

EXTENDED TO MAY 15, 2017

Form **990**

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

2015
Open to Public Inspection

A For the 2015 calendar year, or tax year beginning **OCT 1, 2015** and ending **SEP 30, 2016**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization NH HISTORICAL SOCIETY	D Employer identification number 02-0233250
	Doing business as	E Telephone number 603-856-0602
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 30 PARK ST	G Gross receipts \$ 3,352,711.
	City or town, state or province, country, and ZIP or foreign postal code CONCORD, NH 03301	H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
	F Name and address of principal officer: WILLIAM H. DUNLAP SAME AS C ABOVE	H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ▶ WWW.NHHISTORY.ORG		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1823 M State of legal domicile: NH

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO EDUCATE A DIVERSE PUBLIC ABOUT THE SIGNIFICANCE OF NEW HAMPSHIRE'S PAST AND ITS RELATIONSHIP
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.
	3 Number of voting members of the governing body (Part VI, line 1a) 3 18
	4 Number of independent voting members of the governing body (Part VI, line 1b) 4 18
	5 Total number of individuals employed in calendar year 2015 (Part V, line 2a) 5 39
	6 Total number of volunteers (estimate if necessary) 6 81
	7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0.
b Net unrelated business taxable income from Form 990-T, line 34 7b 0.	
Revenue	8 Contributions and grants (Part VIII, line 1h) 1,727,463. Prior Year 397,820. Current Year
	9 Program service revenue (Part VIII, line 2g) 47,529. 480,415.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 766,328. 158,191.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 56,574. 1,110,897.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 2,597,894. 604,487.
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0.
Expenses	14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 634,330. 752,870.
	16a Professional fundraising fees (Part IX, column (A), line 11e) 0. 0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 525,911.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,359,077. 1,302,765.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 1,993,407. 2,055,635.
19 Revenue less expenses. Subtract line 18 from line 12 604,487. -944,738.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16) 21,783,455. Beginning of Current Year 21,629,214. End of Year
	21 Total liabilities (Part X, line 26) 865,010. 875,047.
	22 Net assets or fund balances. Subtract line 21 from line 20 20,918,445. 20,754,167.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer	Date
	MICHAEL R. REOPEL, TREASURER	
Type or print name and title		

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	ORESTE J. MOSCA				P00366101
Firm's name ▶ NATHAN WECHSLER & COMPANY, P.A.			Firm's EIN ▶ 02-0327524		
Firm's address ▶ 70 COMMERCIAL STREET, 4TH FLOOR			Phone no. 603-224-5357		
CONCORD, NH 03301					

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III []

1 Briefly describe the organization's mission: TO EDUCATE A DIVERSE PUBLIC ABOUT THE SIGNIFICANCE OF NEW HAMPSHIRE'S PAST AND ITS RELATIONSHIP TO OUR LIVES TODAY. TO THIS END, THE SOCIETY COLLECTS, PRESERVES, AND INTERPRETS MATERIAL PERTAINING TO NEW HAMPSHIRE HISTORY.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 591,766. including grants of \$) (Revenue \$ 21,308.) LIBRARY AND MUSEUM: THE NEW HAMPSHIRE HISTORICAL SOCIETY COLLECTS AND PRESERVES THE MOST EXTENSIVE COLLECTION OF OBJECTS, BOOKS, MANUSCRIPTS, AND IMAGES RELATED TO NEW HAMPSHIRE HISTORY THAT CAN BE FOUND ANYWHERE. THESE COLLECTIONS OFFER THE MOST COMPLETE PICTURE AVAILABLE OF THE SOCIAL, ECONOMIC, POLITICAL, AND CULTURAL HISTORY OF NEW HAMPSHIRE OVER NEARLY FOUR CENTURIES.

4b (Code:) (Expenses \$ 142,103. including grants of \$) (Revenue \$ 51,310.) EDUCATION: THE NEW HAMPSHIRE HISTORICAL SOCIETY PROVIDES A VARIETY OF LEARNING EXPERIENCES FOR CHILDREN AND ADULTS, INCLUDING SCHOOL PROGRAMS AND GUIDED TOURS OF EXHIBITIONS AT THE SOCIETY IN CONCORD, ARTIFACT-BASED TRAVELING CLASSROOM PROGRAMS, HISTORY COURSES, LECTURES, AUTHOR TALKS, AND WORKSHOPS.

