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Form **990-PF**

Department of the Treasury Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

Treated as a Private Foundation

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0052

2009

For	calendar year 2009, or tax year beginning		, and ending					
G C	G Check all that apply: Initial return Initial return of a former public charity Final return							
	Amended return	Address chang	ge \square	Name change				
Use	the IRS Name of foundation			A Employer identification	n number			
	abel. MAX KAGAN FAMILY FOUN							
	erwise, <mark>C/O PAULA KAGAN, TRUS</mark>			01-601903	3			
	print Number and street (or P O box number if mail is not de	•	Room/suite	B Telephone number				
	rtype. 12 ALPINE COURT, DIRI Specific City as town state and 710 and a	GO PINES		(207)866-0	0457			
	ructions City of town, State, and ZIP code			C If exemption application is	· —			
	ORONO, ME 044/3			D 1. Foreign organization	s, check here			
H C	check type of organization: X Section 501(c)(3) ex			Foreign organizations m check here and attach or	computation lest,			
		Other taxable private founda	tion	E If private foundation st	atus was terminated			
	ur market value of all assets at end of year J Accounti	=	Accrual	under section 507(b)(1	(A), check here			
		ther (specify)		F If the foundation is in a				
_		T T	pasis)	under section 507(b)(1	1			
Pa	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes			
	necessarily equal the amounts in column (a))			<u> </u>	(cash basis only)			
	1 Contributions, gifts, grants, etc., received	5,075.		N/A				
	2 Check Interest on savings and temporary							
	3 cash investments	85,635.	85,635					
	4 Dividends and interest from securities	65,635.	65,635	<u> </u>				
	5a Gross rents			 -	 			
	b) Net rental income or (loss)	<131,306.						
ne	68 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 1,192,287.	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\						
Revenue	7 Capital gain net income (from Part IV, line 2)		0		 			
æ	8 Net short-term Capital Gain VED				 			
	9 Income modifications				 			
	10a end allowances							
	b Less Gost of goods Gold 9 2010							
	c Gross protit or (loss)							
	11 Other income	<544.	> <544	.>	STATEMENT 1			
	12 Total Add lines (Finough 1), U	<41,140.	> 85,091	•				
	13 Compensation of officers, directors, trustees, etc	0.	0		0.			
	14 Other employee salaries and wages	4,121.	4,121	•	0.			
	15 Pension plans, employee benefits							
benses	16a Legal fees				1			
pen	b Accounting fees STMT 2	8,480.	4,240	•	0.			
	c Other professional fees							
<u>×</u>	17 Interest				<u> </u>			
tra	18 Taxes STMT 3	2,311.	2,311	•	0.			
Administrative Ex	19 Depreciation and depletion							
퉏	20 Occupancy			<u> </u>	<u> </u>			
٧p	21 Travel, conferences, and meetings							
Operating and	22 Printing and publications	24 175	24 175		 			
iig	23 Other expenses STMT 4	24,175.	24,175	•	0.			
erat	24 Total operating and administrative	39,087.	24 047					
ŏ	expenses. Add lines 13 through 23	96,770.	34,847	•	96,770.			
	25 Contributions, gifts, grants paid	30,770.		 	30,770.			
	26 Total expenses and disbursements.	135,857.	34,847		96,770.			
	Add lines 24 and 25 27 Subtract line 26 from line 12:	133,037.	34,047	•	30,110.			
		<176,997.						
	8 Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)	~110,3310	50,244					
	c Adjusted net income (if negative, enter -0-)	<u> </u>	30,244	N/A	 			
9235 02-0		Act Notice, see the instruct	tions.		Form 990-PF (2009)			
02-0	C-IO CIES COLLINES STATEMENT SPONSON HOUSEN		1	B				

01-6019033

Page 2

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of year			
<u>=</u>	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	4,567.	1,263.	1,263.		
	2	Savings and temporary cash investments	306,891.	288,273.	288,273.		
	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	· · · · · · · · · · · · · · · · · · ·				
	ľ	disqualified persons					
	١,						
	7	Other notes and loans receivable			-		
	١.	Less: allowance for doubtful accounts					
Assets	8	Inventories for sale or use					
ISS	9	Prepaid expenses and deferred charges	270 552	220 227	746 654		
	l	Investments - U.S. and state government obligations STMT 5	378,553.	329,227.	416,551.		
	6	Investments - corporate stock STMT 6	1,979,104.	1,924,072.	2,091,334.		
	C	Investments - corporate bonds					
	11	Investments - land, buildings, and equipment basis					
		Less accumulated depreciation					
	12	Investments - mortgage loans					
	13	Investments - other STMT 7	460,620.	417,453.	413,604.		
	14	Land, buildings, and equipment: basis ▶					
		Less accumulated depreciation					
	15	Other assets (describe)					
	ŀ				_		
	16	Total assets (to be completed by all filers)	3,129,735.	2,960,288.	3,211,025.		
	17	Accounts payable and accrued expenses					
	18	Grants payable					
Ś	19	Deferred revenue					
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons					
abi	21	Mortgages and other notes payable					
=	22	Other liabilities (describe STATEMENT 8)	699.	557.			
		-	· I	_			
	23	Total liabilities (add lines 17 through 22)	699.	557.			
		Foundations that follow SFAS 117, check here					
		and complete lines 24 through 26 and lines 30 and 31.					
nces	24	Unrestricted					
	25	Temporarily restricted					
Ba	26	Permanently restricted					
5		Foundations that do not follow SFAS 117, check here					
Ţ	i	and complete lines 27 through 31.					
ŏ	27	Capital stock, trust principal, or current funds	1,545,996.	1,545,996.			
Assets or Fund Bala	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.			
As	29	Retained earnings, accumulated income, endowment, or other funds	1,583,040.	1,413,735.			
Net	30	Total net assets or fund balances	3,129,036.	2,959,731.			
_		,					
	31	Total liabilities and net assets/fund balances	3,129,735.	2,960,288.			
<u></u>	art	Analysis of Changes in Net Assets or Fund B	alances				
_		······································					
1		I net assets or fund balances at beginning of year - Part II, column (a), line	30				
	•	st agree with end-of-year figure reported on prior year's return)		1	3,129,036.		
		r amount from Part I, line 27a	-	2	<176,997.>		
3	Othe	r increases not included in line 2 (itemize) BOOK BASIS	OVER TAX BASIS		7,692.		
		lines 1, 2, and 3		4	2,959,731.		
		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, co	olumn (b), line 30	6	2,959,731.		
					Form 990-PF (2009)		

