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990-PF

SCANNED NOV

Return of Private Foundation

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

OMB No 1545-0052 2010

Department of the Treasury Internal Revenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements For calendar year 2010, or tax year beginning 20 2010, and ending G Check all that apply Initial return Initial return of a former public charity Final return Amended return Address change Name change Name of foundation CASCADE FOUNDATION A Employer identification number aka DANIEL DIBNER 20-4956488 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see page 10 of the instructions) P O BOX 913 (203) 903-0762 City or town, state, and ZIP code C If exemption application is pending, check here ROCKPORT, ME 04856-0913 1. Foreign organizations, check here 2 Foreign organizations meeting the 85% test, check here and attach computation X Section 501(c)(3) exempt private foundation H Check type of organization Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated under section 507(b)(1)(A), check here I Fair market value of all assets at J Accounting method X Cash Accrual end of year (from Part II, col (c), Other (specify) F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here • • • • line 16) > \$ 21,288,806 (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and for charitable amounts in columns (b), (c), and (d) may not necessarily equal (b) Net investment (c) Adjusted net expenses per псоте books income the amounts in column (a) (see page 11 of the instructions)) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 2 if the foundation is not required to attach Sch B 3,499 3,499 3.499 3 Interest on savings and temporary cash investments · · · · $635, \overline{484}$ 635,484 635,484 4 Dividends and interest from securities . . . 14. 1 Ţ. Gross rents · · · · · · ج ج د کا ع 5a b Net rental income or (loss) R 10,775 Net gain or (loss) from sale of assets not on line 10 · · · · · b 10,775 apital gain (et inchmettron) Part IV, line 2) · · · 7 Я Net short-term-capital.gain. 10,775 12 9 »٠¿ <u>ښ</u> ź 10a Cost of goods sold \$. 8 b Gross profitor (655) (attach schedule) C Other income (attach schedule) 71,297 71,297 71,297 11 Total. Add lines 1 through 11 · · · · · · · · · · · · · · · · 721,055 721,055 721,055 12 208,796 208,796 208,796 13 Compensation of officers, directors, trustees, etc · · · · · 14 Other employee salaries and wages · · · · 20,660 20,660 20,660 15 Pension plans, employee benefits . 8,685 8.685 16a Legal fees (attach schedule) · · · · · STM108 11,200 11,200 11,200 Accounting fees (attach schedule) · · · · · b STM109 85,870 85,870 85.870 Other professional fees (attach schedule) C 106 106 106 17 STM110 Taxes (attach schedule) (see page 14 of the instructions) 21,404 21,404 21,404 18 2,963 2,963 2,963 Depreciation (attach schedule) and depletion . Occupancy 1,116 1,116 1,116 20 13,853 10,639 10,639 3,214 21 Travel, conferences, and meetings · · aЕ 218 218 218 22 Printing and publications · · · · · STM103 9,719 10,302 10,302 70 23 Other expenses (attach schedule) . . 24 Total operating and administrative expenses. 384,590 373,274 373,274 11,969 Add lines 13 through 23 · · · · · · · · · 669,016 669,016 . \$9 25 × 1/2 373,274 680,985 1,053,606 373,274 26 Total expenses and disbursements. Add lines 24 and 25 · Subtract line 26 from line 12 27 (332,551 Excess of revenue over expenses and disbursements · · 347,781 Net investment income (if negative, enter -0-) · · · · · ·

For Paperwork Reduction Act Notice, see page 30 of the instructions.

Adjusted net income (if negative, enter -0-)

A.

EEA

Form 990-PF (2010

347,781

[D	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	of year '
Pi	art II	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing · · · · · · · · · · · · · · · · · · ·	104,020	(60,991)	(60,99
	2	Savings and temporary cash investments · · · · · · · · · · · · · · · · · · ·	2,820,899	2,043,445	2,043,445
	3	Accounts receivable >	了。这个位置的"大型"的"大型"。 第二次,在1980年的第二人,在1980年的第二人,在1980年的第二人,由1980年的第二人,由1980年的第二人,由1980年的第二人,由1980年的第二人,由1980年的第二人,由1980年的第二人,由1980年的		A State Seat Line Die
	1	Less allowance for doubtful accounts			
	4	Pledges receivable	See and the second		10000
		Less allowance for doubtful accounts	, , , , , , , , , , , , , , , , , , , 		
	5	Grants receivable · · · · · · · · · · · · · · · · · · ·			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see page 15 of the			
Α		instructions)	19,194	19,194	19,194
S	7	Other notes and loans receivable (attach schedule)			
s e		Less allowance for doubtful accounts			
t	8	Inventories for sale or use · · · · · · · · · · · · · · · · · · ·			
s	9	Prepaid expenses and deferred charges · · · · · · · · · · · · · · · · · · ·			
	10a	Investments - U S. and state government obligations (attack settlessele)	3,132,234	3,827,277	4,016,611
		Investments - corporate stock (attach schedule) · · · · STM137	3,439,827	8,022,476	7,661,989
		Investments - corporate bonds (attach schedule) · · · · STM138	8,254,016	4,021,464	4,252,441
	1	Investments - land, buildings, and equipment basis			
	' '	Less accumulated depreciation (attach schedule)	Section 2) Printed (Section 2)	· · · · · · · · · · · · · · · · · · ·	and the second of the second o
	12				
	13	Investments - mortgage loans · · · · · · · · · · · · · · · · · · ·	2,959,896	2,906,795	3,298,617
	1	Land, buildings, and equipment basis	(2) (2) (2) (2) (2) (3) (4) (4)		MARKET STATES
	' -	Less accumulated depreciation (attach STALL)	18 . New Medical States and the case	5,516	7,500
	15	Other assets (describe STM120	5,800	5,800	50,000
	1	Total assets (to be completed by all filers - see the			
	''	Instructions Also, see page 1, Item I) · · · · · · · · · · · · · · · · · ·	20,735,886	20,790,976	21,288,806
_	17	Accounts payable and accrued expenses · · · · · · · · · · · · · · · · · ·	20/100/000		CONTRACTOR AND CONTRACTOR
ī		Grants payable			一次常克斯姆
a h	18	Deferred revenue · · · · · · · · · · · · · · · · · · ·			
Ĩ	19	Loans from officers, directors, trustees, and other disqualified persons			
ľ	20	Mortgages and other notes payable (attach schedule) · · · · · · ·			
t	21		8,028	8,454	
ė	22	Other liabilities (describe STM121) Total liabilities (add lines 17 through 22) · · · · · · · · · ·	8,028	8,454	
<u>s</u>	23		0,020	0,101	
		Foundations that follow SFAS 117, check here · · · · · ▶ X and complete lines 24 through 26 and lines 30 and 31.			
N -			20,727,858	20,782,522	
еΠ	24	Temporanly restricted • • • • • • • • • • • • • • • • • • •	20,727,030	207.027022	
t n	25	Permanently restricted · · · · · · · · · · · · · · · · · · ·			
d	26				
A S R		Foundations that do not follow SFAS 117, check here · · ▶			
s B	1	and complete lines 27 through 31.			
eι	2'	Capital stock, trust principal, or current funds			
t a	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
C	29	Retained earnings, accumulated income, endowment, or other funds			
0 0	30	Total net assets or fund balances (see page 17 of the	20,727,858	20,782,522	
, s		instructions) · · · · · · · · · · · · · · · · · · ·	20,727,636	20,702,322	
	31	Total liabilities and net assets/fund balances (see page 17	20 725 996	20,790,976	Tanka Alaka
No. 30	<u> </u>	of the instructions)	20,735,886	20,790,976	1、6.60 x 1.40 x
P	<u>artilli</u>	Analysis of Changes in Net Assets or Fund Balance	ces		<u> </u>
1	Total	net assets or fund balances at beginning of year - Part II, column (a), li	ne 30 (must agree with		20 727 959
	end-c	of-year figure reported on prior year's return) · · · · · · · · · · · · · · · · · · ·		1	20,727,858
		amount from Part I, line 27a · · · · · · · · · · · · · · · · · · ·	• • • • • • • • • • • •		(332,551
3	Other	r increases not included in line 2 (itemize) STM115		3	389,264
		ines 1, 2, and 3 · · · · · · · · · · · · · · · · · ·			20,784,571
		eases not included in line 2 (itemize) STM116		5	20,782,522
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II,	, column (b), line 30 · · ·	6	20,182,522