4c (Code:) (Expenses \$ 517,759. including grants of \$) (Revenue \$ 12,913.) THE SOCIETY OFFERS PUBLIC RELATIONS AND MEMBER SERVICES FOR VARIOUS VISITORS AND PATRONS. OTHER PROGRAMS INCLUDE PUBLICATIONS, EXHIBITS, FACILITIES, BUILDINGS, GROUNDS, AND SECURITY. THE SOCIETY ALSO OPERATES AN ONLINE STORE, WHICH SELLS BOOKS AND GOODS RELATED TO NEW HAMPSHIRE AND ITS HISTORY.

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 1,251,628.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	X	
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	X	
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	X	
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	X	
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	X	
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

Table with columns for question number, question text, and Yes/No checkboxes. Includes sections for backup withholding, employee reporting, foreign accounts, and charitable contributions.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	18	
b	Enter the number of voting members included in line 1a, above, who are independent	18	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
10b			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
12c		X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	X	
15b		X	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		
16b			

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed **NH**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records: **ANN-MARIE MILLER - 603-856-0602**
30 PARK STREET, CONCORD, NH 03301

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JOEL J. BEDOR BOARD CHAIR	2.00	X		X				0.	0.	0.
(2) JAMES L. GARVIN VICE CHAIR	1.00	X		X				0.	0.	0.
(3) MICHAEL R. REOPEL TREASURER	1.00	X		X				0.	0.	0.
(4) KATHLEEN A. BELKO SECRETARY	1.00	X		X				0.	0.	0.
(5) Q. DAVID BOWERS TRUSTEE	1.00	X						0.	0.	0.
(6) HOWARD MANSFIELD TRUSTEE	1.00	X						0.	0.	0.
(7) MARGARET MARSHALL TRUSTEE	1.00	X						0.	0.	0.
(8) BARBARA A. PITSCH TRUSTEE (TERM ENDED 5/16)	1.00	X						0.	0.	0.
(9) PAUL C. REMUS TRUSTEE	1.00	X						0.	0.	0.
(10) DAVID B. RUEDIG TRUSTEE	1.00	X						0.	0.	0.
(11) EDWARD E. SHUMAKER TRUSTEE	1.00	X						0.	0.	0.
(12) SUSAN P. SLOAN TRUSTEE (TERM ENDED 5/16)	1.00	X						0.	0.	0.
(13) MARILYN G. SOPER TRUSTEE	1.00	X						0.	0.	0.
(14) DAVID H. SOUTER TRUSTEE	1.00	X						0.	0.	0.
(15) DAVID M. SUNDMAN TRUSTEE	1.00	X						0.	0.	0.
(16) KURT M. SWENSON TRUSTEE (TERM ENDED 5/16)	1.00	X						0.	0.	0.
(17) JOSEPH L. TAGGART TRUSTEE	1.00	X						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) WILLIAM W. UPTON TRUSTEE	1.80	X						0.	0.	0.
(19) PAMELA D. VANARSDALE TRUSTEE (TERM ENDED 5/16)	1.00	X						0.	0.	0.
(20) WILLIAM P. VEILLETTE TRUSTEE	2.50	X						0.	0.	0.
(21) BERT R. WHITEMORE TRUSTEE	1.00	X						0.	0.	0.
(22) PHILIP ZEA TRUSTEE	1.00	X						0.	0.	0.
(23) WILLIAM H. DUNLAP PRESIDENT	40.00			X				107,776.	0.	14,750.
1b Sub-total								107,776.	0.	14,750.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								107,776.	0.	14,750.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **1**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
MILESTONE ENGINEERING & CONSTRUCTION, INC. PO BOX 2279, CONCORD, NH 03302-2279	CONSTRUCTION SERVICES	306,409.
SILVERTECH, INC 196 BRIDGE STREET, MANCHESTER, NH 03104	WEBSITE DESIGN	163,088.
R & T ELECTRIC, INC., 315 SOUTH MAIN STREET, CONCORD, NH 03301-3452	ELECTRICAL SERVICES	114,328.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **3**