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C/O PAULA KAGAN, TRUSTEE

Part IV	Capital Gains	and Los	ses for Tax on In	vestment	Income				_		
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) (b) How a P - Purc D - Don				cquired :hase ation		acquired ay, yr.)	(d) Date sold (mo., day, yr.)				
1a PUB	PUBLICLY TRADED SECURITIES \ \tag{V}					VARI	OUS	VARIOUS			
b CAP	ITAL GAINS	DIVID	ENDS								
C											
<u>d</u>											
<u>e</u>						Ц,					
(e)	Gross sales price		epreciation allowed (or allowable)	plus e	t or other basis xpense of sale					ain or (loss s (f) minus	(g)
а	1,192,283.				1,323,59	3.					<131,310.
_b	4.										4.
<u>C</u>											
<u>d</u>											
Compl	ata anh far annata ahawa		aluma (b) and award but	ha fawadat an	00 10/01/60						
Compi	ete only for assets snowir		olumn (h) and owned by t							ol. (h) gain not less tha	
(i) F.I	M.V. as of 12/31/69) Adjusted basis as of 12/31/69		cess of col. (ı) col. (ı), ıf any			001		(from col. (
		`				_					<131,310.
<u>a</u> b											Δ
C						\dashv					
d					**						
			C If goin, also enter	in Bart Lilina	7	7		<u> </u>			
2 Capital	gain net income or (net ca	ipital loss)	If gain, also enter If (loss), enter -0-	in Part I, line	, 7	- }	2				<131,306.
3 Not cho	rt-term canital gain or (los	ee) se dafini	ed in sections 1222(5) an			<u>ا</u> ا					•
	also enter in Part I, line 8,			u (0).		J					
If (loss)	, enter -0- in Part I, line 8					J	3			N/A	•
Part V	Qualification U	nder Se	ection 4940(e) for	Reduced	Tax on Net	Inv	estn	nent Inc	ome		
(For option	al use by domestic private	e foundation	ns subject to the section 4	1940(a) tax on	net investment in	come	e.)				
If section 4	940(d)(2) applies, leave ti	his nart blar	nk								
	, ,, , , ,										
			ax on the distributable am		•	rod?					Yes X No
			ection 4940(e). Do not co n for each year; see instru			20					
T Eliter ti	(a)	each colum	- '	Terroria nerore	making any entire				1		(d)
Calanda	Base period years r year (or tax year beginni	00.10/	(b) Adjusted qualifying dist	tributions	Net value of no	(c) nchai		-use assets		Distrit	(d) oution ratio yided by col. (c))
Calcilua	2008	''y ''')		1,218.	-			4,711		(coi. (b) ai.	•050437
	2007	-+		3,568.				3,997			.041684
	2006			7,904.				6,929			.042368
	2005	<u> </u>		7,444.				9,999			.032990
	2004			4,678.				9,185		_	.034747
					•			· · · · · · · · · · · · · · · · · · ·			
2 Total of	line 1, column (d)								2		.202226
3 Average	distribution ratio for the	5-year base	period - divide the total o	on line 2 by 5,	or by the number	of ye	ars				
the four	ndation has been in existe	nce if less t	han 5 years						3		.040445
4 Enter th	e net value of noncharitat	ole-use asse	ets for 2009 from Part X, I	line 5					4		2,884,968.
5 Multiply	line 4 by line 3								5		116,683.
6 Enter 1	% of net investment incor	ne (1% of P	Part I, line 27b)	-					6		502.
_											448 40-
7 Add line	es 5 and 6		•	••					7	_	117,185.
8 Enter q	ualifying distributions fror	n Part XII, I	ine 4	-					8		96,770.
		n line 7, che	ck the box in Part VI, line	1b, and comp	lete that part usin	ig a 1	% tax	rate.		-	
	Part VI instructions.			·	*						