Par	(a) List and descrit	and Losses for Tax on Inve be the kind(s) of property sold (e.g., real estat shouse, or common stock, 200 shs MLC Co)	е,	(b) How acquired P-Purchase D-Donation	(c) Date acquired (yr , mo , day)	(d) Date sold (yr , mo , day)
1a					2009-09-30	2010-04-26
b						
С	·					
d						
е						<u> </u>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or oplus exper	other basis use of sale		ain or (loss) (f) minus (g)
а	408,871			398,096		10,775
b _	· · · · · · · · · · · · · · · · · · ·					
С				!		
d					*,	<u> </u>
е	<u> </u>					
<u>C</u>	omplete only for assets sho	owing gain in column (h) and owned	by the foundation o	on 12/31/69	(f) Gains (Col (h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess over col (col (k), but no	t less than -0-) or from col (h))
а						10,775
b						
С						
d						
е						
2 C	apital gain net income or (r		so enter in Part I, I enter -0- in Part I, Ii		2	10,775
3 N	et short-term capital gain o	r (loss) as defined in sections 1222(5				
	· ·	ne 8, column (c) (see pages 13 and		ns) · · •		
lf	(loss), enter -0- in Part I, lii	ne 8 · · · · · · · · · · · · · · · · · ·		}	3	10,775
Par	V. Qualification U	Inder Section 4940(e) for Re	duced Tax on	Net Investme	nt Income	
f "Ye	s," the foundation does not nter the appropriate amoun	section 4942 tax on the distributable qualify under section 4940(e) Do not in each column for each year, see p	t complete this pai	t		Yes X No
Cal	(a) Base period years endar year (or tax year beginning			(c) noncharitable-use asse	ets (col (b)	(d) tribution ratio divided by col (c))
	2009	22,168,6		14,161,4		1.565421
	2008	17,346,3		16,495,5		1.05158
	2007	17,538,7		15,837,0		1.107454
	2006	16,005,5	35	14,250,0	45	1.123192
	2005					
2 To	otal of line 1, column (d)				2	4.847647
	<u> </u>	the 5-year base period - divide the to on has been in existence if less than		· ·	3	0.969529
4 F	nter the net value of nonch	aritable-use assets for 2010 from Pai	rt X. line 5		4	19,713,317
						_
						19,112,633
6 Eı	nter 1% of net investment ii	ncome (1% of Part I, line 27b) · · ·			6	3,478
7 A	dd lines 5 and 6 · · · · ·				7	19,116,111
		from Part XII, line 4 · · · · · ·			8	21,502,442
		than line 7, check the box in Part VI	, line 1b, and comp	lete that part using	g a 1% tax rate Se	e the
D.	art VI instructions on page	18				
<u> </u>				EEA		Form 990-PF (2010

Form	1990-PF (2010) CASCADE FOUNDATION	20-4	95648	8	ı	Page 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page	18 of	the inst	truc	ions)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	- 4,4		-,	•	
		,	1: "	;		,
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1			3	3,47
	here ▶ X and enter 1% of Part I, line 27b · · · · · · · · · · · · · · · · · · ·	,				2
¢	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of	` .	, ,,, ,		4	ξ
	Part I, line 12, col (b)		l			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	<u>L</u>			1
3	Add lines 1 and 2 · · · · · · · · · · · · · · · · · ·	3			3	3,478
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- · · · · · · · · ·	5			3	3,478
6	Credits/Payments			3%	* ,-	18.76.3
а	2010 estimated tax payments and 2009 overpayment credited to 2010 · · 6a 7,020			٠.	و جود و چارچ پیران	
b	Exempt foreign organizations - tax withheld at source • • • • • • • • • • • • • • • • • • •	\$2.55°		ِ ميني	3. 3 'd 0.	
C	Tax paid with application for extension of time to file (Form 8868) · · · · · 6c	建筑		*****	\$1.00 \$1.00	
d	Backup withholding erroneously withheld 6d		853.8			
7	Total credits and payments Add lines 6a through 6d · · · · · · · · · · · · · · · · · ·	7			7	7,020
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached · · · · ·	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			3	3,542
11	Enter the amount of line 10 to be Credited to 2011 estimated tax ▶ 3,542 Refunded ▶	11				
Par	TVII-A: Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		\$ 1 2.6		Yes	No
	participate or intervene in any political campaign?		[1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19					
	of the instructions for definition)?			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		<u>*</u>		(A)	323
	published or distributed by the foundation in connection with the activities		13			
С	Did the foundation file Form 1120-POL for this year?		•• [1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		₹°	19,333	Y 34.	
	(1) On the foundation ►\$ (2) On foundation managers. ►\$		3			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed					
	on foundation managers. > \$		Į.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		· · [2		X
	If "Yes," attach a detailed description of the activities		13.00 24.00 6.00	X. (§	333	1
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	f	2. 2.	1		
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		· · [3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		• • [4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		\cdots [4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		\cdots	5		X
	If "Yes," attach the statement required by General Instruction T			100	70.3	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		3			
	conflict with the state law remain in the governing instrument?		· · L	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part III, col (c)	нXV	• • [7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the		8			NAT.
	instructions) ME					级
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			400		
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		1 "	8Ь	Χ	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		13		N. A.B	79.24
	4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page				/	
	27)? If "Yes," complete Part XIV · · · · · · · · · · · · · · · · · · ·			9	Х	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their					
	names and addresses · · · · · · · · · · · · · · · · ·		-	10		Х

Form	1 990-PF (2010) CASCADE FOUNDATION 20-	-4956488	!	Page 5
Pa	rt VII-A Statements Regarding Activities (continued)			
	'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 page 20 of the instructions)	• • • 11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address N/A	<u> </u>		
14	The books are in care of DANIEL DIBNER Telephone no	203-903-	0762	
	Located at ▶ 688 COMMERCIAL STREET ROCKPORT, ME ZIP+4 ▶	04856		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041-Check here · · · · · ·			I
	and enter the amount of tax-exempt interest received or accrued during the year	5		
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, secunties, or other financial account in a foreign country?	16		x
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter	\$100	242.35	100 TO
	the name of the foreign country			
Da	rt VII-Bi Statements Regarding Activities for Which Form 4720 May Be Required	invers.	- 1340 J (p. 14)	1: 1
[F. al	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):		4	1010
ıa		No S		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? · · · · · · · · · · · · · · · · · · ·	No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? · · · · · Yes			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? • • • • • • • • X Yes	No 3		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
		No 👢		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after	No	1	
		J NO JA		
D	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	· · · 1b	10 T. 12.12	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)? • • • • • • • • • • • • • • • • • • •			355 T. W
	Organizations relying on a current notice regarding disaster assistance check here • • • • • • • • • • • • • • • • • •) Military		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		E) SURVEYS	13 100 V
_	were not corrected before the first day of the tax year beginning in 2010?	· · · 1c	Mi - Mi - Mi	A 4.2
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			AND T
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			2.046 3.2073
а	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e. Part XIII) for tax year(s) beginning before 2010?	No 💍		
		J 140		
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	· · · 2b	\$ 1.752 x 36	MANUAL .
	all years listed, answer "No" and attach statement - see page 22 of the instructions) · · · · · · · · · · · · · · · · · ·	20	8 0 2 0 m	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	20/ 1 - 1 - 1 - 20/ 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	No		
	· · · · · · · · · · · · · · · · · · ·	NO		
b	If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of		影響	
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	3.50		Service.
	foundation had excess business holdings in 2010) · · · · · · · · · · · · · · · · · ·	• • • 3b	 	77
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? •	• • • 4a	p Ø, `. `-	X 2000
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		16.74	Miller.
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?	4b	1	<u>X</u>