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b	249,747.				
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	148,073.				
	g Noncash contributions included in lines 1a-1f: \$		127,780.				
	h Total. Add lines 1a-1f		397,820.				
Program Service Revenue			Business Code				
	2 a EDUCATION PROGRAMS	611710	51,310.	51,310.			
	b MUSEUM	900099	11,243.	11,243.			
	c LIBRARY	900099	10,065.	10,065.			
	d PUBLICATIONS	511190	1,853.	1,853.			
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f		74,471.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		567,455.			567,455.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	529,195.				
		(ii) Personal					
		b Less: rental expenses	383,180.				
		c Rental income or (loss)	146,015.				
	d Net rental income or (loss)		146,015.			146,015.	
	7 a Gross amount from sales of assets other than inventory	(i) Securities	1,767,994.				
		(ii) Other					
		b Less: cost or other basis and sales expenses	1,855,034.				
		c Gain or (loss)	-87,040.				
	d Net gain or (loss)		-87,040.			-87,040.	
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
		b Less: direct expenses					
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	a	8,135.					
	b Less: direct expenses	0.					
	c Net income or (loss) from gaming activities		8,135.	8,135.			
10 a Gross sales of inventory, less returns and allowances	a	6,525.					
	b Less: cost of goods sold	3,600.					
	c Net income or (loss) from sales of inventory		2,925.	2,925.			
Miscellaneous Revenue		Business Code					
11 a MISC. ADMINISTRATIVE	900099	1,116.				1,116.	
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d		1,116.				
12 Total revenue. See instructions.		1,110,897.	85,531.	0.	627,546.		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	132,519.	30,479.	22,528.	79,512.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	519,895.	353,771.	49,716.	116,408.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	42,176.	20,090.	21,986.	100.
10 Payroll taxes	58,280.	28,344.	21,364.	8,572.
11 Fees for services (non-employees):				
a Management				
b Legal	1,629.		1,629.	
c Accounting	25,012.		25,012.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	56,828.		56,828.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	145,027.	135,276.	4,558.	5,193.
12 Advertising and promotion				
13 Office expenses	37,947.	16,437.	3,181.	18,329.
14 Information technology	38,722.	1,783.	28,727.	8,212.
15 Royalties				
16 Occupancy	82,805.	71,484.	8,803.	2,518.
17 Travel	3,655.	3,416.	239.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	9,319.	3,931.		5,388.
20 Interest	8,169.		8,169.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	370,306.	370,306.		
23 Insurance	31,060.	19,676.	11,384.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a CAPITAL CAMPAIGN	248,212.			248,212.
b EXHIBITS, ACQ. & CONSERV.	140,949.	140,949.		
c PHOTOGRAPHY & PRINTING	45,810.	25,915.	1,118.	18,777.
d PUBLICATIONS	22,057.	22,057.		
e All other expenses	35,258.	7,714.	12,854.	14,690.
25 Total functional expenses. Add lines 1 through 24e	2,055,635.	1,251,628.	278,096.	525,911.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year	
Assets	1	Cash - non-interest-bearing	153,776.	1	53,573.
	2	Savings and temporary cash investments	1,193,434.	2	523,939.
	3	Pledges and grants receivable, net	664,093.	3	158,081.
	4	Accounts receivable, net	5,110.	4	5,714.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	27,083.	8	29,095.
	9	Prepaid expenses and deferred charges	89,878.	9	116,903.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 10,211,077.		
	b	Less: accumulated depreciation	10b 4,737,244.		
	10c		5,168,082.	10c	5,473,833.
	11	Investments - publicly traded securities	10,816,066.	11	11,674,469.
	12	Investments - other securities. See Part IV, line 11	2,730,084.	12	2,595,871.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
15	Other assets. See Part IV, line 11	935,849.	15	997,736.	
16	Total assets. Add lines 1 through 15 (must equal line 34)	21,783,455.	16	21,629,214.	
Liabilities	17	Accounts payable and accrued expenses	159,922.	17	113,656.
	18	Grants payable		18	
	19	Deferred revenue	93,900.	19	3,796.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	249,500.	22	395,359.
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	361,688.	25	362,236.
	26	Total liabilities. Add lines 17 through 25	865,010.	26	875,047.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	11,325,007.	27	11,678,648.
	28	Temporarily restricted net assets	3,443,958.	28	2,899,940.
	29	Permanently restricted net assets	6,149,480.	29	6,175,579.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	20,918,445.	33	20,754,167.	
34	Total liabilities and net assets/fund balances	21,783,455.	34	21,629,214.	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,110,897.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,055,635.
3	Revenue less expenses. Subtract line 2 from line 1	3	-944,738.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	20,918,445.
5	Net unrealized gains (losses) on investments	5	777,402.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	3,057.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	20,754,166.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	X
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	X
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	2c	X
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	

Form 990 (2015)