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Part VI Excise Tax Based on Investment Income (Section 494	l0(a), 4940(b), 4940(e), or 4	1948 - see	instru	ctio	ns)
1a Exempt operating foundations described in section 4940(d)(2), check here ▶ and €	enter "N/A" on line 1.				
Date of ruling or determination letter: (attach copy of letter if ne	cessary-see instructions)				
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	➤ 🔲 and enter 1%	1		1,0	05.
of Part I, line 27b					
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 49	% of Part I, line 12, col. (b)				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. 0	Others enter -0-)	2			0.
3 Add lines 1 and 2		3		1,0	
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. (Others enter -0-)	4			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5		1,0	05.
6 Credits/Payments:					
a 2009 estimated tax payments and 2008 overpayment credited to 2009	6a 1,479.				
b Exempt foreign organizations - tax withheld at source	6b				
c Tax paid with application for extension of time to file (Form 8868)	6c]			
d Backup withholding erroneously withheld	6d				
7 Total credits and payments. Add lines 6a through 6d		7		1,4	79.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	ached	8			
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 overpaid	>	10		4	74.
11 Enter the amount of line 10 to be: Credited to 2010 estimated tax	474 • Refunded ►	11			0.
Part VII-A Statements Regarding Activities					
1a During the tax year, did the foundation attempt to influence any national, state, or local legis	slation or did it participate or intervene	: in		Yes	
any political campaign?			1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purpo	ses (see instructions for definition)?		1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities an	d copies of any materials publishe	ed or			
distributed by the foundation in connection with the activities.					
c Did the foundation file Form 1120-POL for this year?			1c		<u> </u>
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the					
(1) On the foundation. ▶ \$ (2) On foundation managers	s.▶ \$0.	-			
e Enter the reimbursement (if any) paid by the foundation during the year for political expend	liture tax imposed on foundation				
managers. ▶ \$0 .					
2 Has the foundation engaged in any activities that have not previously been reported to the I	RS?		2		X
If "Yes," attach a detailed description of the activities					
3 Has the foundation made any changes, not previously reported to the IRS, in its governing		or			
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the chang			3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year	aro	27 / 2	4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?	_	N/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year	?		5		<u> </u>
If "Yes," attach the statement required by General Instruction T.					
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	either:				
By language in the governing instrument, or					
By state legislation that effectively amends the governing instrument so that no mandator	ry directions that conflict with the stat	e law		v	
remain in the governing instrument?			6	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	
If "Yes," complete Part II, col. (c), and Part XV.					
8a Enter the states to which the foundation reports or with which it is registered (see instruction ME	ons) –				
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	Attorney General (or designate)				
of each state as required by General Instruction G? If "No," attach explanation			8b	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of si	ection 4942(j)(3) or 4942(j)(5) for cal	endar			
year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes,"	complete Part XIV		9		Х
10 Did any persons become substantial contributors during the tax year? if "Yes," attach a sched	•		10		X
		F.	QQA	DE /	2000

Pa	irt VII-A	Statements Regarding Activities (continued)				
11	At any time	during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of				
	section 512	(b)(13)? If "Yes," attach schedule (see instructions)		11		X
12	Did the four	idation acquire a direct or indirect interest in any applicable insurance contract before				
	August 17,	2008?		12		X
13	Did the four	idation comply with the public inspection requirements for its annual returns and exemption application?		13	X	
		dress > N/A				
14			no. ► (207)8			7
		▶ 12 ALPINE COURT, DIRIGO PINES, ORONO, ME	ZIP+4 ▶ 04	<u>473</u>		
15	Section 494	(7(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			. ▶	
		e amount of tax-exempt interest received or accrued during the year	15	N	/A	
Pa	art VII-B	Statements Regarding Activities for Which Form 4720 May Be Required				
		4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a		rear did the foundation (either directly or indirectly):	J (**)			
		in the sale or exchange, or leasing of property with a disqualified person?	Yes 🗶 No			
	• •	money from, lend money to, or otherwise extend credit to (or accept it from)	, ,			
	-	alified person?	Yes X No			
		goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No			
		mpensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No			
		er any income or assets to a disqualified person (or make any of either available	. .			
		benefit or use of a disqualified person)?	Yes X No			
		o pay money or property to a government official? (Exception. Check "No"				
		oundation agreed to make a grant to or to employ the official for a period after] [1]			
		ation of government service, if terminating within 90 days.)	Yes X No			
b		er is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	NT / 3			
		4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	N/A	1b		
_	-	ns relying on a current notice regarding disaster assistance check here				
C		ndation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected				х
•		irst day of the tax year beginning in 2009?	han	10		<u> </u>
2		ilure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundal				
		ection 4942(j)(3) or 4942(j)(5)): of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) begi	2012			
٠	before 2009		Yes No			
		the years ► 2008 , , ,	J 163 110			
,		by years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to inco	rrect			
١		assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and a				
		see instructions.)		2b	х	
•		sions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
	• • • • • • • • • • • • • • • • • • •					
38	Did the four	ndation hold more than a 2% direct or indirect interest in any business enterprise at any time				
	during the		Yes X No	ļ		
t	•	it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified person		1		
	•	69; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7))				İ
	-	acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedu				
	_	0, to determine if the foundation had excess business holdings in 2009.)	N/A	3b]
48		ndation invest during the year any amount in a manner that would jeopardize its charitable purposes?	•	4a		Х
		ndation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable pui	pose that			
		en removed from jeopardy before the first day of the tax year beginning in 2009?	•	4b	1	Х
		<u> </u>	For	m 990)-PF ((2009)