Form 990-PF (2010) CASCADE FOUNDATION							20-495	6488	' Þage 6
Part VII-B Statements Regarding Activities	es for W	nich Forn	1 4720	May Be F	Requi	ed (ontinued)	-	,
5a During the year did the foundation pay or incur any a		11011 1 0111	1 47 20	may Do .	toqu.	<u> </u>			<u> </u>
(1) Carry on propaganda, or otherwise attempt to in		uslation (sec	tion 494	15(e))? · ·		Yes	X No	_	ļ. ļ.
(2) Influence the outcome of any specific public elec							(4.4)	, , ,	
directly or indirectly, any voter registration drive				-		Yes	X No	,	. 11,
(3) Provide a grant to an individual for travel, study,						Yes	X No	1 3 3	<u> </u>
(4) Provide a grant to an organization other than a c							[23]	200	1 46.5
section 509(a)(1), (2), or (3), or section 4940(d)(Yes	X No		
(5) Provide for any purpose other than religious, cha							<u>V</u>	47 34.	
purposes, or for the prevention of cruelty to child	•		•			Yes	X No	1000	
b If any answer is "Yes" to 5a(1)-(5), did any of the tra							<u>V</u>	2.	
				•			c)2	.5 5b	1 1.
Regulations section 53 4945 or in a current notice re Organizations relying on a current notice regarding or								20	
								1, 17	1 1
c If the answer is "Yes" to question 5a(4), does the four						□ v	□ Na		
because it maintained expenditure responsibility for						Yes	∐ No	ψ. · · ·	
If "Yes," attach the statement required by Regulation									
6a Did the foundation, during the year, receive any fund									
on a personal benefit contract?						Yes	X No	93.5	
b Did the foundation, during the year, pay premiums, o	airectly or i	nairectly, on	a perso	nai benetit c	ontract		• • • • •	6b %্রত্য	X
If "Yes" to 6b, file Form 8870					_		EE		
7a At any time during the tax year, was the foundation a		•				Yes			
b If yes, did the foundation receive any proceeds or ha					-			7b	<u> </u>
Part VIII Information About Officers, Dire	ectors, T	rustees,	Found	lation Mai	nager	s, High	ly Paid	Emplo	yees,
and Contractors									····
1 List all officers, directors, trustees, foundation man								1	
(a) Name and address		and average er week	(c)Co	mpensation paid, enter		Contributi oyee bene			ense account, aliowances
See 990_OFOV	+	o position		-0-)	and de	erred com	pensation	Outer	
DANIEL DIBNER	MANAGEI		STMA				_		_
688 COMMERCIAL STREET, ME 04856	ļ	35		89,398			0		0
VICTORIA DIBNER	ASST M		STMA				_		•
47 EAST MEADOW RD WILTON, CT 06897	ļ	35		89,398	ļ		0		0
AURORA C DIBNER	DIRECTO		STMA				_		_
74 GLOUCHESTER COURT, CT 06111		5		10,000			0		0
AVALON B DIBNER	DIRECTO		STMA	- - -			_		_
3131 WALNUT STREET, PA 19104		<u> </u>		10,000			0		
2 Compensation of five highest-paid employees (oth	er than th	ose include	d on lin	ie 1 - see pa	ge 23 c	of the ins	structions).	
If none, enter "NONE."				T					
		(b) Title, and a	average				ributions to se benefit	(e) Evo	ense account,
(a) Name and address of each employee paid more than \$50,000	0	hours per w	eek	(c) Compe	nsation	plans an	d deferred		allowances
		devoted to po	SILIOIT			comp	ensation		
NONE						1			
		······				ļ			
]			
						}			
						ļ			
	1			I .		1			
Total number of other employees paid over \$50,000 · · ·							• • • •		

Part VIII Information About Officers, Directors, Trustees, F and Contractors (continued)	oundation Managers, Highly	Paid Employees,
3 Five highest-paid independent contractors for professional services (see	page 23 of the instructions). If none	e, enter "NONE."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
GOLDMAN SACHS		STMC01
200 WEST STR. 39TH FLOOR NEW YORK, NY 10282	MANAGE FUNDS	85,870
Total number of others receiving over \$50,000 for professional services · · · ·		>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant state organizations and other beneficiaries served, conferences convened, research papers produced, et		Expenses
1 UNITED MID COAST CHARTIES GRANT FOR CHARITIES THAT		
BENEFIT THE PEOPLE OF MAINE		
		115,000
2 SMITHSONIAN INSTITUTE SUPPORT FOR THE BERN DIBNER		
LIBRARY		
		83,334
3 PENBAY HEALTH CARE FUND WOMEN HEALTH FOR LOW INCOM	3	
MOTHERS		
A CONTRACTOR CONTRACTO		50,000
4 COMMUNITY SCHOOL CHARTIABLE EDUCATION OF WOMEN &		
CHILDREN		35,000
D-41VD2 Common of Dramman Balatad Investments (SOOD	age 24 of the instructions)	35,000
Part IX-B3 Summary of Program-Related Investments (see part ix-B3) Summary of Program-Related Investments		Amount
Describe the two largest program-related investments made by the foundation during the tax year of GOLDMAN SACHS VARIOUS FUNDS \$ 17,914,662	i intes i and 2	Amount
,		
		17,914,662
2 OTHER INVESTMENTS STATEMENT 118 \$2,906795		
		2 22 725
All other program-related investments. See page 24 of the instructions		2,906,795
3		
Total. Add lines 1 through 3 · · · · · · · · · · · · · · · · · ·		20,821,457

COLL	1990-PF (2010) CASCADE FOUNDATION	20-4956	rage
Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign fo see page 24 of the instructions.)	undations,	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes	. ,	
а	Average monthly fair market value of securities	1a	17,527,339
b	Average of monthly cash balances	1b	2,453,687
С	Fair market value of all other assets (see page 25 of the instructions)	1c	32,494
d	Total (add lines 1a, b, and c)	1d	20,013,520
e	Reduction claimed for blockage or other factors reported on lines 1a and	\$**	
	1c (attach detailed explanation) · · · · · · · · · · · · · · · · · · ·		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d · · · · · · · · · · · · · · · · · ·	3	20,013,520
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25 of		
	the instructions)	4	300,203
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 · ·	5	19,713,317
6	Minimum investment return. Enter 5% of line 5 · · · · · · · · · · · · · · · · · ·	6	985,666
Pai	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private of	erating	
	foundations and certain foreign organizations check here and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	985,666
2a	Tax on investment income for 2010 from Part VI, line 5 · · · · · · · · 2a 3,478		-
b	Income tax for 2010 (This does not include the tax from Part VI) · · · · 2b		
С	Add lines 2a and 2b · · · · · · · · · · · · · · · · · ·	2c	3,478
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	982,188
4	Recoveries of amounts treated as qualifying distributions · · · · · · · · · · · · · · · · · · ·	4	
5	Add lines 3 and 4 · · · · · · · · · · · · · · · · · ·	5	982,188
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1 • • • • • • • • • • • • • • • • • •	7	982,188
Pai	Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	E LA	
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 · · · · · · · · · · · · · · · · · ·	1a	680,985
b	Program-related investments - total from Part IX-B	1b	20,821,457
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.	100	
а	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	21,502,442
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 (see page 26 of the instructions) · · · · · · · · · · · · · · · · · · ·	5	3,478
6	Adjusted qualifying distributions. Subtract line 5 from line 4 · · · · · · · · · · · · · · · · · ·	6	21,498,964
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether	the foundation	n
	qualifies for the section 4940(e) reduction of tax in those years		