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1480127.	1903160.	3020856.	1727463.	398,906.	8530512.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	1480127.	1903160.	3020856.	1727463.	398,906.	8530512.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						8530512.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 Amounts from line 4	1480127.	1903160.	3020856.	1727463.	398,906.	8530512.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1115847.	1092701.	1346411.	1061075.	1096650.	5712684.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	11,932.	7,346.	5,077.			24,355.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	1,883.	875.	1,220.	35,699.	1,116.	40,793.
11 Total support. Add lines 7 through 10						14308344.
12 Gross receipts from related activities, etc. (see instructions)					12	596,956.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14	59.62 %
15 Public support percentage from 2014 Schedule A, Part II, line 14	15	60.11 %
16a 33 1/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
b 33 1/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
17a 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
b 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>	

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶

Section C. Computation of Public Support Percentage

15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2014 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2015. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶

b 33 1/3% support tests - 2014. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶

Part IV Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.	Yes	No
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	

7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2015:			
a			
b			
c			
d From 2013			
e From 2014			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2015 from Section D, line 7:			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 Excess distributions carryover to 2016. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c Excess from 2013			
d Excess from 2014			
e Excess from 2015			

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Open to Public Inspection

Name of the organization **NH HISTORICAL SOCIETY** Employer identification number **02-0233250**

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	12,566,926.	8,620,390.	7,456,650.	6,630,767.	5,746,967.
b Contributions	17,593.	5,427,489.	861,412.	412,018.	101,894.
c Net investment earnings, gains, and losses	1,048,850.	-317,753.	718,844.	907,715.	1,112,374.
d Grants or scholarships					
e Other expenditures for facilities and programs	633,258.	1,130,596.	389,546.	479,261.	307,888.
f Administrative expenses	43,071.	32,604.	26,970.	14,589.	22,580.
g End of year balance	12,957,040.	12,566,926.	8,620,390.	7,456,650.	6,630,767.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment 49.88 %
- b Permanent endowment 34.60 %
- c Temporarily restricted endowment 15.53 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		200,000.		200,000.
b Buildings		8,052,241.	3,357,689.	4,694,552.
c Leasehold improvements				
d Equipment		1,349,570.	923,978.	425,592.
e Other		609,266.	455,577.	153,689.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				5,473,833.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) PRIVATE EQUITIES	466,275.	END-OF-YEAR MARKET VALUE
(B) FIXED INCOME BONDS	436,895.	END-OF-YEAR MARKET VALUE
(C) BENEFICIAL INTERESTS IN		
(D) TRUSTS	1,692,701.	END-OF-YEAR MARKET VALUE
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	2,595,871.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ANNUITY PAYABLE	150,198.
(3) CHARITABLE REMAINDER UNITRUST	
(4) PAYABLE	212,038.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	362,236.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	2,325,647.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	a Net unrealized gains (losses) on investments	2a 777,402.		
	b Donated services and use of facilities	2b 47,511.		
	c Recoveries of prior year grants	2c		
	d Other (Describe in Part XIII.)	2d 389,837.		
	e Add lines 2a through 2d		2e	1,214,750.
3	Subtract line 2e from line 1		3	1,110,897.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	b Other (Describe in Part XIII.)	4b		
	c Add lines 4a and 4b		4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	1,110,897.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	2,489,925.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	a Donated services and use of facilities	2a 47,511.		
	b Prior year adjustments	2b		
	c Other losses	2c		
	d Other (Describe in Part XIII.)	2d 386,780.		
	e Add lines 2a through 2d		2e	434,291.
3	Subtract line 2e from line 1		3	2,055,634.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	b Other (Describe in Part XIII.)	4b		
	c Add lines 4a and 4b		4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	2,055,634.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART III, LINE 1A:

IN ACCORDANCE WITH SFAS 116, THE SOCIETY HAS ELECTED NOT TO REPORT COLLECTION ITEMS IN ITS STATEMENT OF FINANCIAL POSITION OR STATEMENT OF ACTIVITIES. COLLECTION ITEMS ACQUIRED EITHER THROUGH PURCHASE OR DONATION ARE NOT CAPITALIZED. PURCHASES OF COLLECTION ITEMS ARE RECORDED AS A DECREASE IN UNRESTRICTED NET ASSETS IF PURCHASED WITH UNRESTRICTED ASSETS AND AS DECREASES IN TEMPORARILY RESTRICTED OR PERMANENTLY RESTRICTED NET ASSETS IF PURCHASED WITH DONOR-RESTRICTED ASSETS. CONTRIBUTIONS OF COLLECTION ITEMS ARE NOT RECOGNIZED IN THE STATEMENT OF ACTIVITIES. THE SOCIETY HAS A POLICY THAT REQUIRES NET PROCEEDS REALIZED FROM THE SALE OR TRANSFER OF DEACCESSIONED OBJECTS WILL BE USED ONLY FOR ACQUISITION AND CONSERVATION OF COLLECTIONS.