Part VII-B Statements Regarding Activities for Which I	orm 4720 May Be F	Required (contin	ued)			
5a During the year did the foundation pay or incur any amount to:						
' (1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	es 🗶 No			
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,						
any voter registration drive?			s X No			
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y€	s X No			
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section					
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No		-	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f					
the prevention of cruelty to children or animals?		Ye	es 🛣 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		İ		
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5b		
Organizations relying on a current notice regarding disaster assistance check h	ere		▶□ [
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	rom the tax because it mainta	ined				
expenditure responsibility for the grant?	N	Γ/A	s No			
If "Yes," attach the statement required by Regulations section 53.4945	5-5(d).					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on				İ	
a personal benefit contract?		Ye	es 🗶 No 📗]		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		Ĺ	6b	X	
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	helter transaction?	Ye	es 🗶 No 📙			
b If yes, did the foundation receive any proceeds or have any net income attribute	able to the transaction?		N/A	7b		
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly	/			
Palu Employees, and Contractors						
1 List all officers, directors, trustees, foundation managers and their						
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) E	xpense int, other	
(a) Name and address	to position	enter -0-)	and deterred compensation	allo	wances	
	TRUSTEE					
12 ALPINE COURT, DIRIGO PINES						
ORONO, ME 04473	1.00	0.	0.		0.	
	TRUSTEE					
12 ALPINE COURT, DIRIGO PINES			_			
ORONO, ME 04473	0.00	0.	0.		0.	
	TRUSTEE					
12 ALPINE COURT, DIRIGO PINES						
ORONO, ME 04473	0.00	0.	0.		0.	
	TRUSTEE					
12 ALPINE COURT, DIRIGO PINES						
ORONO, ME 04473	0.00	0.	0.	l	0.	
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	721.			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) t	expense unt, other	
	devoted to position	(c) componication	and deterred compensation		wances	
NONE						
	<u> </u>			l		
				L		
				<u> </u>		
Total number of other employees paid over \$50,000			>		0	
			Form	990-P	F (2009)	

Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	ation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	er "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	-	
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis number of organizations and other beneficiaries served, conferences convened, research papers pro	duced, etc.	Expenses
1 NONE		
		0.
2		
3		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year or	n lines 1 and 2.	Amount
1 NONE	-	
		0.
2		
All other program-related investments. See instructions.		· · · · · · · · · · · · · · · · · · ·
3		
Total. Add lines 1 through 3	>	0.
	<u> </u>	Form 990-PF (2009)

ĮΡ	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	2,925,874.
	Average of monthly cash balances	1b	3,028.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	2,928,902.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	2,928,902.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	43,934.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,884,968.
6	Minimum investment return. Enter 5% of line 5	6	144,248.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations check here and do not complete this part.)	d certain	-
1	Minimum investment return from Part X, line 6	1	144,248.
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009. (This does not include the tax from Part VI.)	ľ	
C	Add lines 2a and 2b	2c	1,005.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,005. 143,243.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	143,243.
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	143,243.
P	art XII Qualifying Distributions (see instructions)		
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	96,770. 0.
b	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	
b	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	96,770.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	96,770.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years	qualifies fo	or the section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,				
line 7				143,243.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			121,811.	
b Total for prior years:				
g read to provi years.		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004				'
b From 2005				
c From 2006				
dFrom 2007				
eFrom 2008				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from				
Part XII, line 4: ►\$ 96,770.				
a Applied to 2008, but not more than line 2a			96,770.	
· · · · · · · · · · · · · · · · · · ·			30,770	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)		V•		
c Treated as distributions out of corpus	0.			
(Election required - see instructions)				0.
d Applied to 2009 distributable amount	0.			,
e Remaining amount distributed out of corpus	0.			0.
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))				0.
6 Enter the net total of each column as indicated below:	:			
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.		1	
b Prior years' undistributed income. Subtract				
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 2008. Subtract line				_
4a from line 2a. Taxable amount - see instr.			25,041.	
f Undistributed income for 2009. Subtract		-		
lines 4d and 5 from line 1. This amount must	:	,		
be distributed in 2010				143,243.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004			· · · · · · · · · · · · · · · · · · ·	
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010.				-
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009				
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Part XIV Private Operating F	oundations (see in	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling of	or determination letter tha	t it is a private operating			
foundation, and the ruling is effective fo	or 2009, enter the date of	the ruling	▶		
b Check box to indicate whether the found	dation is a private operati	ng foundation described i	n section	4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for				· · · · · · · · · · · · · · · · · · ·	
each year listed					
b 85% of line 2a				 	
c Qualifying distributions from Part XII,		 	<u> </u>		
line 4 for each year listed					
d Amounts included in line 2c not			! <u>-</u>		-
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 3 Complete 3a, b, or c for the		ļ		_	
3 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 listed					
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					
sečtion 4942(j)(3)(B)(iii)					
(3) Largest amount of support from		1			
an exempt organization					ļ
(4) Gross investment income		<u></u>		<u> </u>	L
Part XV Supplementary Info			if the foundatio	n had \$5,000 or m	ore in assets
at any time during	the year-see the	instructions.)			
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wh			ributions received by th	e foundation before the clo	se of any tax
year (but only if they have contributed r	nore than \$5,000). (See s	section 507(d)(2).)			
NONE					
b List any managers of the foundation wh			or an equally large por	tion of the ownership of a p	artnership or
other entity) of which the foundation ha	is a 10% or greater intere	st			
NONE					
2 Information Regarding Contribut	ion, Grant, Gift, Loan	, Scholarship, etc., Pr	ograms:		
Check here 🕨 🔲 if the foundation of				not accept unsolicited req	uests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	ber of the person to who	m applications should be	addressed:		
MAX KAGAN FOUNDATION					
12 ALPINE COURT, DIF		-			
b The form in which applications should					· · ·
N/A		and materials troy of	odia molado.		
c Any submission deadlines:					_
N/A					
d Any restrictions or limitations on award	s such as hy gengraphic	al areas, charitable fields	kinds of institutions of	r other factors:	
N/A	o, outh as by geographic	वा बाठवंड, जावााळशह ॥६१०५,	เนอ บา เกอแผนบทร, U	י טנווטו ומטנטוס,	
TA ED					
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C/O PAULA KAGAN, TRUSTEE