Par	t XIII Undistributed Income (see page 26	of the instructions)			
		i	(b)	(c)	(d)
1	Distributable amount for 2010 from Part XI,	(a) Corpus	Years prior to 2009	(c) 2009	2010
	line 7	* , , , , ,	,		982,188
2	Undistributed income, if any, as of the end of 2010	- 5 ⁵ %	, , ,	\$\frac{1}{2} \frac{1}{2} \frac{1}{2} \frac{1}{2} \frac{1}{2} \frac	
а	Enter amount for 2009 only • • • • • • • • •	for 10 12 12 12 12 12 12 12 12 12 12 12 12 12	\$ '\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	*	
b	Total for prior years , ,	, , ,	· · · · · · · · · · · · · · · · · · ·	* 'A	\$ \$ \tau \tau \tau \tau \tau \tau \tau \tau
3	Excess distributions carryover, if any, to 2010	s 'y -			3 6 3 3 4 3
a	From 2005 • • • • • • • •		Maria Company		الأواجات المركبين المستساسة
b	From 2006 • • • • • • • •				3. De 18
c	From 2007		,		
٦	From 2008		, *, , 7 }		
u	From 2009 · · · · · · 249,297	and the state of	(, , ,		KI BAN 1
٤	Total of lines 3a through e · · · · · · · · · · · ·	249,297	· , }, , , `		4.5
١,	Qualifying distributions for 2010 from Part XII,	243,237	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	288 3 m v v v	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
4					· as the same of
	fine 4 \(\bigs \)		Share Control	Contraction of the Contraction o	E. W. Committee
a	Applied to 2009, but not more than line 2a · · ·	20 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Ass	- *\$*. 3*
b	Applied to undistributed income of prior years				
	(Election required - see page 26 of the instructions)		*.		\$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
С	Treated as distributions out of corpus (Election		leas o		
	required - see page 26 of the instructions) · · ·	930,282		2012 3 N	\$ A
d	Applied to 2010 distributable amount · · · · ·	1/2	\$35 P. C.		680,985
е	Remaining amount distributed out of corpus · · ·	51,906	4 1 2 - 30		18 32 38
5	Excess distributions carryover applied to 2010 •	249,297		*	249,297
	(If an amount appears in column (d), the same	******			
	amount must be shown in column (a))		, , , , , , , , , , , , , , , , , , ,	[Kr.] [Sr.].	**************************************
6	Enter the net total of each column as				1、銀数次で
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5 -	982,188			1 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
b	Prior years' undistributed income Subtract			P (1)3.	
	line 4b from line 2b · · · · · · · · · · · · · · ·				
С	Enter the amount of prior years' undistributed	, 384		78 July 1	1.3.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.
	income for which a notice of deficiency has			1.2	
	been issued, or on which the section 4942(a)				
	tax has been previously assessed · · · · · ·				
d	Subtract line 6c from line 6b Taxable	*******		* , \$1 ,	1 . 1 1 . 3
_	amount - see page 27 of the instructions · · · ·				
_	Undistributed income for 2009 Subtract line		* / 38	***	47, 30
·	4a from line 2a Taxable amount - see page			_	3.00
	27 of the instructions · · · · · · · · · · · · · · · · · · ·				
f	Undistributed income for 2010 Subtract lines	y 3	1,2		- 1 (% -)
'	4d and 5 from line 1. This amount must be	100			
	distributed in 2011 · · · · · · · · · · · · · · · ·				51,906
-	Amounts treated as distributions out of corpus	, , , , , , , , , , , , , , , , , , , ,		10 m	4 A.T. 1.8
7	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
_	instructions) · · · · · · · · · · · · · · · · · · ·				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
8	Excess distributions carryover from 2005 not	•			
	applied on line 5 or line 7 (see page 27 of the				
	instructions) · · · · · · · · · · · · · · · · · · ·		16 - 31 (12, 14)		573 (\$75) 3 4 5 4 7 4 6 6 6 6 6 6 6 1 1 1
9	Excess distributions carryover to 2011.				
	Subtract lines 7 and 8 from line 6a · · · · · ·		1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1		17 6 2 No. 11
10	Analysis of line 9			图 "我们是我们的	
а	Excess from 2006 · · · · ·				
b	Excess from 2007 · · · ·				
С	Excess from 2008 · · · · ·				
d	Excess from 2009 · · · · ·				
е	Excess from 2010 · · · · ·		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		The Continue Hall

Part	<u>t XIV Private Operating Foun</u>	dations (see page	27 of the instructions a	and Part VII-A, question	า 9)	
1a	If the foundation has received a ruling of	or determination letter	that it is a private oper	ating		•
	foundation, and the ruling is effective for	or 2010, enter the date	of the ruling · · · ·		2006-09-1	L 5
b	Check box to indicate whether the foun	dation is a private ope	rating foundation desc	ribed in section	4942(j)(3) or 4	942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year	•	Prior 3 years		
income from Part I or the minimum investment return from Part X for		(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
	each year listed	347,781	158,978	247,762	459,816	1,214,337
b	85% of line 2a • • • • • • • •	295,614	135,131	210,598	390,844	1,032,187
С	Qualifying distributions from Part XII, line 4 for each year listed · · · · ·	21,502,442	20,606,874	17,346,353	17,544,581	77,000,250
d	Amounts included in line 2c not used directly for active conduct of exempt activities •					
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c · · · ·	21,502,442	20,606,874	17,346,353	17,544,581	77,000,250
3	Complete 3a, b, or c for the alternative test relied upon.					
а	"Assets" alternative test - enter: (1) Value of all assets	20,092,448	20,744,246	16,952,616	17,219,150	75,008,460
b	(2) Value of assets qualifying under section 4942(j)(3)(B)(i) · · · ·	20,061,938	20,710,894	16,924,153	17,681,716	75,378,701
U	"Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed	657,111	. 474,409	552,600	530,540	2,214,660
С	"Support" alternative test - enter (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) · · ·					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) · · · ·					
	(3) Largest amount of support from an exempt organization · · · · (4) Gross investment income · · ·	721,130	473,602	532,339	848,753	2,575,824
Part		•				
rail.					55,000 or more in	assets at
1	any time during the year Information Regarding Foundation M		<u>uie insuuctions.</u>			
a	List any managers of the foundation wh before the close of any tax year (but on	o have contributed mo	re than 2% of the total ted more than \$5,000)	contributions received (See section 507(d)(2	by the foundation))	
	NONE,					
b	List any managers of the foundation who ownership of a partnership or other entit				e portion of the	
·	NONE,					
2	Information Regarding Contribution,					
	Check here ▶ X if the foundation only unsolicited requests for funds If the foundation	ndation makes gifts, gr	ants, etc (see page 2			
	organizations under other conditions, co					
а	The name, address, and telephone num	ber of the person to w	nom applications shou	id be addressed:		
b	The form in which applications should be	e submitted and inform	ation and materials the	ey should include		
С	Any submission deadlines.					
d	Any restrictions or limitations on awards factors	, such as by geograph	ical areas, charitable fi	elds, kinds of institution	ns, or other	

Part XV Supplementary Information (continued)