Part XIII Supplemental Information (continued)

THE SOCIETY'S COLLECTIONS INCLUDE BOOKS, MANUSCRIPTS, PHOTOGRAPHS, RESEARCH MATERIALS AND OBJECTS RELATING TO THE HISTORY OF NEW HAMPSHIRE. THESE COLLECTIONS HAVE BEEN ACQUIRED BY DONATION, BEQUESTS AND PURCHASES. COLLECTION ITEMS ARE ACQUIRED OR CONSERVED BASED ON THE SOCIETY'S LONG-RANGE PLANS FOR COLLECTIONS DEVELOPMENT.

COLLECTIONS ARE MADE AVAILABLE FOR SCHOLARLY USE BY THE PUBLIC AND MAINTAINED UNDER APPROPRIATE SECURITY AND PRESERVATION CONDITIONS.

PART III, LINE 4:

THE SOCIETY'S COLLECTIONS INCLUDE BOOKS, MANUSCRIPTS, PHOTOGRAPHS, RESEARCH MATERIALS AND OBJECTS RELATING TO THE HISTORY OF NEW HAMPSHIRE. THESE COLLECTIONS HAVE BEEN ACQUIRED BY DONATION, BEQUESTS AND PURCHASES. COLLECTION ITEMS ARE ACQUIRED OR CONSERVED BASED ON THE SOCIETY'S LONG-RANGE PLANS FOR COLLECTIONS DEVELOPMENT.

COLLECTIONS ARE MADE AVAILABLE FOR SCHOLARLY USE BY THE PUBLIC AND MAINTAINED UNDER APPROPRIATE SECURITY AND PRESERVATION CONDITIONS.

PART V, LINE 4:

THE SOCIETY HAS ADOPTED INVESTMENT AND SPENDING POLICIES FOR ENDOWMENT ASSETS THAT ATTEMPT TO PROVIDE A PREDICTABLE STREAM OF FUNDING TO PROGRAMS SUPPORTED BY ITS ENDOWMENT FUNDS WHILE ALSO MAINTAINING THE PURCHASING POWER OF THOSE ENDOWMENT ASSETS OVER THE LONG-TERM.

PART X, LINE 2:

THE SOCIETY IS A NOT-FOR-PROFIT ORGANIZATION EXEMPT UNDER SECTION

Part XIII Supplemental Information *(continued)*

501(C)(3) OF THE INTERNAL REVENUE CODE AND IS CLASSIFIED AS OTHER THAN A PRIVATE FOUNDATION; HOWEVER, CERTAIN UNRELATED BUSINESS INCOME IS SUBJECT TO FEDERAL TAXATION. FOR THE YEAR ENDED SEPTEMBER 30, 2016, THERE WAS NO LIABILITY FOR A TAX ON UNRELATED BUSINESS INCOME.

THE SOCIETY HAS ADOPTED THE PROVISIONS OF FASB ASC 740, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES. ACCORDINGLY, MANAGEMENT HAS EVALUATED THE SOCIETY'S TAX POSITIONS AND CONCLUDED THE SOCIETY HAD MAINTAINED ITS TAX-EXEMPT STATUS, DOES NOT HAVE ANY SIGNIFICANT UNRELATED BUSINESS INCOME AND HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT OR DISCLOSURE IN THE FINANCIAL STATEMENTS. WITH FEW EXCEPTIONS, THE SOCIETY IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY THE U.S. FEDERAL OR STATE TAX AUTHORITIES FOR YEARS BEFORE 2013.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

MUSEUM STORE COST OF GOODS SOLD	3,600.
RENTAL EXPENSES	383,180.
CHANGE IN CASH SURRENDER VALUE OF LIFE INSURANCE	3,057.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	389,837.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

MUSEUM STORE COST OF GOODS SOLD	3,600.
RENTAL EXPENSES	383,180.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	386,780.