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Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation status of recipient Purpose of grant or contribution show any relationship to Amount any foundation manager Name and address (home or business) or substantial contributor a Paid during the year 96,770. N/A SEE STATEMENT 9 96,770. ➤ 3a Total **b** Approved for future payment NONE 0. Total 923611 02-02-10 Form **990-PF** (2009)

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income		ded by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code		code	Amount	Torrottori income
a					
D			-		
<u> </u>					
<u> </u>			 		
e			+		
1			∔—		
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash	1		۱.,		
investments	<u> </u>		14		
4 Dividends and interest from securities	<u></u>		14	85,635.	
5 Net rental income or (loss) from real estate:			4		
a Debt-financed property	ļ	. <u>.</u>			
b Not debt-financed property					
6 Net rental income or (loss) from personal			1		
property					
7 Other investment income		<u> </u>	14	<544.	>
8 Gain or (loss) from sales of assets other	ŀ				
than inventory			18	<131,306.	>
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
8					
b					
C				·	
d					•
e					
12 Subtotal. Add columns (b), (d), and (e)		0	•	<46,215.	
13 Total. Add line 12, columns (b), (d), and (e)				13	<46,215.
(See worksheet in line 13 instructions to verify calculations.)					

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). NOT APPLICABLE

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			AULA RAGAN, IKC				01-001		Page 13
<u>P</u>	art X\	Information Re Exempt Organ	egarding Transfers To izations	and Transaction	s an	d Relationshi	ips With Noncha	ıritable	
1	Did th	e organization directly or indi	rectly engage in any of the followi	ng with any other organiz	ation (described in section	n 501(c) of	Ye	s No
	the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?							1	T
â	Trans	fers from the reporting found	ation to a noncharitable exempt or	rganization of:					- [
	(1) C	ash						1a(1)	<u> </u>
	(2) C	Other assets						1a(2)	X
t	Other	transactions:							
		ales of assets to a noncharita	• •					1b(1)	X
	٠.		ncharitable exempt organization					1b(2)	X
		lental of facilities, equipment,						1b(3)	X
		leimbursement arrangements						1b(4)	X
		oans or loan guarantees						1b(5)	X
			embership or fundraising solicitation					1b(6)	X
		•	uling lists, other assets, or paid en				1.1 1 (1)	1c	X
("Yes," complete the following school	• •	-	-		•	
			oundation. If the foundation received other assets, or services received.		value II	ii aliy transaction o	r snaring arrangement, s	MOM III	
(a)	Line no	(b) Amount involved	(c) Name of noncharitable			(d) Description of	f transfers, transactions, and	charing agange	mente
\- /	L	(b)//illicalli illicallo	N/A	- Order or garnization		(a) Description of	Tualsies, uaisactions, and	Siding dianger	illeilus .
_			1771		\dashv	<u> </u>			
	-				\dashv				
_									
_									
_							·		
_					\neg				
_									
28		-	tly affiliated with, or related to, one	-	anızat	ions described	_		
		, ,	r than section 501(c)(3)) or in sec	ction 527?			L	Yes L	X No
	If Yes	s," complete the following sch		(h) Type of especiation) Description of relations	<u></u>	
_		(a) Name of org	anization	(b) Type of organization)/i	(0)) Description of relations	пір	
_	-	N/A	 	ļ			 		
_				+	+				
			 	-	+				
_				 	- -				
	Under p	enalties of perjury, I declare that I i	nave examined this return, including acc	companying schedules and sta	atement	ts, and to the best of m	ny knowledge and belief, it is	true, correct,	
	and con	and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge							
	11-23-10 meter						istee		
ere	Signature of officer or travelee Date Title								
Ĭ	Triepaters 1							er's identifying n	umber
Sign Here	er's Jy								
	Paid Preparer's Use Only		Y, DUNN, MCNEII	& PARKER,	LL		EIN >	-	
	ب قري ريد	ıf self-employed), 36 P	LEASANT STREET						
		address, and ZIP code BANG	OR, ME 04401				Phone no. (207)942-1	600

FORM 990-PF	OTHER :	INCOME	S	TATEMENT	1
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTEI NET INCOM	
INVESTMENT - K-1 LOSS		<544.>	<544.>		
TOTAL TO FORM 990-PF, PART I,	LINE 11 =	<544.>	<544.>		
FORM 990-PF	ACCOUNT	ING FEES	S	TATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITAE PURPOSE	
ACCOUNTING FEES	8,480	4,240.	,		0.
TO FORM 990-PF, PG 1, LN 16B	8,480	4,240			0.
FORM 990-PF	TAX	KES	S	TATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAE PURPOSE	
FOREIGN TAXES PAID PAYROLL TAXES	1,983				0.
TO FORM 990-PF, PG 1, LN 18	2,311	2,311.			0.
FORM 990-PF	OTHER I	EXPENSES	S	TATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAE PURPOSE	
CUSTODIAL FEES FOREIGN CHARITIES	23,575 600			-	0.