Recipient Interest an inforcation of the control of	3 Grants and Contribution	ns Pai	id During the	Year or Approved	for Future Pa	yment	
NAME AND AGGIEST HOME OF DUSINESS A PROGRAMMENT OF PAGE OF AGE OF A PAGE OF AGE	Recipier		show any relationship to any foundation manager	status of		Amount	
UNITED MID COAST CHARITIES P 0 BOX 205 CAMDEN ME 04843 ADVISE BD NON PROFIT SMITHSULTION LIBRARY PO BOX 37012 MRC 154 WASHINGTON DC 20013-7012 NONE NON FROFIT PENBAY HEALTH CARE 22 WHITE ST BOCKLAND ME 04841 NONE NON FROFIT COMMINITY SCHOOL PO BOX 555 CAMDEN ME 04843 NONE EDUCATION SMILE TRAIN 245 5TH AVE SUITE 2201 NONE NON FROFIT NONE NON FROFIT CANDEN NY 10001 NONE NON FROFIT ABARDWAY ADVISE BD NON PROFIT SUPPORT DIBMER LIBRARY 83,334 FUND WOMEN HEALTH CENTER FOR LOW NON FROFIT FUND WOMEN HEALTH CENTER FOR LOW NON FROFIT CHARTIABLE EDUCATION OF NORAL SURGERY ORAL SURGERY ADVISE BD NON FROFIT FUND WOMEN HEALTH CENTER FOR LOW NON FROFIT NONE FOUNTAINON NORAL SURGERY ADVISE BD NON FROFIT FUND WOMEN HEALTH CENTER FOR LOW NORAL SURGERY ORAL SURGERY ADVISE BD NON FROFIT FUND WOMEN HEALTH CENTER FOR LOW NORAL SURGERY ADVISE BD NON FROFIT NON FROFIT NONE FOUNTAINON NATL FUND RAISER ADVISE BD NON FROFIT NONE NON FROFIT ADDITIONAL SURGERY NATL FUND RAISER ADVISE BD NON FROFIT NON FROFIT ADDITIONAL SURGERY NATL FUND RAISER ADVISE BD NON FROFIT NONE NON FROFIT NONE NON FROFIT ADDITIONAL SURGERY NATL FUND RAISER ADVISE BD NON FROFIT NONE NON FROFIT ADDITIONAL SURGERY NATL FUND RAISER ADVISE BD NON FROFIT NONE SUPPORT DIBMER FUND WOMEN HEALTH CENTER FOR LOW NON FROFIT NONE SUPPORT DIBMER FUND WOMEN HEALTH CENTER FOR LOW NON FROFIT NONE FUND WOMEN HEALTH CENTER FOR LOW NON FROFIT NONE SUPPORT DIBMER FUND WOMEN HEALTH CENTER FOR LOW NON FROFIT NONE SUPPORT DIBMER FUND WOMEN HEALTH CENTER FOR LOW NON FROFIT NONE FOR THE STER FOR LOW NON FROFIT NONE FOR THE STERNARY NONE THIS ADVISE BD NONE FOR THE LOW NON FROFIT NONE		business)	or substantial contributor	recipient			
DO DOX 205 CAMDEN ME 04843 ADVISE BD NON PROFIT 115,100 SMITHSONIAN INSTUTION LIBRARY PO BOX 37012 MRC 154 WASHINGTON DC 20013-7012 NONE NON PROFIT 118MRX PERMAY HEALTH CARE 22 WHITE ST ROCKLAND ME 04841 NONE NON PROFIT CHIRARY COMMUNITY SCHOOL PO BOX 555 CANDEN ME 04843 NONE EDUCATION OR WOMEN 6 CHILDREN 35,000 SMILE TRAIN 245 STH AVE SUITE 2201 NEW YORK NY 10016 NONE NON PROFIT 25,000 PLANNED PARENTHOOD 434 WEST 33RD ST NY 10001 NONE NON PROFIT 25,000 NATURE CONSERVANCY IN MAINE 14 MAINE 3T 101 MOUNT BAITLE ST 101 MOUNT BAITLE ST 101 MOUNT BAITLE ST 102 MOUNT BAITLE ST 103 MOUNT GAITLE ST 104 MOUNT GAITLE ST 105 MOUNT GAITLE ST 106 MOUNT GAITLE ST 107 MOUNT GAITLE ST 108 OF Approved for Adure payment 150 Approved for Adure payment					l		
MADEN ME 04843 ADVISE BD NON PROFIT 115,100		ITIES					
SMITHSONIAN INSTUTION LIBRARY PO BOX 37012 MRC 154 WASHINGTON DC 20013-7012 NONE NON PROFIT FUND WOMEN HEALTH CENTER FOR LOW ROCKLAND ME 04841 NONE NON PROFIT COMMINITY SCHOOL PO BOX 555 CAMDEN ME 04843 NONE EDUCATION OF WOMEN & CHILDREN 245 STH AVE SUITE 2201 NEW YORK NY 10016 NONE NON PROFIT NEW YORK NY 10001 NONE NON PROFIT NEW YORK NY 10001 NONE NON PROFIT NEW YORK NY 10001 NONE NON PROFIT LAND PRESERVATION ANGUE CONSERVANCY IN MAINE 14 MAINE ST ERINGWICK ME 04011 NONE TRUST 10.1 MOUNT HATTE ST CAMDEN ME 04843 NONE TRUST CAMDEN ME 04843 NONE TRUST CAMDEN ME 04843 NONE TRUST LAND PRESERVATION LAND PRESERVATION LAND PRESERVATION LAND PRESERVATION LAND PRESERVATION 15 Approved for future payment			04040	100000		2 XMAS CAMPAIGN	115 100
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PENBAY HEALTH CARE 22 WHITE ST ROCKLAND ME 04841 NONE NON PROFIT CENTER FOR LOW INCOME WOMEN 50,000 CCMMINITY SCHOOL. FO EOX 555 CAMDEN ME 04843 NONE EDUCATION WOMEN 6 CHILDREN 245 STH AVE SUITE 2201 NEW YORK NY 10016 NONE NON PROFIT PLANNED PARENTHOOD 434 WEST 33RD ST NEW YORK NY 10001 NONE NON PROFIT NATURE CONSERVANCY IN MAINE 14 MAINE ST 14 MAINE ST 101 MOUNT BATTIE ST CAMDEN ME 04843 NONE TRUST 101 MOUNT BATTIE ST CAMDEN ME 04843 NONE TRUST Total Total Total FUND WOMEN HEALTH CENTER FOR LOW CHARTLABLE EDUCATION ORAL SURGERY 25,000 NATURE CONSERVANCY IN MAINE 14 MAINE ST 101 MOUNT BATTIE ST CAMDEN ME 04843 NONE TRUST 25,000 Total Total Approved for future payment		DC.	20012-7012	NONE	NON PROFIT	LIBRARI	83 334
22 WHITE ST ROCKLAND ME 04841 NONE NON PROFIT CENTER FOR LOW INCOME WOMEN 50,000 COMMUNITY SCHOOL FOR BOX 555 CAMDEN ME 04843 NONE EDUCATION ORAL SURGERY ORAL SURGERY ORAL SURGERY ORAL SURGERY ORAL SURGERY NATIF FUND RAISER AND PROFIT AND PROFIT DATE AND PROFIT AND PROFIT DATE CENTER FOR LOW INCOME WOMEN 50,000 CHARTIAGE EDUCATION OF WOMEN 6 CHILDREN 35,000 ORAL SURGERY NATIF FUND RAISER AND PROFIT 25,000 NATURE CONSERVANCY IN MAINE 14 MAINE ST BRUNSHICK ME 04011 NONE TRUST LAND PRESERVATION LAND PRESERVATION TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL Approved for future payment	MEDITINGTON	DC .	20013-7012	NONE	NON PROPIL		03,334
22 WHITE ST ROCKLAND ME 04841 NONE NON PROFIT CENTER FOR LOW INCOME WOMEN 50,000 COMMUNITY SCHOOL FOR BOX 555 CAMDEN ME 04843 NONE EDUCATION ORAL SURGERY ORAL SURGERY ORAL SURGERY ORAL SURGERY ORAL SURGERY NATIF FUND RAISER AND PROFIT AND PROFIT DATE AND PROFIT AND PROFIT DATE CENTER FOR LOW INCOME WOMEN 50,000 CHARTIAGE EDUCATION OF WOMEN 6 CHILDREN 35,000 ORAL SURGERY NATIF FUND RAISER AND PROFIT 25,000 NATURE CONSERVANCY IN MAINE 14 MAINE ST BRUNSHICK ME 04011 NONE TRUST LAND PRESERVATION LAND PRESERVATION TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL Approved for future payment	PENBAY HEALTH CARE					FUND WOMEN HEALTH	
ROCKLAND							
COMMUNITY SCHOOL FO BOX 555 CAMDEN ME 04843 NONE EDUCATION OF WOMEN & CHILDREN 35,000 SMILE TRAIN 245 5TH AVE SUITE 2201 NEW YORK NY 10016 NONE NON FROFIT 25,000 FLANNED PARENTHOOD 434 WEST 33RD ST NEW YORK NY 10001 NONE NON FROFIT 25,000 NATURE CONSERVANCY IN MAINE 14 MAINE ST BRUNSWICK ME 04011 NONE TRUST 101 MOUNT BATTIE ST CAMDEN ME 04843 NONE TRUST 103 MOUNT BATTIE ST CAMDEN ME 04843 NONE TRUST 104 Approved for future payment Total		ME	04841	NONE	NON PROFIT		50,000
FO BOX 555 CAMDEN ME 04843 NONE EDUCATION OF WOMEN & CHILDREN 35,000 SMILE TRAIN 245 5TH AVE SUITE 2201 NEW YORK NY 10016 NONE NON PROFIT 25,000 PLANNED PARENTHOOD 434 WEST 33RD ST NEW YORK NY 10001 NONE NON PROFIT 25,000 NATURE CONSERVANCY IN MAINE 14 MAINE ST EQUINATION AND PRESERVATION COASTAL MOUNTAIN LAND TRUST 101 MOUNT BATTIE ST CAMDEN ME 04843 NONE TRUST Total							·
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Total