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
NORTHEAST DOCUMENT CONSERV	BOARD MEMBER OF THE	9,025.	USED THE CO		X

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

SCHEDULE L, PART II, LOANS TO AND FROM INTERESTED PERSONS:

(A) NAME OF PERSON: MERRIMACK COUNTY SAVINGS BANK

(B) RELATIONSHIP WITH ORGANIZATION: PRESIDENT OF THE SOCIETY IS THE BOARD CHAIR OF THE BANK

(C) PURPOSE OF LOAN: LINE OF CREDIT

(A) NAME OF PERSON: MERRIMACK COUNTY SAVINGS BANK

(B) RELATIONSHIP WITH ORGANIZATION: PRESIDENT OF THE SOCIETY IS THE BOARD CHAIR OF THE BANK

(C) PURPOSE OF LOAN: LINE OF CREDIT

(A) NAME OF PERSON: MERRIMACK COUNTY SAVINGS BANK

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: NORTHEAST DOCUMENT CONSERVATION CENTER

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: BOARD MEMBER OF THE SOCIETY IS THE PRESIDENT OF THE CONSER. CENTER

(D) DESCRIPTION OF TRANSACTION: USED THE CONSERVATION SOCIETY FOR CONSERVATION AND DIGITIZATION OF COLLECTIONS, CONSULTING AND FOR COLLECTIONS CARE TRAINING WORKSHOPS.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2015

Open To Public
Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization **NH HISTORICAL SOCIETY** Employer identification number **02-0233250**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art	X	29		
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	13	127,780.	
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles	X	102		
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts	X	31		
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (.....				
26 Other ▶ (.....				
27 Other ▶ (.....				
28 Other ▶ (.....				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) (2015)

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, LINE 33:

IN ACCORDANCE WITH SFAS 116, THE SOCIETY HAS ELECTED NOT TO REPORT COLLECTION ITEMS IN ITS STATEMENT OF FINANCIAL POSITION OR STATEMENT OF ACTIVITIES. COLLECTION ITEMS ACQUIRED EITHER THROUGH PURCHASE OR DONATION ARE NOT CAPITALIZED. PURCHASES OF COLLECTION ITEMS ARE RECORDED AS A DECREASE IN UNRESTRICTED NET ASSETS IF PURCHASED WITH UNRESTRICTED ASSETS AND AS DECREASES IN TEMPORARILY RESTRICTED OR PERMANENTLY RESTRICTED NET ASSETS IF PURCHASED WITH DONOR-RESTRICTED ASSETS. CONTRIBUTIONS OF COLLECTION ITEMS ARE NOT RECOGNIZED IN THE STATEMENT OF ACTIVITIES. THE SOCIETY HAS A POLICY THAT REQUIRES NET PROCEEDS REALIZED FROM THE SALE OR TRANSFER OF DEACCESSIONED OBJECTS WILL BE USED ONLY FOR ACQUISITION AND CONSERVATION OF COLLECTIONS.

THE SOCIETY'S COLLECTIONS INCLUDE BOOKS, MANUSCRIPTS, PHOTOGRAPHS, RESEARCH MATERIALS AND OBJECTS RELATING TO THE HISTORY OF NEW HAMPSHIRE. THESE COLLECTIONS HAVE BEEN ACQUIRED BY DONATION, BEQUESTS AND PURCHASES. COLLECTION ITEMS ARE ACQUIRED OR CONSERVED BASED ON THE SOCIETY'S LONG-RANGE PLANS FOR COLLECTIONS DEVELOPMENT.

COLLECTIONS ARE MADE AVAILABLE FOR SCHOLARLY USE BY THE PUBLIC AND MAINTAINED UNDER APPROPRIATE SECURITY AND PRESERVATION CONDITIONS.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2015

Open to Public
Inspection

Name of the organization

NH HISTORICAL SOCIETY

Employer identification number

02-0233250

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

TO OUR LIVES TODAY. IN SUPPORT OF THE MISSION, THE SOCIETY COLLECTS,
PRESERVES, AND INTERPRETS MATERIAL PERTAINING TO NEW HAMPSHIRE HISTORY.

FORM 990, PART VI, SECTION A, LINE 6:

MEMBERSHIP

MEMBERSHIP CATEGORIES:

THE SOCIETY SHALL CONSIST OF INDIVIDUAL, COUPLE, FAMILY, LIFE, BUSINESS,
AND INSTITUTIONAL MEMBERS IN GOOD STANDING BY VIRTUE OF THEIR HAVING PAID
THEIR DUES AND SUCH OTHER CATEGORIES OF MEMBERSHIP AS MAY FROM TIME TO TIME
BE ESTABLISHED BY THE BOARD OF TRUSTEES, INCLUDING COMPLIMENTARY MEMBERS
WHO ARE NOT REQUIRED TO PAY ANY DUES.