### TOTAL U.S. GOVERNMENT OBLIGATIONS ### TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS ### TOTAL TO FORM 990-PF, PART II, LINE 10A ### DESCRIPTION ### CORPORATE STOCK ### STATEMENT ### DESCRIPTION ### CORPORATE STOCK ### TOTAL TO FORM 990-PF, PART II, LINE 10B ### TOTAL TO FORM 990-PF, PART II, LINE 10B ### TOTAL TO FORM 990-PF, PART II, LINE 10B ### TOTAL TO FORM 990-PF ### OTHER INVESTMENTS ### DESCRIPTION ### DESCRIPTION ### DESCRIPTION ### DESCRIPTION ### DESCRIPTION ### TOTAL TO FORM 990-PF, PART II, LINE 13 ### TOTAL TO FORM 990-PF, PART II, LINE 10A ### TOTAL TO FORM 990-PF ### TOTAL TO FORM 990-PF ### TOTAL TO FORM 990-PF ### TOTAL TO FORM 990-PF ### TOTAL TO FORM 990-PF ### TOTAL	FORM 990-PF U.S. AND STATE/	CITY GOVERNMENT	OBLIGATIONS	STATEMENT 5
TOTAL U.S. GOVERNMENT OBLIGATIONS TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS TOTAL TO FORM 990-PF, PART II, LINE 10A DESCRIPTION CORPORATE STOCK STATEMENT DESCRIPTION CORPORATE & PREFERRED STOCK TOTAL TO FORM 990-PF, PART II, LINE 10B DESCRIPTION CORPORATE & PREFERRED STOCK TOTAL TO FORM 990-PF, PART II, LINE 10B DESCRIPTION VALUATION METHOD DESCRIPTION STATEMENT DESCRIPTION COST COST COST COST COST MUTUAL FUNDS COST TOTAL TO FORM 990-PF, PART II, LINE 13 DESCRIPTION COST TOTAL TO FORM 990-PF, PART II, LINE 13 DESCRIPTION DESCRIPTION COST TOTAL TO FORM 990-PF, PART II, LINE 13 DESCRIPTION DESCRIP	DESCRIPTION		BOOK VALUE	
TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS TOTAL TO FORM 990-PF, PART II, LINE 10A 329,227. 416,551 FORM 990-PF CORPORATE STOCK STATEMENT DESCRIPTION BOOK VALUE VALUE CORPORATE & PREFERRED STOCK 1,924,072. 2,091,334 TOTAL TO FORM 990-PF, PART II, LINE 10B 1,924,072. 2,091,334 FORM 990-PF OTHER INVESTMENTS STATEMENT DESCRIPTION WALUATION METHOD BOOK VALUE VALUE ISRAEL BONDS COST 5,600. 5,827 COST 240,000. 243,311 MUTUAL FUNDS COST 171,853. 164,466 TOTAL TO FORM 990-PF, PART II, LINE 13 417,453. 413,604 FORM 990-PF OTHER LIABILITIES STATEMENT DESCRIPTION BOY AMOUNT EOY AMOUNT PAYROLL WITHHOLDINGS 699. 557	U.S. TREASURY BONDS	<u>x</u>	329,227.	416,551.
TOTAL TO FORM 990-PF, PART II, LINE 10A 329,227. 416,551 FORM 990-PF CORPORATE STOCK STATEMENT DESCRIPTION BOOK VALUE FAIR MARKET VALUE CORPORATE & PREFERRED STOCK 1,924,072. 2,091,334 TOTAL TO FORM 990-PF, PART II, LINE 10B 1,924,072. 2,091,334 FORM 990-PF OTHER INVESTMENTS STATEMENT DESCRIPTION VALUATION METHOD BOOK VALUE VALUE ISRAEL BONDS COST 5,600. 5,827 CERTIFICATES OF DEPOSIT COST 240,000. 243,311 MUTUAL FUNDS COST 171,853. 164,466 TOTAL TO FORM 990-PF, PART II, LINE 13 417,453. 413,604 FORM 990-PF OTHER LIABILITIES STATEMENT DESCRIPTION BOY AMOUNT EOY AMOUNT PAYROLL WITHOLDINGS 699. 557	TOTAL U.S. GOVERNMENT OBLIGATIONS		329,227.	416,551.
DESCRIPTION BOOK VALUE	TOTAL STATE AND MUNICIPAL GOVERNME	NT OBLIGATIONS		
DESCRIPTION CORPORATE & PREFERRED STOCK TOTAL TO FORM 990-PF, PART II, LINE 10B DESCRIPTION VALUATION METHOD DESCRIPTION STATEMENT VALUE VALUATION METHOD DESCRIPTION COST COST COST COST COST COST COST COS	TOTAL TO FORM 990-PF, PART II, LIN	E 10A	329,227.	416,551.