Part XV | Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment if recipient is an individual, Foundation Recipient Purpose of grant or show any relationship to status of contribution Amount any foundation manager recipient or substantial contributor Name and address (home or business) a Paid during the year LOWELL OBSERVATORY 1 PHILANTHROPIC 1400 W MARS HILL ROAD 2 SCIENTIFIC FLAGSTAFF 86001 ADVISE BD EDUCATION ΑZ RESEARCH 25,000 UNIVERSITY AT ALBANY SUPPORT LIBRARY 1400 WASHINGTON AVE ALBANY NY 12222 NONE EDUCATION 25,000 ROCKPORT PUBLIC LIBRARY OPERATING EXPS ONE LIMEROCK ST PO BOX 8 ROCKPORT NONE PUBLIC LIB 04856-0008 17,000 **ASHOKA** CHARTIBLE GIFT 1700 NORTH MOORE ST SUITE 2000 ARLINGTON VA 22209-1939 NONE NON PROFIT 10,000 SAVE THE CHILDREN CHILD CHARITY 54 WILTON ROAD WESTPORT CT 06880 NONE NON PROFIT 10,000 USO OPERATING EXPS P O BOX 96860 10,000 PEARL HARBOR HI 96860 NONE NON PROFIT ORPHAN FOUNDATION OF AMERICA ORPHANAGE SUPPORT 21351 GENTRY DRIVE PRINCETON 08540-9983 NONE NON PROFIT NJ 10,000 FARNSWORTH ART MUSEUM SUPPORT FINE ARTS 160 MUSEUM ST ROCKLAND ΜE 04841 NONE NON PROFIT 10,000 3a **b** Approved for future payment

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Part XV | Supplementary Information (continued)

Recij	oient		If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address	(home o	r business)	or substantial contributor	recipient	Contribution	,
a Paid during the year						
MEALS ON WHEELS					OPERATING EXPS	
39 SUMMER ST						
ROCKLAND	ME	04841-2989	NONE	NON PROFIT		10,00
NEW HOPE FOR WOMEN					SUPPORTS WOMEN	
9 PARK ST					SHELTER	
ROCKLAND	ME	04841	NONE	EDUCATION		10,00
FRIENDS OF VIA					SUPPORT HISTORIC	
PO BOX 82556					RESTORATION OF	
PITTSBURGH	PA	15218	NONE	NON PROFIT	MONUMENTS	10,00
CHILDREN ORGAN TRAN	SPLANT	ASSO			MEDICAL RESEARCH	
2501 COTA AVE						
BLOOMINGTON	IN	47403	NONE	NON PROFIT		10,000
MEDSHARE INTERNATIO	NAL				MEDICAL SUPPLIES	
3240 CLIFTON SPRING	S ROAD				FOR DISASTER AREA	
DECATUR	GA	30034	NONE	NON PROFIT	OF THE WORLD	10,00
NATURAL RESOUSCES D	EFENSE	COUN			ENVIRONMENTAL	
40 WEST 20TH ST					STUDIES	
NEW YORK	NY	10011	NONE	NON PROFIT		10,00
OCEANA					PRESERVE & PROTEC	
1350 CONN AVE NW					MARINE LIFE	
WASHINGTON	DC	20036-1722	NONE	NON PROFIT	WORLDWIDE	10,00
REED RELIEF					ENVIRONMENTAL	
631 GREENE ST					RESEARCH	
KEY WEST	FL	33040	NONE	NON PROFIT		10,000
Total · · · · · · · ·		• • • • • • • • •			· · · · · · ▶ 3a	
Approved for future paymen	nt					
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Part XV | Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient Purpose of grant or show any relationship to status of contribution Amount any foundation manager recipient or substantial contributor Name and address (home or business) a Paid during the year CAMDEN FIRST AID ASSOCIATION OPERATING EXPS 123 JOHN ST 10,000 CAMDEN ME 04843 NONE NON PROFIT WHEELCHAIR FOUNDATION SUPPLIES FREE WHEELCHAIRS FOR 3820 BLACKHAWK ROAD DANVILLE CA 94506 NONE NON PROFIT DISABLED CHILDREN 10,000 PROTECT ENVIRONMT ENVIRONMENTAL DEFENSE COUNCIL 1875 CONN AVE NW SUIE 600 INITATIVE 20009-5739 NON PROFIT 10,000 WASHINGTON DC NONR WORLDWIDE NURSING HOME CARE INC PROVIDES HEALTH & 180 SCHOOL ROAD SUPPORT FOR NON PROFIT 10,000 WILTON СТ 06897-2527 NONE ELDERLY & DISABLE ENTERPRENEURIAL ACCION INTERNATIONAL 56 ROLAND ST CHARLESTOWN MA 02129 NONE NON PROFIT 10,000 LUNA PRESERVATION SOCIETY OPERATING EXPS PO BOX 1866 BROOKLINE 02446 NONE NON PROFIT 5,000 MA ISLANDWOOD **EDUCATIONAL** 4450 BLAKELY AVE NONE NON PROFIT 5,000 BAINBRIDGE ISLAND WA 98110 OPERATING EXPS OWLS HEAD TRANSPORT MUSEUM 117 MUSUM ST 5,000 OWLS HEAD ME 04854 NONE NON PROFIT 3a b Approved for future payment Total 3b

Part XV . Supplementary Information (continued)