QUALIFICATIONS:

MEMBERSHIP SHALL BE OPEN TO ALL OF THE ABOVE WHO ARE INTERESTED IN
FURTHERING THE PURPOSES AND WORK OF THE SOCIETY, TO BE EFFECTIVE UPON
PAYMENT OF DESIGNATED DUES AND SHALL BE VALID FOR ONE YEAR FROM THE DATE OF
PAYMENT.

RIGHTS AND PRIVILEGES OF MEMBERSHIP:

ONLY THOSE MEMBERS OF ALL CATEGORIES THAT HAVE PAID THEIR DUES AND ARE IN
GOOD STANDING SHALL BE ENTITLED TO VOTE, ONE VOTE PER MEMBER, AT ALL
MEETINGS OF THE MEMBERS, AND TO THE FULL PRIVILEGES OF MEMBERSHIP IN THE
SOCIETY, AS DETERMINED FROM TIME TO TIME BY, AND SUBJECT TO SUCH

REGULATIONS AS MAY BE PRESCRIBED BY, THE BOARD OF TRUSTEES. VOTING IS

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LIMITED TO PERSONS EIGHTEEN (18) YEARS OF AGE OR OLDER. VOTING MAY BE EXERCISED IN PERSON OR BY PROXY AS DETERMINED BY THE TRUSTEES, IN WHICH EVENT PROXIES SHALL BE COUNTED FOR THE PURPOSE OF DETERMINING A QUORUM.

DUES:

THE BOARD OF TRUSTEES SHALL FROM TIME TO TIME DETERMINE THE AMOUNT OF ANNUAL DUES PAYABLE BY MEMBERS OF EACH CATEGORY. WHEN ANY MEMBER SHALL BECOME DELINQUENT IN THE PAYMENT OF DUES, HIS OR HER MEMBERSHIP SHALL TERMINATE AND HE OR SHE SHALL NO LONGER BE A MEMBER IN GOOD STANDING.

FORM 990, PART VI, SECTION A, LINE 7A:

THE MEMBERS VOTE TO ELECT MEMBERS OF THE BOARD TRUSTEES AT THE ANNUAL MEETING.

MEMBERS DO NOT VOTE TO ELECT OFFICERS OF THE BOARD. OFFICERS ARE ELECTED BY THE BOARD.

FORM 990, PART VI, SECTION B, LINE 11:

THE COMPLETED FORM 990 IS PRESENTED TO THE BOARD OF TRUSTEES FOR REVIEW PRIOR TO THE TREASURER'S SIGNING AND FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

TRUSTEES HAVING A REAL OR APPARENT CONFLICT OF INTEREST IN ANY MATTER BEFORE THE BOARD MUST DISCLOSE THE POSSIBLE CONFLICT AND EXCLUDE THEMSELVES FROM THE DISCUSSION AND/OR VOTE ON THE MATTER IN QUESTION.

TRUSTEES HAVING AN INTEREST IN A PROPOSED PECUNIARY BENEFIT TRANSACTION WITH THE SOCIETY THAT IS BROUGHT BEFORE THE BOARD SHALL HAVE AN AFFIRMATIVE

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OBLIGATION TO DISCLOSE SUCH INTEREST AND SHALL BE PROHIBITED FROM BEING PRESENT DURING OR PARTICIPATING IN THE DISCUSSION ON THE SUBJECT OR VOTING THEREON. THE BOARD SHALL AUTHORIZE THE SOCIETY TO ENTER INTO SUCH TRANSACTIONS ONLY IN ACCORDANCE WITH THE APPLICABLE PROVISIONS OF RSA 7:19-A.

FORM 990, PART VI, SECTION B, LINE 15:

COMPENSATION PROCESS FOR TOP OFFICIAL

THE NEW HAMPSHIRE HISTORICAL SOCIETY IS COMMITTED TO USING ITS RESOURCES EFFICIENTLY AND EFFECTIVELY TO SERVE THE PUBLIC AND FULFILL ITS MISSION. THE INSTITUTION ADHERES TO GOOD GOVERNANCE PRACTICES IN ESTABLISHING EXECUTIVE COMPENSATION.