DESCRIPTION BOOK VALUE VALUE CORPORATE & PREFERRED STOCK 1,924,072. 2,091,334 TOTAL TO FORM 990-PF, PART II, LINE 10B 1,924,072. 2,091,334 FORM 990-PF OTHER INVESTMENTS STATEMENT DESCRIPTION WALUATION METHOD BOOK VALUE FAIR MARKET VALUE ISRAEL BONDS CERTIFICATES OF DEPOSIT COST COST COST COST 240,000. 243,311 MUTUAL FUNDS COST 171,853. 164,466 164,466 TOTAL TO FORM 990-PF, PART II, LINE 13 417,453. 413,604 FORM 990-PF OTHER LIABILITIES STATEMENT DESCRIPTION BOY AMOUNT EOY AMOUNT PAYROLL WITHHOLDINGS 699. 557	FORM 990-PF CO	RPORATE STOCK		STATEMENT 6
TOTAL TO FORM 990-PF, PART II, LINE 10B 1,924,072. 2,091,334 FORM 990-PF OTHER INVESTMENTS STATEMENT DESCRIPTION WETHOD BOOK VALUE VALUE ISRAEL BONDS COST 5,600. 5,827 CERTIFICATES OF DEPOSIT COST 240,000. 243,311 MUTUAL FUNDS COST 171,853. 164,466 TOTAL TO FORM 990-PF, PART II, LINE 13 417,453. 413,604 FORM 990-PF OTHER LIABILITIES STATEMENT DESCRIPTION BOY AMOUNT EOY AMOUNT PAYROLL WITHHOLDINGS 699. 557	DESCRIPTION		BOOK VALUE	
FORM 990-PF OTHER INVESTMENTS STATEMENT VALUATION METHOD BOOK VALUE VALUE ISRAEL BONDS COST 5,600. 5,827 CERTIFICATES OF DEPOSIT COST 240,000. 243,311 MUTUAL FUNDS COST 171,853. 164,466 TOTAL TO FORM 990-PF, PART II, LINE 13 417,453. 413,604 FORM 990-PF OTHER LIABILITIES STATEMENT DESCRIPTION BOY AMOUNT EOY AMOUNT PAYROLL WITHHOLDINGS 699. 557	CORPORATE & PREFERRED STOCK	·	1,924,072.	2,091,334.
DESCRIPTION VALUATION BOOK VALUE FAIR MARKET	TOTAL TO FORM 990-PF, PART II, LIN	1,924,072.	2,091,334.	
DESCRIPTION METHOD BOOK VALUE VALUE ISRAEL BONDS CERTIFICATES OF DEPOSIT COST COST COST 171,853. TOTAL TO FORM 990-PF, PART II, LINE 13 FORM 990-PF OTHER LIABILITIES STATEMENT DESCRIPTION BOY AMOUNT PAYROLL WITHHOLDINGS METHOD BOOK VALUE VALUE VALUE VALUE STATEMENT 5,600. 5,827 COST 171,853. 164,466 TOTAL TO FORM 990-PF, PART II, LINE 13 417,453. 413,604 EOY AMOUNT PAYROLL WITHHOLDINGS 699. 557	FORM 990-PF OTH	ER INVESTMENTS		STATEMENT 7
CERTIFICATES OF DEPOSIT MUTUAL FUNDS COST COST 171,853. 164,466 TOTAL TO FORM 990-PF, PART II, LINE 13 FORM 990-PF OTHER LIABILITIES DESCRIPTION PAYROLL WITHHOLDINGS COST 171,853. 413,604 HOY AMOUNT 699. 557	DESCRIPTION		BOOK VALUE	
MUTUAL FUNDS COST 171,853. 164,466 TOTAL TO FORM 990-PF, PART II, LINE 13 417,453. 413,604 FORM 990-PF OTHER LIABILITIES STATEMENT DESCRIPTION BOY AMOUNT EOY AMOUNT PAYROLL WITHHOLDINGS 699. 557				5,827.
FORM 990-PF OTHER LIABILITIES STATEMENT DESCRIPTION BOY AMOUNT EOY AMOUNT PAYROLL WITHHOLDINGS 699. 557				243,311. 164,466.
DESCRIPTION BOY AMOUNT EOY AMOUNT PAYROLL WITHHOLDINGS 699. 557	TOTAL TO FORM 990-PF, PART II, LIN	E 13	417,453.	413,604.
PAYROLL WITHHOLDINGS 699. 557	FORM 990-PF OTH	ER LIABILITIES		STATEMENT 8
	DESCRIPTION		BOY AMOUNT	EOY AMOUNT
TOTAL TO FORM 990-PF, PART II, LINE 22 699. 557	PAYROLL WITHHOLDINGS	•	699.	557.
	TOTAL TO FORM 990-PF, PART II, LIN	E 22	699.	557.