Name and address (home or business) a Paid dunng the year AMERICAN ASSOC OF UNIV WOMAN PO BOX 98045 WASHINGTON LEAGUE OF WOMEN VOTERS 1890 DIXVILLE AVE SUITE 113 NEW HAVEN CT 06514-3183 ABC OF WILTON PO BOX 7658 WILTON CT 06897-7658 WILTON CT 06897-7658 NONE CT 06897-7658 NONE NON PROFIT CT UNIVERS SUPPORTS EDUCATION SUPPORTS EDUCATION SUPPORTS EDUCATION SERVICE CHILDREN NON PROFIT CHILDREN CHILDREN CHILDREN CHILDREN CHILDREN CHILDREN EDUCATION SERVICE CHILDREN EDUCATION SERVICE CHILDREN EDUCATION CHILDREN	
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318 SENTOR DRIVE WESTPORT CT 06880 NONE NON PROFIT AMERICAN CANCER SOCIETY 825 BROOK ST 1-91 TECH CTR ROCKY HILL CT 06067-3450 NONE NON PROFIT ROTARY INTERNATIONAL FUND RAISER	
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ROCKY HILL CT 06067-3450 NONE NON PROFIT ROTARY INTERNATIONAL FUND RAISER	
ROTARY INTERNATIONAL FUND RAISER	
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Part XV | Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment lf recipient is an individual, Foundation Recipient Purpose of grant or show any relationship to any foundation manager status of Amount contribution recipient or substantial contributor Name and address (home or business) a Paid during the year FREE DENTAL CT FOUNDATION DENTAL OUTREACH SURGERY FOR POOR 835 WEST OUEEN ST NON PROFIT WORLDWIDE 5,000 CT 06489 NONE SOUTHINGTON FREE AUDIO RECORDING THE BLIND and DYSLEXIC RECORDING DEVICES 20 RESZEL ROAD FOR IMPAIRED 5,000 PRINCETON 08540-9983 NONE NON PROFIT SUPPORT FINE ARTS METROPOLITAN MUSEUM OF ART 1000 FIFTH AVE NONE NON PROFIT 3,200 NEW YORK 10028-0198 TEEN PROGRAMS CAMDEN TEEN CENTER PO BOX 831 04843 NONE NON PROFIT 2,500 MF. CAMDEN OPERATING EXPS WOMEN FOR WOMEN INTERNATIONAL 4455 CONN NW SUITE 200 2,500 NON PROFIT NONE WASHINGTON DC 20008 CONTINUED FUNDING WYNC FOUNDATION PF BROADCASTING PO BOX 1550 PUBLIC RADIO 1,500 NEW YORK NY 10116-1550 NONE PUBL RADIO OPERATING EXPS FRIENDS OF LINCOLN CENTER 70 LINCOLN CENTER PLAZA 1,000 10023-6583 NONE NON PROFIT NEW YORK NY ENVIRONMENTAL MARITIME AQUARIUM OF NORWALK STUDIES 10 NORTH WATER ST 06850 NONE NON PROFIT 1,000 NORWALK CT За b Approved for future payment

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	PF (2010) CASCADE FOUNDATION		·		20-49564	88 Page 1:
	/I-A Analysis of Income-Producing /	Activities				
Enter gros	s amounts unless otherwise indicated	Unrelated	business income	Excluded by se	ection 512, 513, or 514	(e)
_		(a) Business	(b) Amount	(c) Exclusion	(d) Amount	Related or exempt function income (See page 28 of
1 Progra	am service revenue	code		code		the instructions)
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	or (loss) from sales of assets other than inventory-			 		1,7,1
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е —						•
12 Subtot	tal Add columns (b), (d), and (e)	B (25.5)		S. 2. 3	638,983	
Part XV	/I-B Relationship of Activities to the Explain below how each activity for which incomplishment of the foundation's exempt	Accompli come is repor	ted ın column (e) o	f Part XVI-A cor	ntributed importantly to	
	instructions)					
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			EEA			Form 990-PF (2010)

Form 990-PF (2010) CASCADE FOUNDATION Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described No in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? Transfers from the reporting foundation to a noncharitable exempt organization of 1a(1) 1a(2) Other transactions (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) 1b(3) 1b(4) 1b(5) 1b(6) (6) Performance of services or membership or fundraising solicitations Sharing of facilities, equipment, mailing lists, other assets, or paid employees If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (c) Description of relationship (a) Name of organization (b) Type of organization

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Prepa	ırer	Firm's name PDQ Tax S	ervice Inc			Firm's EIN	
liaa C	\nlv	Simila address > 51 Adams	Drive			Phone no	

Saint Johnsbury VT 05819

802-748-3382

Current Officers, Directors, Trustees, and Key Employees

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans deferred compensation	(e) Expense account other allowances
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· .	Federal Supporting Statements	2010 _{PG01}
· Name(s) as shown on return		FEIN
CASCADE FOUNDATION		20-4956488

FORM 990PF, PART VIII COMPENSATION EXPLANATION

NAME

DANIEL DIBNER

EXPLANATION

WAGES PAID TO ADMINISTER THE FOUNDATION, CONTROL AND OVERSEE THE ASSETS

PG01

FORM 990PF, PART VIII COMPENSATION EXPLANATION

NAME

VICTORIA DIBNER

EXPLANATION

ASSIST THE MANAGER IN MANAGING AND OVERSEEING THE FOUNDATIONS ASSETS

PG01

FORM 990PF, PART VIII COMPENSATION EXPLANATION

NAME

AURORA C DIBNER

EXPLANATION

MEET WITH THE MANAGERS FOUR TIMES A YEAR TO ASSIST IN GUIDING THE FOUNDATION ASSETS

	Federal Supporting Statements	2010 _{PG01}
Name(s) as shown on return		FEIN
CASCADE FOUNDATION		20-4956488

FORM 990PF, PART VIII COMPENSATION EXPLANATION

NAME

AVALON B DIBNER

EXPLANATION

MEET WITH THE MANAGERS FOUR TIMES A YEAR TO AID IN GUIDING THE FOUDATION ASSETS

PG01

FORM 990PF, PART VIII COMPENSATION EXPLANATION

NAME

BERN L DIBNER

EXPLANATION

MEET WITH THE MANAGERS FOUR TIMES A YEAR TO AID IN GUIDING THE FOUNDATION ASSETS

PG 01 STATEMENT #C01

FORM 990PF, PART VIII, LINE 3 CONTRACTOR COMPENSATION EXPLANATION

NAME GOLDMAN SACHS

EXPLANATION

FEES DEDUCTED FROM VARIOUS CUSTOMER FUNDS DURING EACH QTR OF 2010

Federal Supporting Statements 2010 PG 01 Name(s) as shown on return CASCADE FOUNDATION 20-4956488 STATEMENT #115 FORM 990PF, PART III, LINE 3 OTHER INCREASES SCHEDULE 389,264 INHERITED FUNDS TOTAL 389,264 PG 01 STATEMENT #116 FORM 990PF, PART III, LINE 5 OTHER DECREASES SCHEDULE FEDERAL EXCISE TAX FOR 2009 1,584 MEALS @ 50% 465 2,049 TOTAL PG 01 STATEMENT #118 FORM 990PF, PART II, LINE 13 INVESTMENTS: OTHER SCHEDULE BOOK VALUE (EOY) BOOK VALUE (BOY) FMV (EOY) **CATEGORY** 1,001,243 1,051,912 GMS ALPHA IV PORTFOLIO 1,001,243 GS CAPITAL PARTNERS VI PARALLELL 585,084 646,432 606,304 VCFA PRIVATE EQUITY PARTNERS IV 330,000 224,230 665,321 34,890 30,080 GSCP VI PARALLEL AIV 43,569 945,000 STONE WORKS LTD 1,000,000 1,000,000 2,906,795 3,298,617 2,959,896 TOTAL PG 01 STATEMENT #120 FORM 990PF, PART II, LINE 15 OTHER ASSETS SCHEDULE BOY BOOK EOY BOOK DESCRIPTION 50,000 5,800 DAVINCI HORSE SCULPTURE (ANTIQUE) 5,800

5,800

50,000

TOTAL

Federal Supporting Statements 2010 PG 01 · Name(s) as shown on return CASCADE FOUNDATION 20-4956488 FORM 990PF, PART II, LINE 22 STATEMENT #121 OTHER LIABILITIES SCHEDULE **DESCRIPTION** BOY AMOUNT EOY AMOUNT PAYROLL TAXES 8,028 8,454 8,028 TOTAL 8,454 PG 01 FORM 990PF, PART II, LINE 10(A) STATEMENT #136 INVESTMENTS: U.S. GOVERNMENT OBLIGATION SCHEDULE BOOK VALUE (BOY) BOOK VALUE (EOY) FMV (EOY) **CATEGORY** GOLDMAN SACHS GOV FUNDS 3,132,234 3,827,277 4,016,611 3,827,277 TOTALS 4,016,611 3,132,234 PG 01 STATEMENT #137 FORM 990PF, PART II, LINE 10(B) INVESTMENTS: CORPORATE STOCK SCHEDULE CATEGORY BOOK VALUE EOY FMV BOY GOLDMAN SACHS VARIOUS STOCK FU 3,439,827 8,022,476 7,661,989 3,439,827 8,022,476 7,661,989 TOTALS PG 01 STATEMENT #138 FORM 990PF, PART II, LINE 10(C) INVESTMENTS: CORPORATE BOND SCHEDULE BOOK VALUE EOY FMV **CATEGORY** BOY 8,254,016 4,021,464 4,252,441 PRIVATE CORP BONDS TOTALS 8,254,016 4,021,464 4,252,441