THE EXECUTIVE COMMITTEE SERVES AS THE COMPENSATION COMMITTEE OF THE SOCIETY AND MAKES RECOMMENDATIONS TO THE FULL BOARD OF TRUSTEES IN MATTERS OF THE PRESIDENT'S TERMS OF EMPLOYMENT INCLUDING COMPENSATION AND BENEFITS.

THE COMPENSATION AND BENEFITS OF THE PRESIDENT ARE SET FORTH IN EITHER A WRITTEN COMPENSATION AND BENEFITS TERM SHEET, OR IN A FORMAL WRITTEN EMPLOYMENT AGREEMENT EXECUTED BETWEEN THE SOCIETY AND THE PRESIDENT.

THE EXECUTIVE COMMITTEE WILL SUBMIT THE RECOMMENDED COMPENSATION TERM SHEET OR FORMAL EMPLOYMENT AGREEMENT WITH THE PRESIDENT TO THE BOARD OF TRUSTEES FOR DISCUSSION AND ACTION.

THE BOARD AND EXECUTIVE COMMITTEE DISCUSS THE MATTER DURING A PORTION OF

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THE BOARD MEETING WHEN THE PRESIDENT IS EXCUSED FROM THE MEETING AND NOT PRESENT.

THE TERM SHEET OR FORMAL AGREEMENT WITH THE PRESIDENT MUST BE APPROVED BY A MAJORITY VOTE OF THE BOARD OF TRUSTEES PRESENT AT A DULY CALLED AND HELD BOARD OF TRUSTEES MEETING WHERE THE REQUIRED QUORUM OF DIRECTORS IS PRESENT TO CONDUCT A MEETING.

COMPARISONS OF PUBLIC DATA ON COMPENSATION ARE USED AND DOCUMENTED IN DETERMINING THE PRESIDENT'S COMPENSATION, AS WELL AS FACTS AND CIRCUMSTANCES RELATING TO THE PAST PERFORMANCE OF THE PRESIDENT.

THE PRESIDENT'S COMPENSATION PACKAGE IS REVIEWED REGULARLY BY THE BOARD OF TRUSTEES.

COMPENSATION PROCESS FOR OFFICERS (SENIOR MANAGERS)

THE PRESIDENT OF THE SOCIETY IS RESPONSIBLE FOR ALL ADMINISTRATIVE DETAILS, AND IMPLEMENTATION OF POLICIES, PROGRAMS, AND LONG RANGE OBJECTIVES APPROVED BY THE BOARD OF TRUSTEES. THE PRESIDENT EXERCISES FULL SUPERVISION AND MANAGEMENT OF ALL PERSONNEL, ASSIGNS DUTIES AND SO FORTH WITHIN THE POLICIES APPROVED BY THE BOARD.

COMPENSATION FOR SENIOR MANAGERS IS DETERMINED THROUGH A DUE DILIGENCE PROCESS THAT THE PRESIDENT EMPLOYS BASED UPON THE COMPARISONS OF PUBLIC DATA, PARTICULARLY THE PUBLISHED WAGE SCALES OF THE NEW ENGLAND MUSEUM ASSOCIATION, PAST PERFORMANCE, AND THE AMBITIOUS GOALS STATED IN SENIOR MANAGERS' ANNUAL WORK PLAN OBJECTIVES. OVERALL COMPENSATION IS REVIEWED BY THE FINANCE COMMITTEE AND A RECOMMENDATION IS MADE TO THE BOARD OF TRUSTEES

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FOR THEIR APPROVAL AS PART OF THE ANNUAL BUDGET PROCESS.

FORM 990, PART VI, SECTION C, LINE 19:

THE SOCIETY'S IRS FORM 990 IS AVAILABLE ON THE SOCIETY'S WEBSITE, AT
WWW.GUIDESTAR.COM OR BY APPOINTMENT AT THE LIBRARY. THE SOCIETY'S AUDITED
FINANCIAL STATEMENTS ARE AVAILABLE ON THE SOCIETY'S WEBSITE OR BY
APPOINTMENT AT THE LIBRARY. THE GOVERNING DOCUMENTS AND CONFLICT OF
INTEREST POLICY AT AVAILABLE BY APPOINTMENT AT THE SOCIETY'S LIBRARY IN
CONCORD, NH.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE IN CASH SURRENDER VALUE OF LIFE INSURANCE	3,057.
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FORM 990, PART XII, LINE 2C

NO CHANGE FROM PRIOR YEAR.