Max Kagan Family Foundation Contributions Paid During the Year December 31, 2009 Statement 9

	<u>Address</u>	Type	Amount
Acadia Hospital (Eastern ME Charities)	PO Box 931 Bangor ME 04402-0931	509 (a) (1)	5,000
Action Inc	180 Maine St, Gloucester, MA 01930	509 (a) (2)	1,250
American Jewish Committee	Jacob Blaustein Bldg, 165 East 56 St., New York, NY 10022-	509 (a) (2)	200
American Jewish World Service	45 West 36th St, New York, NY 10018	509 (a) (2)	1,000
Anti-Defamation League	40 Court St ,Boston MA 02108	13 type I	2,000
Aroostook Medical Center	PO Box 1598 Presque Isle ME 04769	509 (a) (1)	100
ASPCA	424 E 92nd St, New York, NY 10128	509 (a) (2)	200
Autism Speaks	Princeton, NJ 08540	509 (a) (2)	300
Bangor Smphony Orchestra	PO Box 1441 Bangor ME 04402	509 (a) (2)	1,500
Beth Israel Sisterhood	144 York St., Bangor ME 04401	509 (a) (1)	45
Black Bear Fund	2 Alumni Place Orono, ME 04469	509 (a) (1)	1,000
Camp Starfish	440Totten Pond Rd Suite 201 Waltham, MA 02451	509 (a) (2)	100
Combined Jewish Philanthropies	126 High St., Boston MA 02110-2700	509 (a) (2)	1,250
Congregation Beth Abraham	145 York St., Bangor ME 04401	509 (a) (1)	165
Congregation Beth Israel	144 York St, Bangor ME 04401	509 (a)(1)	3,250
Doctors Without Borders	333 7th Ave 2nd floor New York NY 10001-5004	509 (a) (2)	250
Eastern Maine Charities	PO Box 931 Bangor ME 04402-0931	509 (a) (1)	8,250
First Literacy	160 Boylston St, Boston MA 02116	509 (a) (2)	375
Healthcare Charities	PO Box 931 Bangor ME 04402-0931	509 (a) (1)	15,000
Hoffman Institute	1299 4th St Suite 304 SanRafael CA 94901	509 (a) (2)	600
Holocaust Human Rights Center	46 University Dr Augusta ME 04330-1644	509 (a) (2)	1,000
Jewish Federation of Palm Beach	4601 Community Dr., West Palm Beach FL 33417	509 (a) (1)	3,000
Lown Cardiovascular Research Foundation	21 Longwood Ave ,Brookline MA 02446	509 (a) (2)	15,000
Memorial Sloan Kettering Cancer Center	1275 York Ave , New York NY 10021	509 (a) (1)	2,000
Middlebury College	Middlebury , VT 05753	509 (a) (1)	1,000
Partners in Health	800 Boylston St 47th floor Boston MA 02199	509 (a) (2)	250
PEF Israel Endowment Fund Inc.	317 Madison Avenue, Suite 607 New York NY 10017	509 (a) (2)	2,000
Riding to the Top	PO Box 1928, Windham ME 04062	509 (a) (2)	5,000
Temple Emanu-El	190 N County Rd, Palm Beach FL 33480	509 (a) (1)	1,835
United Jewish Appeal-New York	111 Eighth Ave, Suite 11E, New York NY 10011-5201	509 (a) (2)	5,000
University of Maine	2 Alumni Place, Orono ME 04-469	509 (a) (1)	9,550
University of Maine Foundation	2 Alumni Place, Orono ME 04469	509 (a) (1)	2,000
University of New Hampshire	9 Edgewood Rd Durham NH 03824-1934	509 (a) (1)	550
UVM College of Medicine	89 Beaumont Ave , Burlington VT 05405	509 (a) (1)	2,500
World Jewish Congress	501 Madison Ave , New York NY 10022	509 (a) (2)	2,000
World Wildlife Fund	1250 24th St , Washington D C 20037	509 (a) (2)	250
Zionist Organization of America	4 East 34th St, 3rd Floor, New York NY 10016	509 (a) (2)	250
Collin Bates Scholarship Fund	14 Goodridge Drive, Orono ME 04473	503 (c) (3)	000,1
Boston Adult Literacy Fund	160 Boylston St. Boston MA 02116	509 (a) (2)	750
			96.770

Form (8868 (Rev. 4-2009)			Pa	ge 2
• If y	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this b	XX		▶ 🗓	
	Only complete Part II if you have already been granted an automatic 3-month extension on a previously file		 868.		
	ou are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).				
E		copies n	eeded).		
Туре	Name of Exempt Organization MAX KAGAN FAMILY FOUNDATION	Empl	oyer ider	tification num	ber
print	C/O PAULA KAGAN, TRUSTRE	图 0:	L-601	9033	
File by extende due dat filing th	Number, street, and room or suite no. If a P.O. box, see instructions.	For IF	S use on	ly 	
return. Instruct	See City, town or post office, state, and ZIP code. For a foreign address, see instructions.				
Chec	* type of return to be filed (File a separate application for each return): Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A Form 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720	=	rm 5227 rm 6069	Form 8	870
STOR	Pl Do not complete Part II if you were not already granted an automatic 3-month extension on a previo	usly file	d Form 8	868.	
Te ● if t	PAULA KAGAN se books are in the care of ▶ 12 ALPINE COURT, DIRIGO PINES - ORONO, slephone No. ▶ (207)866-0457 FAX No. ▶ the organization does not have an office or place of business in the United States, check this box			▶ □	
• If 1	this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the	his is for	the who	e group, check	this
box		ll memb	ers the ex	tension is for.	
4	request an additional 3-month extension of time until NOVEMBER 15, 2010.				
5	For calendar year 2009, or other tax year beginning, and ending				<u>_</u> .
6	If this tax year is for less than 12 months, check reason: Initial return Final return		Change I	accounting pa	riod
7	State in detail why you need the extension ADDITIONAL TIME IS NEEDED TO GATHER THE INFORMATION N	ECES	SARY	TO FILE	A
	COMPLETE AND ACCURATE RETURN.				
8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any				
	nonrefundable credits. See instructions.	8a	\$	1,4	<u> 79.</u>
ь	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated				
	tax payments made. Include any pnor year overpayment allowed as a credit and any amount paid	2000		4 4	
	previously with Form 8868.	8b_	_\$	1,4	<u>/9.</u>
C	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit	1		•	^
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instruction	s. 8c	\$		0.
	Signature and Verification				
Unde it is t	r penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to rue, correct, and complete, and that I am authorized to prepare this form.	the best o	f my know	ledge and belief,	
Signa	sture > (Upm dWldtTitle > CPA	Date	<u>▶ </u>	-11-10	
			Fo	rm 8868 (Rev. 4-	-2009)