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		Federal Su	Federal Supporting Statements	nents	2010 PG 01	-
Name(s) as shown on return					Your Social Security Number	
CASCADE FOUNDATION					20-4956488	
	FORM 990PE	FORM 990PF, PART I, LINE 23	- OTHER EXPENSES SCHEDULE	снероге	STATEMENT #103	
	REVENUE	NET	ADJUSTED	CHARITABLE		
DESCRIPTION	AND EXPENSES	INVESTMENT	NET INCOME	PURPOSE		
COMPUTER EXPENSE	726	726	726	0		
DUES	495	495	495	0		
MISCELLANEOUS K-1 EXP	72	725	725	0		
OFFICE EXPENSES	885	885	885	0		
TELEPHONE	3,608	3,608	3,608	0		
MEALS @ 50%	465	395	395	70		
REPAIRS	3,468	3,468	3,468	0		
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TOTALS	9,719	10,302	10,302	0/		
					PG 01	
	FORM 990	FORM 990PF, PART I, LINE 1	I, LINE 11 - OTHER INCOME SCHEDULE	снеродж	STATEMENT #106	
	REVENUE	NET	ADJUSTED			
DESCRIPTION	AND EXPENSES	INVESTMENT	NET INCOME			
K-1 MISC INCOME	3,212	3,212	3,212			
CAPITAL GAIN DISTRIBUTIONS K-1	67,750	67,750	67,750			
UBTI K-1	335	335	335			
TOTALS	71,297	71,297	71,297			
-						

		Federal Su	Federal Supporting Statements	nents	-	
Name(s) as shown on return CASCADE FOUNDATION					Your Social Security Number	
	FORM 990	FORM 990PF, PART I, LINE 16(A)	6(A) - LEGAL FEES SCHEDULE	СНЕДОТЪ	STATEMENT #107	
DESCRIPTION	REVENUE AND EXPENSES	NET INVESTMENT	ADJUSTED NET INCOME	CHARITABLE PURPOSE		
DECHERT LLP TOTALS	8,685	0 0	0 0	8, 685		
	FORM 990PF, PART I,		LINE 16(B) - ACCOUNTING FEES SCHEDULE	з schedule	PG 01 STATEMENT #108	
DESCRIPTION PDQ TAX SERVICE	REVENUE AND EXPENSES 11,200	NET INVESTMENT 11,200	ADJUSTED NET INCOME 11,200	CHARITABLE PURPOSE 0		
TOTALS	11,200	11,200	11,200	0		
	FORM 990PF, PART I, LINE	16 (C)	- OTHER PROFESSIONAL FEES SCHEDULE	FEES SCHEDULE	PG 01 STATEMENT #109	
DESCRIPTION GOLDMAN MANAGEMENT FEES	REVENUE AND EXPENSES 85,870	NET INVESTMENT 85,870	ADJUSTED NET INCOME 85,870	CHARITABLE PURPOSE 0		
TOTALS	85,870	85,870	85,870	0		
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		Federal Su	Federal Supporting Statements	ments	2010 PG 01	
Name(s) as shown on return CASCADE FOUNDATION					Your Social Security Number 20-4956488	1
	FORM 9	90PF, PART I, LIN	FORM 990PF, PART I, LINE 18 - TAXES SCHEDULE	STINGS	STATEMENT #110	
DESCRIPTION	REVENUE AND EXPENSES	NET INVESTMENT	ADJUSTED NET INCOME	CHARITABLE PURPOSE		
PAYROLL TAXES PROPERY TAXES FOREIGN TAXES PAID K-1	17,113 3,924 367	17,113 3,924 367	17,113 3,924 367	0 0 0		
TOTALS	21,404	21,404	21,404	0		
	FORM 990P	E, PART II, LINE	FORM 990PF, PART II, LINE 14 - LAND ETC. SCHEDULE	CHEDULE	PG01 STATEMENT #119	
DESCRIPTION COMPUTER & OFFICE EQUIPMENT	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION 10,351	END OF YEAR BOOK VALUE 5,516	FMV 7,500		
TOTAL	15,867	7 10,351	5,516	7,500		
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			Federal S	Federal Supporting Statements	tatemen	ts		2010 PG 01	PG 01
Name(s) as shown on return								Your Social	Your Social Security Number
CASCADE FOUNDATION								20-4956488	6488
		FORM 990PF	, PART I, LINE	FORM 990PF, PART I, LINE 19 - DEPRECIATION SCHEDULE	TION SCHEI	ULE		STATEME	STATEMENT #126
	DATE	COST OR	PRIOR YEAR	COMPUTATION			CURRENT YEAR	NET INVESTMENT ADJUSTED NET	ADJUSTED NET
DESCRIPTION	ACQUIRED	OTHER BASIS	DEPRECIATION	METHOD	RATE	LIFE	DEPRECIATION	INCOME	INCOME
LAPTOP COMPUTER SYSTEM	04-19-2006	2,319	1,883	×		5	436	436	436
ACCOUNTING SOFTWARE	04-19-2006	524	426	×		52	86	86	86
PRINTER	11-04-2007	617	388	×		rS.	123	123	123
TERA BACKUP UNIT	03-01-2008	420	168	×		c)	84	84	84
VCD MACBO LAPTOP	05-04-2008	2,690	1,076	×		Ŋ	538	538	538
FIREPROOF SAFE	08-26-2008	2,474	707	×		7	353	353	353
RENEW QUICKBOOKS SOFTWARE	09-01-2008	1,321	528	×		rs S	264	264	264
M-TECH LAPTOP	09-12-2008	5,061	2,024	×		₅	1,012	1,012	1,012
MICROSOFT OFFICE	11-06-2008	220	88	×		J.	44	44	44
SIRIUS RADIO	09-05-2010	221		Ξ		ഗ	11	- 11	11
TOTALS		15,867	7,288	11			2,963	2,963	2,963

Form 8868 (R	ev 1-2011)					Page 2
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	omplete Part II if you have already been granted					
If you are f	iling for an Automatic 3-Month Extension, co	omplete only	Part I (on page 1)			
Part II	Additional (Not Automatic) 3-Mont	, , , , , , , , , , , , , , , , , , , 		(no copies	neede	ed)
Type or	Name of exempt organization	_				
print	CASCADE FOUNDATION			20-495	6488	
File by the extended	Number, street, and room or suite no. If a P.O. box, see	instructions		_		
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filing the	City, town or post office, state, and ZIP code For a fore	ıgn address, see	instructions		copies needed) ver identification number -4956488 R g filed Form 8868. attach a , 20 8b \$ 7 8c \$	
return See instructions	ROCKPORT, ME 04856-09	13			Rec. C.	
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Application	1	Return	Application			Return
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Form 990-B	L	02	Form 1041-A			08
Form 990-E	Z	03	Form 4720			09
Form 990-P	F	04	Form 5227			10
Form 990-T	(sec 401(a) or 408(a) trust)	05	Form 6069			11
	(trust other than above)	06	Form 8870			12
	t complete Part II if you were not already gr			iously filed F	orm 886	8.
Telephone If the organ If this is for	are in the care of ▶ DANIEL DIBNER PO No ▶ 203-903-0762 Inization does not have an office or place of bus or a Group Return, enter the organization's four group, check this box · · · ▶ ☐ If it is four armes and EINs of all members the extension is	F/siness in the digit Group E r part of the g	AX No ▶ 802-748-4919 United States, check this box · · · · · · · · · · · · · · · · · · ·	If this is	 a	· · · • □
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