual. Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor PUBLIC GENERAL USE NASHUA POLICE PATROLMAN'S ASSOCIATION N/A 0 PANTHER DRIVE 250. NASHUA NJ 03062 NASHUA SENIOR CENTER PUBLIC GENERAL USE N/A 70 TEMPLE STREET 500. NASHUA NH 03060 PUBLIC GENERAL USE NASHUA SOUP KITCHEN N/A 40 CHESTNUT STEET 1,000. NASHUA NH 03061 NH CHIEFS OF POLICE N/A PUBLIC GENERAL USE 1 MUNICIPAL DRIVE 500, **DERRY NH 03038** GENERAL USE PUBLIC NH TROOPERS ASSOCIATION N/A 107 N STATE STREET 500. CONCORD NH 03301 ROTARY CLUB OF NASHUA PUBLIC GENERAL USE N/A PO BOX 75 1,000. NASHUA, NH 03061 N/A PUBLIC GENERAL USE SALVATION ARMY 1 MONTGOMERY AVE 2,000. NASHUA NH 03060 PUBLIC GENERAL USE SOUTHERN NH HEALTH N/A 8 PROSPECT STREET 1,000. NASHUA, NH 03060 PUBLIC GENERAL USE SPECIAL OLYMPICS N/A 650 ELM STREET #200 250. MANCHESTER NH 03101 ST JOSEPH HOSPITAL BREAST CARE CENTER N/A PUBLIC GENERAL USE 172 KINSLEY ST 1,000. NASHUA NH 03060 Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor ST. JOHN XXIII FOOD PANTRY N/A PUBLIC GENERAL USE 121 ALLDS ST NASHUA, NH 03060 2,500. THE FRONT DOOR AGENCY N/A PUBLIC GENERAL USE 7 CONCORD ST NASHUA, MA 03064 2,500. THE PLUS COMPANY N/A PUBLIC GENERAL, USE 19 CHESTNUT ST NASHUA, NH 03060 1,000. YMCA N/A PUBLIC GENERAL USE 24 STADIUM ST NASHUA, NH 03062 1,250. YOUTH COUNCIL N/A PUBLIC GENERAL USE 112 W. PEARL ST #2 NASHUA NH 03060 1,500. Total from continuation sheets

FORM 990-PF INTEREST	ON SAVII	NGS AND TEM	PORARY C	ASH IN	VESTMENTS	STATEMEN	т 1	
SOURCE BANK INTEREST TOTAL TO PART I, LINE 3		REVE	(A) REVENUE PER BOOKS		(B) NET INVESTMENT INCOME		(C) ADJUSTED NET INCOME	
			59.					
		59.		59.		59.		
FORM 990-PF	DIVIDENDS	S AND INTER	EST FROM	SECUR	ITIES	STATEMEN	т 2	
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REV	A) ENUE BOOKS	(B) NET INVES MENT INCC	(C ST- ADJU OME NET I	STED	
FIDELITY INVESTMENTS	15,417	•	0. 1	5,417.	15,41	.7. 15	,417.	
TO PART I, LINE 4	15,417	•	0. 1	5,417.	15,41	.7. 15	,417:	
FORM 990-PF		ACCOUNTI	NG FEES			STATEMEN	т 3	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOM	CHARI	TABLE	
ACCOUNTING FEES	-	850.		0.		0.	0.	
TO FORM 990-PF, PG 1,	LN 16B	850.	-	0.		0.	0.	
FORM 990-PF		TAXES		STATEMENT 4				
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOM		TABLE	
STATE OF NEW HAMPSHIR FOREIGN TAXES PAID EXCISE TAX	Е	75. 1,388. 699.		0. 0. 0.		0. 0. 0.	0. 0. 0.	
TO FORM 990-PF, PG 1,	LN 18	2,162.		0.		0.	0.	
	_				· · · · · · · · · · · · · · · · · · ·			

DESCRIPTION	OTHER E	XPENSES	STATEMENT 5		
	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
BANK SERVICE CHARGES INVESTMENT EXPENSE	283. 8,323.	0.	0	_	
TO FORM 990-PF, PG 1, LN 23	8,606.	0.	0	. 0.	
FORM 990-PF	CORPORAT	E STOCK	STATEMENT		
DESCRIPTION		ВО	OK VALUE	FAIR MARKET VALUE	
CORPORATE STOCK			700,975.	700,975.	
TOTAL TO FORM 990-PF, PART II, LINE 10B			700,975.	700,975.	